Guinea CO
Humanitarian Situation Report

28 March 2014

Highlights

- From January to 26 March 2014, Guinea has recorded a total of 103 suspected cases of viral haemorrhagic fever with 66 deaths (including 36 community deaths), representing a case fatality rate of 64%.
- To date, 41 samples were analyzed and 15 were positively identified as Ebola virus. The epidemic affects mainly prefectures of Guéckédou, Macenta, Kissidougou, and Conakry, and the ability for the disease to reach other areas is very high.
- Five cases reported in Conakry, four confirmed Ebola, one dead.
- 11 children are among the suspected cases. Three children have died.
- In addition to Ebola, three other epidemics are confronting the population of Guinea. These are: measles, meningitis, and cholera.
- The outbreak of measles, declared on 14 January, has resulted in 4,689 cases and 11 deaths.
- The meningitis outbreak has resulted in 185 cases and 13 deaths since January.
- There have been two cases of cholera in Kamsar in Maritime Guinea.
- UNICEF requires US$1.7 million to fund an immediate response in Guinea.

Situation Overview & Humanitarian Needs

Ebola Outbreak

**Estimated Affected Population**

(*Estimates calculated based on initial figures*)

(Population of Conakry, Kissidougou, Guéckédou, Macenta)

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
<th>Observation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Affected Population</td>
<td>3,189,965</td>
<td>1,531,183</td>
<td>1,658,782</td>
<td>52% of female population (INS)</td>
</tr>
<tr>
<td>Children Affected (Under 18)</td>
<td>1,531,183</td>
<td>734,968</td>
<td>796,215</td>
<td>48% of population under 18 (SOWC 2014)</td>
</tr>
<tr>
<td>Children Under Five</td>
<td>535,915</td>
<td>257,239</td>
<td>278,676</td>
<td></td>
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</tbody>
</table>

**SITUATION IN NUMBERS**

**Ebola**

103
Suspected and confirmed cases in Guinea (including five in Conakry)

66
Deaths (MoH Guinea 27 March 2014)

11
Children with suspected cases of Ebola

3
Children who died (UNICEF Guinea 2014)

**Measles**

4,689
Total number of cases

11
Deaths (MoH Guinea, 27 March 2014)

**UNICEF funding gap**

US$ 1.7 million
<table>
<thead>
<tr>
<th>Pregnant women</th>
<th>143,548</th>
<th>143,548</th>
</tr>
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<tbody>
<tr>
<td>Potentially, the whole population of the country is at risk, considering the inter-region population migrations</td>
<td>11,663,627</td>
<td>5,598,541</td>
</tr>
</tbody>
</table>

**Humanitarian leadership and coordination**

Since the Ebola outbreak was announced the Ministry of Health has chaired a daily Crisis Committee to coordinate efforts and to identify needs and gaps in the response. Participants in these meetings include Embassy representatives from: Japan, France, UK, Germany, Spain, and the European Union, Representatives from the UN System and NGO community including: World Bank, UNFPA, UNICEF, WHO, USAID, Plan GUINEA, WFP, FAO, OCHA, MSF, SENA, ICRC, CRG, CRS, Army Health Service, Rusal Alumina, Rio Tinto, Clinique Ambroise Paré, PSI, UMI, along with officials from the Ministry of Health epidemiologist and an Inter-country WHO team in West Africa. This meeting aims to provide daily clear information on the epidemiological situation and the response on the ground.

**Humanitarian Strategy**

To respond to the Ebola outbreak, the Crisis Committee has developed a National Emergency Plan, which focuses on strengthening the response at national, regional and district level through intensified active surveillance (active case finding and contact tracing), support to rapid and effective infection control and public health, communication / outreach, management bodies and security of injection. This National Emergency Plan is constantly being revised to meet the changing needs.

**UNICEF's response with partners**

- UNICEF has disseminated information about how to avoid the virus through posters and leaflets, including information on hand-washing with soap and water treatment at home with chlorine.
- UNICEF has provided transport and distribution of materials for the disinfection of health centres and homes of people infected.
- As part of social mobilization and communication for behaviour change, UNICEF has supported the organization of sessions to inform and sensitize the population and health personnel on Ebola and preventive measures.
• UNICEF has also distributed 5,500 bottles of liquid chlorine, 1,000 bottles of rehydration fluids, 50,000 pieces of soap, 5,000 packets of oral rehydration salts and chlorine powder to health workers in the affected areas.
• As soon as Government officially declared the outbreak, UNICEF delivered five tons of medicines, medical supplies, and equipment to the most affected areas (Guéckédou and Macenta) for the management of cases and the protection of children and their families.
• UNICEF is also supporting the development of a national communication plan. This plan will be implemented with the Government and with 2 national NGOs through among others a door-to-door sensitization campaign along with distribution of soap, chlorine, gloves to families in Conakry and other affected cities.

Communications for Development (C4D)
In the affected areas in Forest Guinea (Macenta, Guéckédou, Conakry and Kissidougou) communication activities are implemented to inform and sensitize medical staff on the measures to be taken to prevent contamination. In these areas, a door-to-door strategy will be adopted. Messages focus on how to avoid the virus through hygiene, washing hands, water treatment with chlorine before consumption, sanitation, reporting suspicious cases and precautions during funerals and burials. To this end, existing leaflets and posters on cholera have been adapted and utilized. A communication plan has also been drafted. The next step will be to increase mass communication in non-affected areas via the production and distribution of communication materials.

Supply and Logistics
Before the epidemic was confirmed, UNICEF mobilized material from its pre-positioned stock in Nzérékoré. Immediately after it was confirmed, UNICEF deployed from Conakry to the affected localities five tonnes of material. UNICEF can mobilize, on short notice, essential commodities from its stock in Conakry or from local suppliers. If required, supplies from UNICEF stock in Copenhagen or UNHRD Humanitarian stock in Accra will be airlifted.

Media and External Communication
Immediately following the official declaration by the Ministry of Health, UNICEF issued a press release informing the public of the situation. There was a very heavy response which resulted in multiple interviews on well-known media outlets. An additional press release was published on 26 March with new information and an update on the situation in Conakry.

Funding (Ebola Outbreak)
Currently UNICEF estimates needs at 1,938,651 USD over a 3 month period to prevent the spread of Ebola. The Country Office has about US$210,000 available leaving a gap of US$1,729,023.

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<tr>
<th>Immediate Funding Requirements</th>
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<tbody>
<tr>
<td>Appeal Sector</td>
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<tr>
<td>C4D/ Social Mobilization</td>
</tr>
<tr>
<td>Total</td>
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</tbody>
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*‘Funds received’ does not include pledges.

Measles
• From the first to the 12th week of 2014, Guinea has reported 4,689 suspected cases and 11 measles deaths.
• The deaths were recorded by health districts Dixinn (4), Kissidougou (2), Pita (1), NZérékoré (1), Matoto (1), Sigui (1) and Faranah (1).

UNICEF response
• UNICEF provided vaccines, vaccination material including syringes, and operational funding for the organization of the vaccination campaign in 12 health districts that had crossed the outbreak threshold including: Dixinn, Kaloum, Coyah, Dubreka, Boké, Fria, Boffa, Forécariah, Mamou, Kissidougou, Mandiana, and Lelouma for a target
population of 1,020,851 children aged six months to nine years. At the end of the campaign, 1,033,404 children were reached.

- UNICEF supported communications activities in 15 community and private radio stations for social mobilization before and during the vaccination response in the 12 health districts covered.
- UNICEF has also worked with the national coordination of the Expanded Programme on Immunization (EPI) and the National Division of Prevention and Fight against Disease (DPLM) for the implementation of the vaccination response in four of the eight Districts (Kindia, Dabola, Dalaba, and Kérouané) who reached the outbreak threshold between the 7th and 8th week of 2014. This campaign is currently underway.
- UNICEF continues to mobilize resources to start the vaccination response in four other health districts (Faranah, Koubia, Tougué, and Pita) which have crossed the epidemic threshold on week nine of 2014.
- UNICEF made drugs available (antibiotics, rehydration salts and solutions and others) to health facilities to ensure free care and immediate treatment of cases for those afflicted with measles.

**Meningitis**

- From the first to the 10th week of 2014, Guinea country recorded 135 cases of meningitis and 13 deaths.
- The cases were reported from 17 health districts. These are: Dixinn, Kankan, Mandiana, Siguiri, Kouroussa, Kérouané, Mamou, Kindia, Koundara, Faranah, Dabola, Dinguiraye, Kissidougou, Beyla, Matam, Sanguiana and Guéckédou. Five have crossed the epidemic threshold.

**UNICEF response**

- UNICEF will support the Government in preparing and launching a national campaign. UNICEF provided technical support to the MoH to develop and submit a proposal to GAVI Alliance in order to support the campaign against meningococcal A (Men A) which has now been approved.

**Cholera**

- There have been two cases (one confirmed and one suspected) of cholera in Kamsar in Maritime Guinea. UNICEF has prepositioned supplies and supported the DPLM with distribution of chlorine and soap to enable approximately 3,500 people to treat water and carry out life-saving hygienic practices at the household level.
- UNICEF is supporting sentinel sites in at-risk health areas: community based surveillance, prepositioning of Rapid Diagnosis Tests (RDT) and WASH.
- UNICEF Guinea is enhancing cross border surveillance in Guinea Bissau and Sierra Leone respectively to activate early warning procedures and anticipate trends and response.
- A 2014 national roadmap with key activities in terms of preparedness, response and risk reduction is established in collaboration with main partners.

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