**Background:** To date, no confirmed cases of Ebola virus diseases (EVD) have been reported in Guinea Bissau. However, the country remains at high risk given its proximity to Guinea. The continued number of EVD cases in the past weeks in the affected countries calls for efforts to be scaled-up and to maintain prevention and preparedness in high-risk countries such as Guinea-Bissau. According to WHO, there have been a total of 22,092 reported EVD cases in eight affected countries (Guinea, Liberia, Nigeria, Senegal, Sierra Leone, Mali, Spain and the United States of America), with 8,810 deaths\(^1\).

**Actions Taken:** In Guinea Bissau, the United Nations and its partners have been providing support to the prevention and preparedness efforts of the Government, in line with its National Ebola Prevention and Response Plan. The UN Agencies have joined hands with MSF, CDC, WB, AfDB and EU to strongly advocate, promote and catalyze leadership, coordination and action for rapid establishment of the necessary national EVD preparedness and response components. At the level of coordination, weekly High-Level Meetings are chaired by the Prime Minister or the Minister of Health, and technical sub-groups have been established. A “National High Commissioner for Ebola Response” has been appointed by the Prime Minister to coordinate the efforts of the Government and its key national and international partners. The UN in Guinea Bissau has also been working with UNMEER to facilitate improved communication between Guinea Conakry and Guinea Bissau.

**Recent Developments:** A second joint assessment and support mission to the Guinean border was conducted by UNICEF, WHO, the High Commissioner for Ebola, Ministry of Health and Ministry of Interior on 6 January, this time to Contabane, Tombali Region, to assess overall prevention, preparedness and response efforts with Regional Authorities and partners. The mission reviewed entry point surveillance, pre-positioned essential supplies, and worked to strengthen technical capacity of health workers and border post officers. A communication channel and a regional coordination platform were agreed among the regional authorities and partners. Regional EVD committee are being activated by MoH and regional rapid response teams established, trained and equipped. Regional (temporary) isolation facilities are set-up. With support from UNICEF, EVD prevention is being further reinforced in around 1,600 schools (via 3,200 trained teachers), and in communities across all Regions, through around 2,000 Caritas volunteers and 600 public transport drivers. Epidemiological surveillance at border regions with Guinea is being reinforced through 130 Red Cross volunteers, with support from UNICEF. The Government of Cuba supported with capacity building, while the Governments of Spain and China provided further emergency supplies. The Portuguese Government will be providing a mobile laboratory for EVD sample testing to be operated by Portuguese technical staff.

**Funding:** Through its various Agencies the UN has mobilized funds for its EVD prevention and preparedness interventions in Guinea Bissau, and is grateful for the financial support provided by the European Union, US Fund for UNICEF/Gates Foundation, Sweden Humanitarian Funds for Ebola, UNICEF France National Committee, German Funds for Ebola, Africa Development Bank and the World Bank.

**Preparedness EVD Checklist for Guinea Bissau:**\(^2\)

<table>
<thead>
<tr>
<th>Component</th>
<th>Progress in Guinea Bissau</th>
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<tbody>
<tr>
<td>Overall coordination</td>
<td>National EVD Contingency Plan prepared.</td>
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<tr>
<td></td>
<td>An inter-ministerial task-force established, led by the Minister of Health.</td>
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<td>Weekly High-Level partners meetings, chaired by the Prime Minister / Minister of Health.</td>
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<td>“High Commissioner for Ebola Response” appointed to coordinate the national efforts.</td>
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<td></td>
<td>Establishment of coordination structures and technical multisectoral sub-committees.</td>
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<td></td>
<td>Simulation (table-top) exercise performed.</td>
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<tr>
<td>Rapid Response Team (RRT)</td>
<td>National level RRT trained by MSF. Training for regional RRTs done in Regions.</td>
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<tr>
<td></td>
<td>Regional Level RRT trained and ready in Gabu Region.</td>
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<tr>
<td></td>
<td>420 health personnel trained (Bissau, Bijagos, Bafata, Tombali, Quinara and Gabu regions) by WHO.</td>
</tr>
<tr>
<td></td>
<td>MoH/INASA, MSF, UNFPA, UNICEF and WHO have stocks of medications, laboratory consumables, PPE, laboratory sample kits, disinfection material, tents, WASH supplies, fuel, pre-positioned etc.</td>
</tr>
<tr>
<td></td>
<td>Two toll-free 24-hour hotlines functional.</td>
</tr>
</tbody>
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\(^1\) WHO Ebola Situation Report (28/01/2015): [http://apps.who.int/iris/bitstream/10665/150249/1/roadmapsitrep28Jan15_eng.pdf?ua=1&ua=1&ua=1]


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### Guinea Bissau - EVD Update
(United Nations, 29 January 2015)

| Public awareness and community engagement | • EVD communication materials disseminated, and awareness training of key stakeholders (ministries, UN agencies, embassies, CSOs, media, religious and traditional leaders, transport association, fire department, hotel industry, street markets, youth groups, academia etc.) by UNICEF since April 2014.  
• Inter-personal communication, through 1300 trained community health workers trained by UNICEF on basic EVD prevention, preparedness and personal hygiene, at community level.  
• Interpersonal Communication also conducted through community theatre groups, religious leaders, schools, youth associations, and through the network of UNICEF NGO and CBO partners.  
• Mainstreaming EVD prevention into school activities, with 3,262 teachers trained on EVD prevention and preparedness and communication material distributed in 1,631 schools.  
• UNICEF supported broadcasting EVD prevention on national/community radios in local languages.  
• Hand-washing stations installed at some points of entry, public places, and institutions, schools, health facilities and markets.  
• Communities, religious/traditional leaders and traditional healers mobilized around EVD prevention through around 2,000 Caritas volunteers, with support from UNICEF.  
• Around 600 public transport drivers (taxi, buses, motorbikes) mobilized for EVD prevention, with support from UNICEF. |
| Infection Prevention and Control | • PPE distributed to key health facilities by WHO and UNICEF, though basic protection, such as gloves is still not used routinely. Further cleaning material also provided by UNFPA.  
• Reproductive Health kits and drugs for EVD prevention and treatment provided by UNFPA. |
| Case mgmt’ a) ETC | • A 20-bed isolation center supported by MSF is ready at the national hospital.  
• 18 bed facility prepared as isolation/care center in Gabu Hospital Region, with 20 health staff trained.  
• 5 medical national doctors trained by UNMJS for training personal with the support of WHO.  
• 12 tents from UNFPA for isolating suspect cases pre-disposed at critical health facilities. |
| Case mgmt’ b) Safe and dignified burials | • Public informed about the importance for trained health staff to conduct safe and dignified burials.  
• A shipment of body bags received by the MOH from China. MSF also has body bags in stock.  
• Red Cross identified for capacity building and implementation (with support by UNICEF).  
• Dialogue initiated by UNICEF with Muslim religious leaders on safe and dignified burials. |
| Epidemiology Surveillance | • Health personnel trained in case definition and channels for alerting about suspected case.  
• MoH trained regional teams throughout the country with the support of WHO.  
• 24-hour toll-free hotlines available.  
• UNICEF partnered with Red Cross to strengthen epidemiological surveillance in critical regions.  
• CDC initiated field epidemiology training for the first batch of 25 health workers. |
| Contact Tracing | • RRT has received basic training in contact tracing.  
• 17 rumors already been investigated by RRT.  
• 40 contact tracers and supervisors trained by CDC |
| Laboratory | • Agreement with Institute Pasteur in Dakar, and protocol in place for collecting and sending samples.  
• Triple packaging kits and other consumable laboratory items available.  
• CDC trained 9 national laboratory technicians, 8 of which now certified to pack & ship EVD samples.  
• Simulation exercise involving World Courier in shipping samples from Bissau to Dakar ongoing. |
| Capacities at Points of Entry | • Trained healthcare workers screening passengers at airport, and the recently re-opened Bissau/Conakry border posts of Buruntuma, Fulamore and Contabane. Tracking form used.  
• Thermometer, hand hygiene, bleach, gloves and masks available and used at all entry points.  
• SOP has been prepared to identify, manage, and transfer suspected cases to isolation centers.  
• Joint UNICEF, WHO, MoH and Min. of Interior mission to 3 reopened Guinea borders conducted for pre-positioning of supplies, capacity building and coordination with Regional Authorities.  
• WHO monitors quality control of entry point surveillance on regular basis. |

**Risks:** Despite these efforts, more needs to be done to ensure the country is adequately prepared in the case of a possible EVD outbreak. Partners continue to support the country put in place the necessary systems for containment and control, including improved surveillance and communication. Guinea Bissau has a notably weak Public Health system as a result of decades of political instability. In the country’s current context, the EVD virus entering Guinea Bissau could not only have devastating consequences on its population, but potentially also become a hub for further epidemic spread in the sub-region. Efforts need to continue improve surveillance and the application of the SOP, throughout the health system.