



GUINEA EBOLA RESPONSE

INTERNATIONAL ORGANIZATION FOR MIGRATION

RAPPORT DE SITUATION •
From 8 to 31, March 2016



Launching of the "soft ring containment" of Koropara sub-prefecture. © IOM Guinea 2016

News

■ On February 29 and March 17, three people died in the sub-prefecture of Koropara following an unknown disease characterized by fever, deep emaciation, diarrhea including vomiting of blood. A few days later, two other people developed the same symptoms. The tests, carried out on March 17, were positive to the Ebola Virus Disease, indicating the resurgence of the disease in Guinea, nearly three months after it was officially declared over by WHO.

■ On March 9, 2016, IOM organized a ceremony during which, it officially handed-over the health post of Kamakouloun to sub-prefectural authorities of Kamsar, prefecture of Boke. The health facility was rehabilitated and fully equipped by the organization.

■ From March 9 to 11, 2016, a joint IOM-RTI-DPS mission went to different sub-prefectures of Boffa for a maiden contact with local authorities. The aim was to explain the criteria used in the selection of CHA (Community Health Assistants), validating the list of CHA provided by the DPS in their localities and selecting 30 participants for the participatory mapping exercise (10 wise men, 10 youths and 10 women).

Situation of the Ebola virus disease after its resurgence in Guinea

In the sub-prefecture of Koropara, located at 97km from the city of N'Zerekore, an approximately 50-year-old farmer along with his two wives died between February 29 and March 17, 2016 following an unknown disease characterized by fever, deep emaciation, diarrhea and vomiting of blood. A few days later, an 8-year-old girl and a 40-year-old woman belonging to the same family developed the same symptoms. They were taken to an unknown place by the villagers. After negotiations between prefectural authorities and local populations, they finally accepted that the rest of the family be taken to the Ebola Treatment Center (ETC) of N'Zerekore for Ebola diagnostic tests. These tests were positive to the Ebola Virus Disease indicating the resurgence of the disease in Guinea, nearly three months after it was officially declared over by WHO.

Following the resurgence of the disease in Koropara, in the forest region of Guinea, the Government and the National Coordination of fight against Ebola decided to set-up a micro-quarantine around the village to contain the widespread, identify contacts and research new cases. IOM Conakry sent teams to support the sub-office in N'Zerekore. It installed two health checkpoints at the entrance and the exit of the village. It deployed health screening and flow monitoring agents to ensure follow up of contacts. IOM also installed an isolation site provided with two generators to allow the HCP function. A third HCP was set-up at Koroh, on the road to Koropara. IOM will actively take part to the micro-quarantine of the area during the desired period to complete the containment.

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IOM RESPONSE



Case management

On March 17, 2016, IOM took part at a meeting held at the UNDP office in N’Zerekore on exchange over the alert cases concerning three successive deaths in the sub-prefecture of Koropara. The next day, an analysis of samples taken from a patient admitted at the Ebola Treatment Center (ETC) of N’Zerekore confirmed that it was the Ebola virus. It was after the confirmation that the resurgence of the disease in the sub-prefecture of Koropara was officially declared by the World Health Organization.

In order to contain the widespread and limit infections, a « soft ring containment » was set-up around the village to control people’s movements. IOM installed three health checkpoints where people going in or out of the village are systematically screened and proceed to washing hands. IOM also participates in all meetings of the coordination on the monitoring of the situation.



Health checkpoint of Koroh, on the road to Koropara. © IOM Guinea



Humanitarian Border and Mobility Management (HHBM)

IOM’s HHBM projects continue leading all activities related to health screening at borders, strengthening the health system and the community event-based surveillance. Its teams are very active in the field in organizing, implementing and supervising EVD response related activities in the forest region and other activities aimed at preventing its resurgence in other bordering regions of Guinea.

In the Forest region, IOM participated on March 18 in health emergency meetings at the Prefectural office of N’Zerekore

and at the Prefectural Health Department (DPS). During these meetings, participants discussed the resurgence of the disease, measures and actions to be undertaken immediately in response.



Health screening point at Koropara. © IOM Guinea

In Boke, IOM regularly takes part in the Ebola Coordination meetings. During these meetings, participants review all ongoing Ebola and post-Ebola related activities.

In Forecariah, IOM took part on March 4 and 7, in technical meetings of the prefectural coordination of fight against Ebola, along with other partners like WHO, IFRC, FRC, GRC, ACF, CU, AGIL, TdH, etc. During these meetings, participants reviewed all activities related to preventing the EVD resurgence.

With support from the Government of Japan, IOM continues with health screening activities at maritime borders. On March 8 and 9, the Japan project team carried out



Health post of Kamakouloun (Boké). © IOM Guinea

supervision visits to ports in Conakry (Sonfonia, Dabondy, Kaporo, Bonfi, Boulbinet Dixinn and the port of Conakry). These visits aim at ensuring the continuation of good hygiene practices through washing hands. They controlled the hand washing device and distributed soaps and identified cases of alert.



Strengthening the health system at borders

As part of its support to the Government of Guinea in strengthening the health system, IOM led activities to rehabilitate and equip health posts and points of entry in bordering areas hardly hit by the outbreak. To this end, the health post of Kamakouloun, in the sub-prefecture of Kamsar, prefecture of Boke, benefited from some of these rehabilitation and equipment activities. The rehabilitation works which started at the end of October 2015 ended early February 2016.



Motorbike offered to the Chief of the health post of Kamakouloun. © IOM Guinea

On March 9, 2016, IOM organized a ceremony during which, it officially handed over the health post of Kamakouloun to local authorities. The Prefect of Boke, the regional Director of health (“DPS”), along with many other administrative and health officials attended the ceremony. There were also representatives from WHO, the Red Cross and other Response/humanitarian partners. A motorbike was offered to the chief of the health post to facilitate his access to patients in villages of his district.

Between 7 and 11 March, IOM’s PEOC team organized inventory missions to all DPSs of the forest region rehabilitated and equipped by IOM.

It also proceeded with the distribution of office supplies to Communal Health Departments (DCS) in Dixinn, Matam,

Kaloum, Matoto, Ratoma and to the Regional Health Department of Conakry (DSVCo).



Distribution of office supplies to the Communal Health Department of Kaloum.—Conakry. © IOM Guinea

In the Forest Region, IOM carries out regular visits to different sites of construction and renovation of points of entry in Zenie, Nongoa, Kotizou, Thuo, Gouela, Yelanzou, Baala and Wolonoh.

On March 31, the 7 health checkpoints at the border with Sierra Leone were closed and FMP agents were removed.

In the region of Kindia, on March 25, IOM organized a ceremony during which, it officially handed-over the building it renewed at the Point of Entry of Madina Oula to local authorities. The Prefect of Kindia, the Prefectoral Director of health, as well as many other administrative and health officials and Ebola Response partners were present at the ceremony. Madina Oula communities were highly mobilized.



Point of Entry of Madina Oula equipped with isolation room. © IOM Guinea



Capacity building

In Dubreka, on March 8, IOM organized training of close-supervisors in the framework of community event-based surveillance. Close-supervisors are composed of chiefs of health posts and centers in Dubreka. 33 people out of the expected 34 took part in the training session including 10 in the urban commune. On March 11, another training session was organized for Community Agents (CAs) under the same framework. 139 people attended out of the expected 178. The content of the training was mostly about the definition of a focal point, a case, the community event-based surveillance (CEBS), actors and main roles of surveillance, functioning of CEBS, roles and responsibilities of CAs and interpersonal communication.



Training of supervisors of CEBS— Dubreka. © IOM Guinea

In the Forest Region, on March 16, IOM took part in a workshop on prevention and conflict management organized in N’Zerekore by the Danish Refugee Council (DRC).

On March 10, the sub-office in Forecariah organized a training for health screening supervisors on the use of thermo flashes.



Support to EVD survivors

Le 9 mars 2016, On March 19, IOM organized a community dialog session in Tamaransy, Boke. It aimed at finding a community project to be carried out in order to facilitate the socioeconomic reinsertion of Ebola survivors in the locality. At the end of the workshop, the community members were unanimous that a market to be constructed within the community in order that survivors and communities in surrounding localities sell cashew nuts, vegetables, red oil and other products.

The community of Tamaransy, in collaboration with local authorities, have allocated a land for the construction of the market.



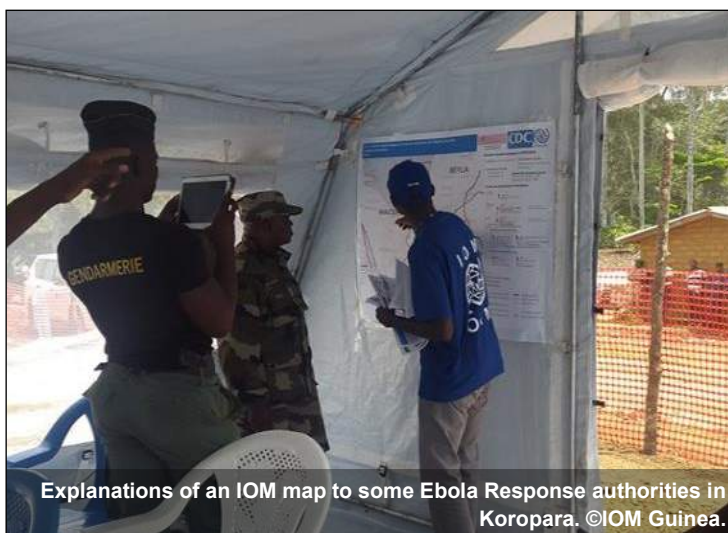
Community dialog session with survivors of Tamaransy—Boké. ©IOM Guinea



Information Management

In the Forest Region, between March 15 and 20, the IM team led a quick assessment mission of accessible sites and training of local investigators in the prefectures of N’Zerekore, Lola, Gueckedou, Macenta, Yomou and Kissidougou. On March 20 and 21, local investigators started collecting GPS data of vulnerability in the rural commune of Koropara in the framework of preparing participatory mapping activities in the locality.

During the first 15 days of EVD resurgence, the IM unit produced 17 maps. These maps allowed the CNLE and its partners to adjust their emergency interventions in the area. As example, the map of vulnerability sites (attached below) was used to step-up the micro-quarantine and the active research of cases and contacts.



Explanations of an IOM map to some Ebola Response authorities in Koropara. ©IOM Guinea.

Between March 12 and 15, the IOM’s Information Management team carried out participatory mapping activities in sub-prefectures of Benty, Kakossa, Kaliah, Farmoriah, Sikhourou, Manferinya, Allassoyah and in the urban commune of Forécariah.



Community involvement

IOM’s community involvement team is very active in implementing community event-based surveillance activities (CEBS). On March 14, IOM Boke went to localities of Wakrya, Kantcheingury, Bourouma, Tamaransy and Kassef to explain to community leaders, youth and women that from now they are actors of their own health through Community Surveillance Agents (CSA). Therefore, they have to be fully involved for the success of CEBS activities.

On March 9 and 10, IOM took part in cross-border meetings at Benty (Forecariah) and Toureyah, in Kambia (Sierra Leone). These meetings focused on sensitization communities on border protection, respect of hygiene measures and community involvement.

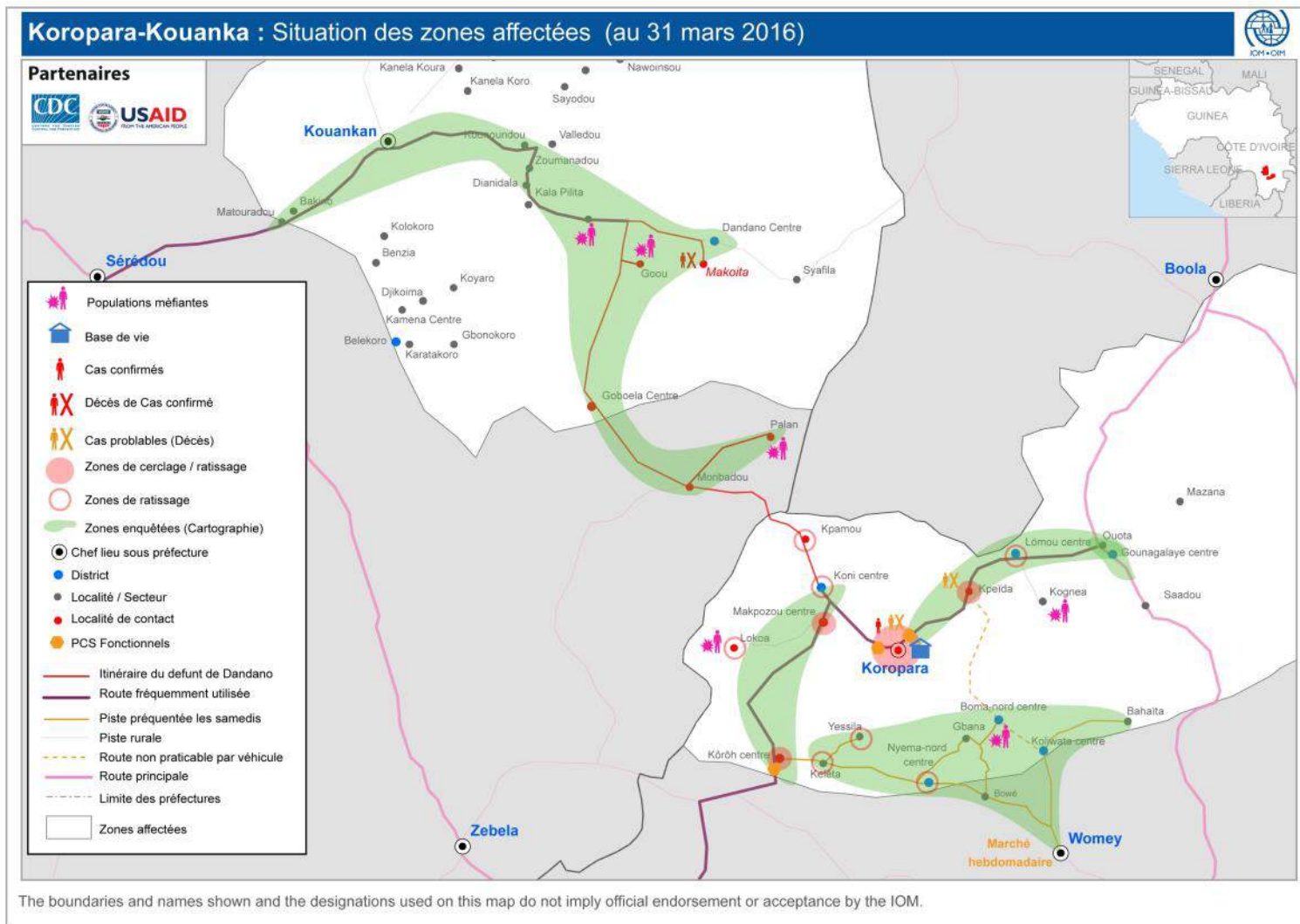
On March 9, IOM proceeded in the distribution of 11 bicycles to volunteers of four points of entry (Beyen-Beyen, ligne rouge, poste 11 and Makoutaya) of Madina Oula in the prefecture of Kindia. On the 16 and 17, IOM took part in training close-supervisors. They were composed of chiefs of health posts and centers in Kindia.

On March 17, the IOM team in Boffa received equipment for field assistants. The equipment was composed of motorcycles (locks and registration cards), gloves, rain coats and shirts. The aim is for them to supervise community surveillance agents.

On March 21, IOM distributed materials to community surveillance agents of Tobolon, Keitayah, Bailobayah center, Bailobayah plateau and in the urban commune of Dubreka. Materials composed of bikes, phones SIM cards, rain coats, boots, notebooks and backpacks. This was to help them in the detection of suspected cases of epidemic-pone disease at the health centers.



On March 23, the National television and Evasion TV channels started broadcasting the series “Stronger than the epidemic” produced by IOM Guinea in collaboration with the Association of Cultural and Artistic Troops of Guinea. The five episodes contain messages of sensitization against stigmatization of EVD survivors, community vigilance and missions of a community health agent. They were viewed by thousands of TV audience in Guinea and around the world. The video-clip of the official song of the series “[Ebola sigua](#)” (Ebola, go !) was also broadcasted on those Guinean television channels since then.



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



