



GUINEA EBOLA RESPONSE

INTERNATIONAL ORGANIZATION FOR MIGRATION

SITUATION REPORT •
From 4 to 20 January, 2016



News

Supervising the health check point of Zenie, in Macenta. © IOM 2016

■ On 12 January, a 22 year-old woman died in Tonkolili, in the Northern part of Sierra Leone. Two days later, an analysis of a sample taken from her body confirmed that she died of the Ebola virus disease (EVD).

■ By January 15, the National Coordination for Ebola response asked IOM to restart its health screening activities at Points of Entry (PoE) in the areas bordering Sierra Leone.

■ On 12 January, IOM deployed materials and equipment in Boke in the context of launching Community Event-Based Surveillance activities (CEBS).

Resurgence of Ebola virus disease in Sierra Leone

On January 12th, M. J. , a 22 year-old student from the town of Lunsar, died in the town of Magburaka, the capital city of Tonkolili District, in the Northern part of Sierra Leone. Two days later, analysis of samples taken from her body proved that the cause of death was EVD. Investigations have revealed that she had stayed at various places in the sub-region and was in contact with many people, some of which have been identified, others not. Efforts are ongoing to trace her route in order to identify all the people with whom she had been in contact and thus restrict the spread of the disease.

This resurgence of EVD in neighboring Sierra Leone reminds us that we are not yet definitively out of the risk of a resurgence of the epidemic. As soon as January 15, the Government of Guinea asked its partners, including IOM, to revive health screening activities along the border with Sierra Leone, particularly at the point of entry of Pamelap.

Since the official declaration of the end of the Ebola epidemic in Guinea on 29 December 2015 by the World Health Organization (WHO), no new cases have been reported. However, authorities continue to stress the need for heightened vigilance throughout the country.

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IOM RESPONSE



Case management

Following the announcement of the confirmation of a new EVD case in Sierra Leone on 15 January, the National Coordination for Ebola Response has taken steps to strengthen health surveillance in the prefecture of Forecariah, which is a region bordering Sierra Leone.



Border Health Management : Health Control reinforced at the borders with Sierra Leone

On January 15th, at the request of the National Coordination for Ebola Response, IOM strengthened health screening activities at Pamelap point of entry (PoE). During the following days, it reactivated the cross-border operational plan between Forecariah and Kambia (in Sierra Leone) and participated in the identification and training of community health workers in Forécariah for community event-based surveillance.

IOM is also continuing its border health activities at the maritime points of entry thanks to the support from the Government of Japan. Following the confirmation of the new Ebola case in Sierra Leone, it reactivated its health screening activities in the ports of Kamsar, near the border with Guinea-Bissau.

In addition of these emergency activities, on 14 January, IOM organized a supervision mission to Rapata, Fria, and Konimodia ports in Forecariah prefecture to verify if health screening checkpoints were still functional. In Rapata, IOM met with the managers of the port to remind them once more of proper health screening protocols and the importance of community event-based surveillance.



Demonstration on the use of the hand washing device in the port of Rapata, Forécariah. © IOM 2016

In the Forest Region, IOM continues its border-health activities. Between 1 and 4 January, IOM's sub-office in Nzerekore recruited and trained two Project Assistants to supervise Macenta and Gueckedou regions and set-up "satellite offices". It also organized supervision missions to the health screening check-points in Badiaro, Kotizou, Yalenzou, Nongoa, Thuo and Zenie. On 13 January, it deployed three doctors to work on health screenings at those points of entry.



Health screening at the PoE of Zenie, Macenta. ©IOM2016

Since the launching of health screening activities, **72,458 people** were screened in the Forest region (of which **29,921 were women and 2,984 were children**) and **six alerts** were reported. Furthermore, on 6 February, IOM will begin to renovate eight points of entry in Wolono, Gouela (on the border with Ivory Coast) and Baala, Yalenzou, Thuo, Zenie, Kotizou, and Nongoa (on the border with Liberia).

On 14 January, IOM participated in a meeting held at the National Directorate of Civil Aviation in Conakry with officials from the Centers for Disease Control (CDC) about the monitoring of health screening activities at the International airport of Conakry. They decided to maintain health screening checkpoints at the airport and at the companies desks and provide new trainings to health screening agents along with all airport staff.



Strengthening Health Systems

IOM's construction unit organizes regular monitoring missions to the field to supervise the renovation of health posts and health centers in border areas.

To this end, on 10 January IOM traveled to Kaffou and Layah, two communities in the prefecture of Forecariah. The organization conducted another a similar assessment mission at Kamakolon, in the prefecture of Boke, on 12 January, 2016.



Renovating the main building of the health post of Kaffou, near Forecariah, by IOM. © IOM 2016



Support to survivors in their socio-economic recovery

On 7 January, IOM met trainers selected to work with Ebola survivors through a project of reintegration for survivors in Boké.



Meeting with selected trainers to work with Ebola survivors in Boké. ©IOM 2016.

On 11 January, the IOM sub-office in Boké had a visit at Katongoro in order to finalize a list of the people affected by and cured of Ebola who will benefit from the training. Criteria were defined to select 53 beneficiaries for the training: they included the loss of a family member or the presence of a person cured of Ebola in the family, the experience of a quarantine implementation due to Ebola case.

On 15 January, survivors of the districts of Tamarassy, Kayinguissa, Filima and Bagataye were asked to create Orange Money accounts to be able to collect the grants the program proposed for their economic recovery.



Collecting travelers' data

IOM continues its data collection activities at certain land and sea borders, to prevent the detection of any suspected case of MVE or other disease and monitor them. IOM organizes regular visits to the different points of entry (PoE) to assess the equipment needs of its teams.

However, data collection has stopped at certain sites as well: in Boké, IOM held a mission to recover equipment from an area called Kalounka following the conclusion of Flow Monitoring Point activities. IOM thanked the local authorities for their support and sincere collaboration.



Information management

From 4 to 8 January, IOM's Information Management (IM) team has been elaborating maps, statistical analysis, and producing reports from participatory mapping exercises and public health vulnerability mapping conducted last month.

From 11 to 15 January, the IM team also started analyzing Flow Monitoring Points data (monitoring of migration flows) and started planning the mission for participatory mapping and vulnerability survey in Boké and Gaoual.



Training / Capacity building

With support from the Government of Japan, IOM continues its border health activities at maritime points of entry.

After having trained community volunteers to carry out health screenings in the ports of the capital city, IOM organized monitoring missions in Conakry at the same ports of Kaporo, Sonfonia, Dabondy and Bonfi on 12 January, and at the Autonomous Port and ports of Boulbinet, and Dixinn on 13 January.



Monitoring missions at the Autonomous Port of Conakry. © IOM 2016



Community Event-Based Surveillance

IOM's most important EVD-related activity in early 2016 will likely be the launch of Community Event-Based Surveillance (CEBS) in Guinea.



Training session of 41 supervisors in Forecariah—preparation of the launching of CEBS activities. © IOM 2016

On 7 January, 2016, IOM participated in a workshop organized by the National Coordination about CEBS. The objectives of the workshop were to present the particular approach to the Community Event-Based Surveillance, discuss equipment needs at each level of surveillance, finalize the positions of each partner in the prefecture of Forecariah, and define of the official launch of this activity in the prefecture.

Between 9 and 11 January, the team organized field visits to Benty, Kakossa, Farmoriah and the urban commune of Forecariah to get in touch with local authorities, heads of health centers, and community leaders in order to gather information on the number of districts and sectors in these areas. IOM also visited health posts in these areas.

On 12 January, IOM participated in a micro-planning workshop related to CEBS with the administrative and health authorities at the prefectural, sub-prefectural, and local levels. Participants discussed the CEBS program, explored the reasons for the

decrease in alerts, examined the division of districts and sectors, planned the training of supervisors, and organized decentralized community meetings to get the participation of local leaders from the beginning of the program.

On 13 January, a meeting between the CEBS partners was held over the minimum package of materials for each partner in its area, budgeting for community feedback meetings, training Community Health Workers, and visibility items.

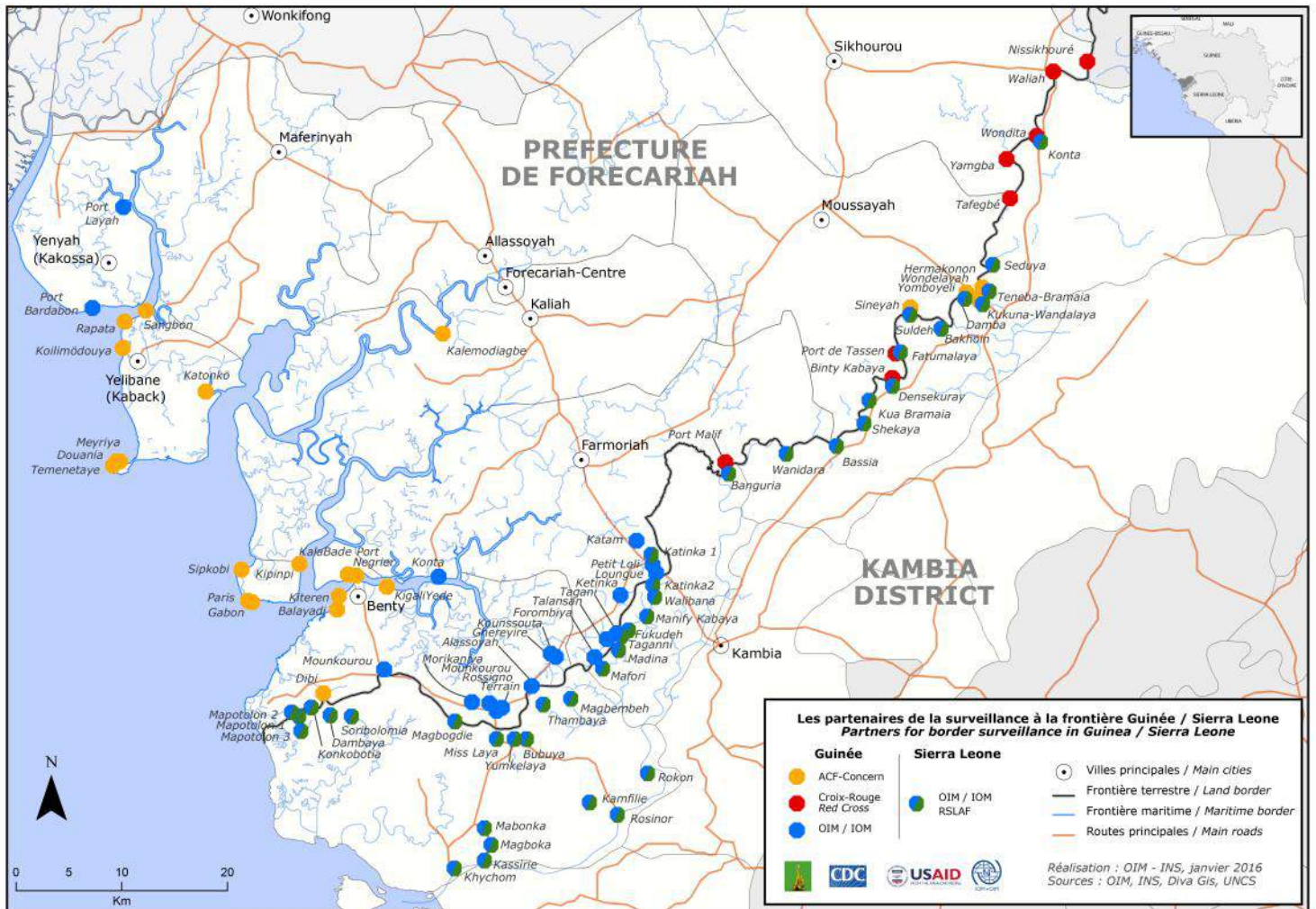
On 14 January, IOM participated in the training of supervisors, in close collaboration with the Officer in Charge of Diseases (MCM) of the Prefectural Health Directorate (DPS). Criteria for selecting Community Health Workers were defined and the feedback meeting was planned.

The National Coordination requested IOM and the Red Cross to cover the area of Boke for CEBS implementation. On 12 January, the IOM Boke sub-office received materials and equipment to prepare the CEBS activities. Two days later, a meeting was held between IOM team, the local health authorities, and the Red Cross to clarify the areas of intervention of the two partners and ensure good collaboration between them for the success of CEBS activities. The same day, IOM met with local IOM field staff to discuss the details of CEBS activities.



IOM meeting with TAs to prepare the launching of Community Event-Based Surveillance © IOM 2016

Health screening activities at borders in the Prefecture of Forecariah (Guinea) and Kambia District (Sierra Leone).



IOM'S PARTNERS ON THE EBOLA RESPONSE IN GUINEA INCLUDE:

THE BELGIAN
DEVELOPMENT COOPERATION

