



GUINEA EBOLA RESPONSE

INTERNATIONAL ORGANIZATION FOR MIGRATIONS

SITUATION REPORT •
From October 5 to 20, 2015



Meeting with authorities before offering hygiene kits to port agents in Port Nene — Kamsar. © IOM 2015

News

■ IOM Guinea has trained 20 agents at the National Data Institute (INS) on the use of the Kobo application (creating forms and extracting data). This was the first part of a skill-exchange between IOM and INS on October 9th.

■ IOM Guinea took part in a capacity building exercise to standardize mapping methodologies within cross-border health programs in Sierra Leone from Sept. 30 to Oct. 10.

■ IOM took part in the inauguration of the Ebola Treatment Unit (ETU) of Dubreka, on October 9th, which was held in the presence of the National Coordinator of the Ebola response, Dr. Sakoba Keita.

Ebola Situation in Guinea

Three new cases were confirmed in Guinea during the week of October 12th to 16th. According to WHO's latest report dated October 14th, a case was registered on October 13th at Ratoma, in the suburbs of Conakry. Yet, the other one was detected on October 14th after a post-mortem analysis in the prefecture of Forecariah. That last community death was a 35 year old woman at Kindoyah, a village in Kalia sub-prefecture, located at a few meters from Tana market in Forecariah. The woman's nine month-old baby was confirmed positive on October 16th.

After investigations, it was found out that the deceased woman had had contacts with a traditional healer's wife who had been cured of Ebola she contracted from her husband.

According to the latest situation report of the National Coordination of the Response Against the Ebola virus, as of October 16th, there were **3 807** confirmed, probable and suspected cases in Guinea, including **2 535** deaths (66,6 %).

CONTACTS

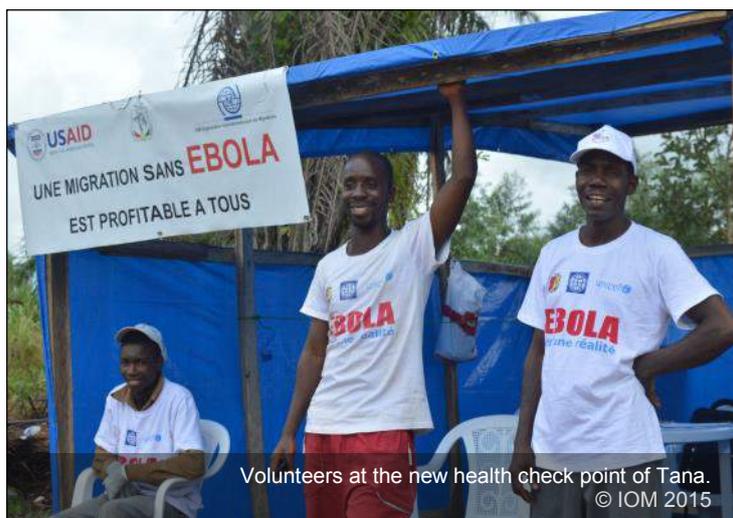
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IOM RESPONSE



Case management

In response to the latest community death that tested positive to EVD at Kindoyah near Tana village, Prefecture of Forecariah, IOM and its partners WHO, Unicef, WFP, the prefectural coordination of Ebola response, and local NGOs have been putting in place measures to quarantine the inhabitants in and around Tana village in order to curtail and provide necessary medical assistance to persons or group of persons who may have come in contact with the victim. IOM and its partners registered **224 followed contacts** on October 16th, including **145 high risk contacts** and **79 low risk** ones.



Volunteers at the new health check point of Tana. © IOM 2015

As a major surveillance actor with regards to population movement, IOM installed health check points at Tana main entrance, at which all passersby have their temperature controlled, wash their hands with chlorinated water, are sensitized on EVD, and give information about their origin and destination. Two Flow Monitoring Point (FMP) agents were sent to the new health check point to train volunteers.



Health and Humanitarian Border Management

Since the beginning of the crisis, IOM has been providing support and technical knowledge to the Government of Guinea (GoG) in health management of land and maritime borders by installing health control check points (HCP), collecting travelers' data at border entrance points, health education, and encouraging community based surveillance in vulnerable border areas.

Thanks to the support of the Japanese government, since March 2015, IOM has installed **15 health checkpoints at ports and docks** along the coast in order to strengthen health control at maritime borders. These ports are in Conakry, Forecariah, Dubreka and

Boke, including three new health checkpoints at Koukoude's wharf, in Boffa, installed on October 1st.

On October 13th, IOM distributed hygiene kits to port agents in Katounou, an area near Boke, and a training to raise awareness about good hygiene practices and EVD.

IOM and its partners, CDC, WHO, and the prefectural coordination of Ebola response held a cross-border meeting on October 14th with their counterparts from Sierra Leone, at the health check point of Pamelap, between Kambia, in Sierra Leone and Forecariah, in Guinea. The objective of the meeting was to consolidate cooperation between partners from the two prefectures, emphasizing the necessity of a common follow-up for any suspected case of EVD which may occur from on either side of the border.



Collecting Travelers' Data

The HHBM Mali-Guinea joined project came to an end on September 30th. However, IOM continues to collect and monitor daily data of travelers at the 5 targeted points of entry (PoE). IOM equally carries out sensitization campaigns on basic Infection Prevention and Control (IPC) measures. In total, **67,531** people and **9,508** vehicles crossed the border from February 13th to August 31st, 2015.



Entretien avec les agents FMP sur un Point d'Entrée de la frontière Guinée/Mali. © IOM 2015



Trainings, capacity building

IOM took part in a door-to-door good hygiene practices training of **46 community health agents** (CHA) at Ouassou, near Dubreka,

organized by WHO, in early October, to sensitize populations about effective feedback of community deaths. During that training, CHAs were briefed on EVD.

Responding to a request from the national Ebola response coordination, IOM and CDC trained 110 members of road transporter unions on active surveillance of passengers, from October 7th to 9th in communes of Matoto, Ratoma and Matam, in Conakry. The training focused on the preparation of chlorinated water, the use of thermoflash and the different communication mechanisms in managing suspect EVD cases.

In addition, in order to sensitize transport professionals in health surveillance, IOM offered hygiene kits to motorcycle taxi drivers of Ouassou center and Koumbia, near Dubreka, while sensitizing them on Ebola virus disease prevention.



Offering health kits to motorcycle taxi drivers of Ouassou - Dubreka. © IOM 2015

fight against the stigmatization of survivors, IOM met the National Association of Guinean Theatre to work on producing an educative audiovisual mini-series.

This which will be shown in markets, schools, transport stations and ports of vulnerable border zones from now until the end of the year.



Briefing women of Djigui and Toumania groups - Dubreka. © IOM 2015

 **Social mobilization**

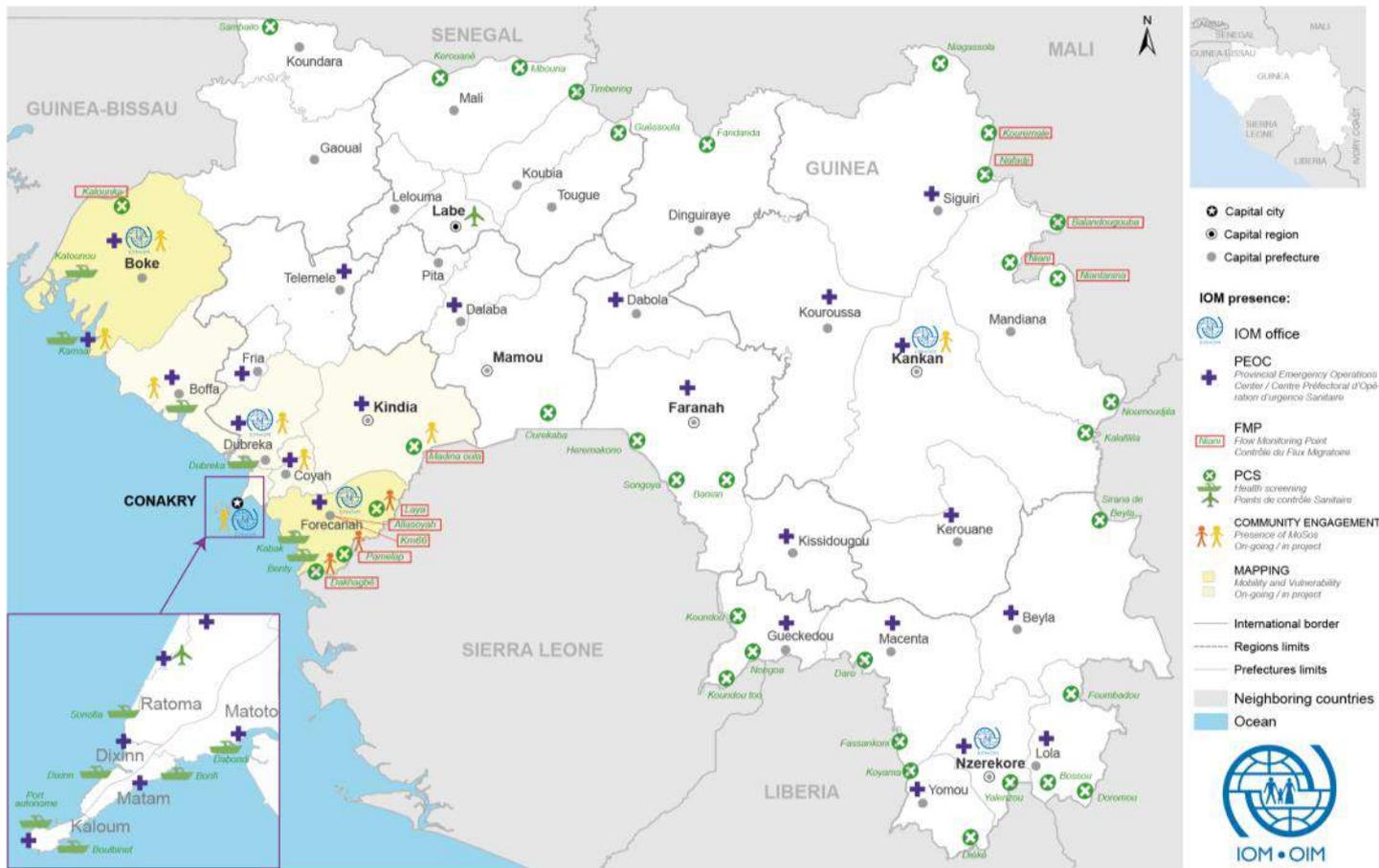
IOM remains convinced that local commitment in community based surveillance is essential to reach an optimal epidemiological vigilance. To that end, IOM mobilizes its teams to raise awareness in communities on EVD and the importance of their implication to community based surveillance.

On October 8th, IOM briefed women of Djigui and Toumania groups, in Dubreka, about community based surveillance and health control.

It conducts regular field missions in different prefectures where it is present to start discussions with partners, local NGOs, health officials, and sub-office staff, on strengthening methods of community surveillance at vulnerable and maritime border zones.

In preparation of the launching of a regional campaign to encourage people to stay vigilant in the fight against EVD , and to

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