

GUINEA EBOLA RESPONSE

INTERNATIONAL ORGANIZATION FOR MIGRATION



- On February 25, 2016, in partnership with district and health authorities of Boké, the WHO and the Red Cross, IOM officially launched the community event-based surveillance activities in the region.
- From Friday the 26th to Monday the 29th, IOM organized a training session on Health Emergency Management (HEM) for health officials in the region of Boké.
- On March 2nd, IOM officially handed over health posts of Kaffou and Layah to local authorities in presence of the Prefect of Forecariah, the Regional Health Director of Kindia alongside with many other district and health officials.

Situation of the Ebola Virus Disease after its resurgence in Sierra Leone

According to the March 2nd the WHO situation report, all contacts linked to the January 14th-20th EVD cases in Sierra Leone were released from follow-up by February 11th. If no further case is detected, the end of the transmission chain will be declared next March 17th.

In Guinea, 1, 474 alert cases had been notified in the 34 prefectures of the country amongst which 1,467 concerned community deaths during the weeks of February 28th. During the same period, 9 operational laboratories tested a total of 392 samples including 14 coming from living people and 378 from dead bodies in 20 prefectures.

Ebola Response partners remain vigilant throughout the country. They continue health screening activities in Forecariah and Kindia, bordering with Sierra Leone and in the Forest Region, bordering Liberia. Responding to the request of the Guinean government, IOM systematically screens all people crossing the 48 official and non-official points of entry (POEs) along the border with Sierra Leone.

No new case has been reported in the country since the official end of the epidemic declared by the WHO on December 29th, 2015.

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Monitoring of the situation

Since the re-launch and strengthening of health screening activities in Forecariah and Kindia, all travelers crossing the border between Guinea and Sierra Leone are screened at the 48 official and non-official PoEs. The cross border health management plan (Forest Region, Guinea-Kambia, Sierra Leone) set-up between the two countries is still in force. IOM regularly participates to meetings of National and Prefectural Coordination of Fight against Ebola (CNLEB-CPLEB) in areas where it is present.

Border **Health Management**

IOM's Border Health and Migration Management (HBMM) project continues leading health screening in border areas, strengthening the health system, and implementing community event-based surveillance. IOM teams are active in the field in organizing, implementing and supervising activities related to the prevention EVD and other epidemic-prone diseases in bordering areas.

On March 24th and 25th, IOM participated to cross border community meetings at Seneyah (sub-prefecture of Moussayah, in Forecariah) and at Kayenkissa (district of Kambia, in Sierra Leone). These meetings aimed at sharing work strategies among Social Mobilizers of Forecariah in Guinea and Kambia in Sierra Leone. Three documentary movies were shown over topics of acceptation of health screening points, notification of foreigners and orientation of sick people toward health facilities.



On February 24th and March 4th, IOM also participated to IPC (Infection Prevention and Control) cluster meetings in Forecariah with partners from the WHO, FRC, WAHA, Terre

des Hommes and JHPIEGO under the patronage of the health department.

On March 3rd, a joint mission composed of IOM, the WHO and Concern Universal (CU) went to a cross-border meeting in the sub-prefecture of Kaback, in Forecariah with heads of districts in the area. The meeting was about two sensitization topics: 1) border protection, and 2) acceptation by the community of SWAB sampling (saliva sampling) on dead bodies for analysis by the WHO agents.

Strengthening Health Systems

In the framework of its support to the Guinean Government in strengthening the health system after the EVD crisis, IOM led rehabilitation and equipment activities on health posts in hard-hit border areas.

The health posts of Kaffou and Layah in Forecariah, and Kamakouloun in Boké benefited from rehabilitation and installation of equipment. At the three sites, works started at the end of October 2015 and was completed in early February 2016.



On March 2nd, IOM organized a ceremony to officially hand over the health facilities of Kaffou and Layah to local authorities. The Prefect of Forecariah, the Regional Director of Health of Kindia, and several other administrative and health officials attended the ceremony as well the WHO and the Red Cross and other response partners.

The objective was to provide communities severely affected by the EVD outbreak with improved and equipped health facilities capable of delivering basic health services. This

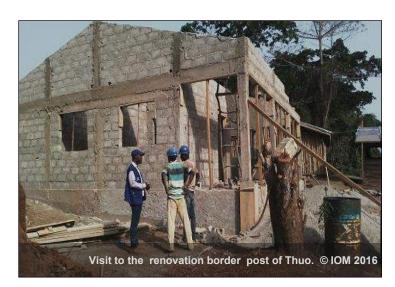


commitment is part of the health system strengthening plan proposed by the Guinean Government in July of 2015.



With the support of the Japanese Government, IOM continues its health screening activities at maritime borders. On February 23rd and 24th, IOM organized technical health monitoring at ports in Conakry (Sonfonia, Dabondy, Kaporo, Bonfi, Boulbinet, Dixinn and the national port). The aim of this monitoring was to encourage good hygiene practices and identification of suspected EVD cases.

In the Forest Region, IOM continues regular supervision visits to the renovation sites of PoEs in Kotizou, Thuo, Yalenzou, Gouéla and Baala.



Capacity building

On February 26th, IOM trainers officially launched the training in Health Emergency Management (HEM) of health officials of Boké in partnership with the George Washington University (GWU) and the National

Coordination against Ebola. The training continued until February 29th at the Regional Health Department of Boké.

It brought together three officials from the regional health department, naming the regional health Director, the head of the hygiene section and the doctor in charge of disease; 25 officials from regional health district including, 4 prefectural health Directors, 4 hospital Directors, 5 doctors in charge of disease, 5 pharmacists/logisticians and 5 microproject directors. The overall objective of the training was to strengthen capacities of health officials in emergency management, so that they can better manage future health emergency situations.



In the framework of implementing community event-based surveillance (CEBS) activities, IOM organized training workshops for CEBS agents in the six sub-prefectures and the urban commune of Boké.

In Dubreka, following a request of the Prefectural Health Department (PHD), IOM took part in the training of health centers officials in the framework of the National Vaccination Day (NVD) against polio on March 8th.

In Forecariah, between February 22nd and 24th, IOM organized visits to PoEs as well as training missions for health screening agents in the sub-prefectures of Farmoreah, Benty and Kakossa. On March 3rd, two community agents from Rogbane Filitagui were trained on health screening too.

Collecting travelers' data

IOM continues its data collection at some maritime and land borders of the country to prevent any EVD suspected case or cases of other epidemic-



prone disease from reappearing and ensure monitoring. IOM organizes regular visits to PoEs to assess their needs of materials.

From February 20th to 26th, **24,624 people** (including 10,450 women and 1,585 children) were registered at the seven PoEs of the Forest Region. From February 27th to March 3rd, **10,149 people** (including 4,444 women and 616 children) to be registered in relation to five alert cases.

By March 3rd, **149,853 people** (including 62,920 women and 7,919 children) had been registered in relation to the five alert cases alert cases at the seven PoEs in the Forest Region since their official launch.

Information management

Between February 1st and March 4th, the IOM Information Management Unit (IMU) analyzed the data collected during the mapping of public health vulnerabilities in Dubreka. Data was collected in the urban commune of Dubreka and the sub-prefecture of Khorira in December of 2015. A report was finalized based on those data collection.

The resulting maps and graphics were produced are based on information collected at 36 PoEs, 218 vulnerable spaces (car stations, markets, schools, etc) and 28 health facilities. For example, these documents highlighted the fact that health facilities and staffs (Khorira in particular) do not dispose of equipment safely and that the geographical distribution of health facilities is not optimal for prevention f epidemics. Moreover, most gathering places, such as markets and car stations, lack health screening and flow monitoring equipment.



Between February 10t and 24th, the IMU team went on a mission in Boké and Gaoual to proceed with mapping 18 border sub-prefectures. In total, 91 PoEs, 558 vulnerable sites, and 55 health facilities were investigated.

Community Engagement

The IOM's community engagement team is very active in the field to implement community event-based surveillance (CEBS).

On February 25th, it proceeded with the official launch of community event-based surveillance activities in partnership with the Red Cross, local administrative and health authorities of Boké. Regional and local officials were invited to ensure the success of the event. Officials promised to support IOM in community event-based surveillance. The next day, IOM distributed 483 bicycles, 483 phones with credit, and 483 other work materials to community surveillance agents at seven locations.



On March 3rd a meeting between IOM, the WHO, IMC, CECI and DRC was held in Boké in order to cooperation in CEBS implementation and the mapping of Community Health Assistants (CHA).

In Dubreka, IOM organized micro-planning workshops about CEBS activities in different areas of the city from February $22^{\rm nd}$ to $26^{\rm th}$.

In Forecariah, IOM staff participate in all communication and social mobilization meetings. On February 24th, IOM staff organized a meeting with community Assistants of Pamelap to assess progress of CEBS activities. On the 25th, IOM staff took part to the set-up SA-Ceint Units in the framework of

the active surveillance strategy around Ebola survivors in all sub-prefectures. The same day, a meeting with the health center manager and community Assistants of the urban commune was held to assess the progress of CEBS activities. On March 1st, all partners involved in the surveillance met to talk about the choice of community assistants, their endowments, monitoring and evaluation and the planning of joint supervision exercises.



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













