

Guinea



The West African nation of Guinea was identified as the source of the largest and deadliest Ebola outbreak in history, with the first likely case emerging in December 2013.

International Medical Corps is fighting Ebola in Guinea through community outreach efforts, rapid response to and isolation of suspected cases, training for health care workers, and screening, isolation, and water and sanitation infrastructure in health care facilities.



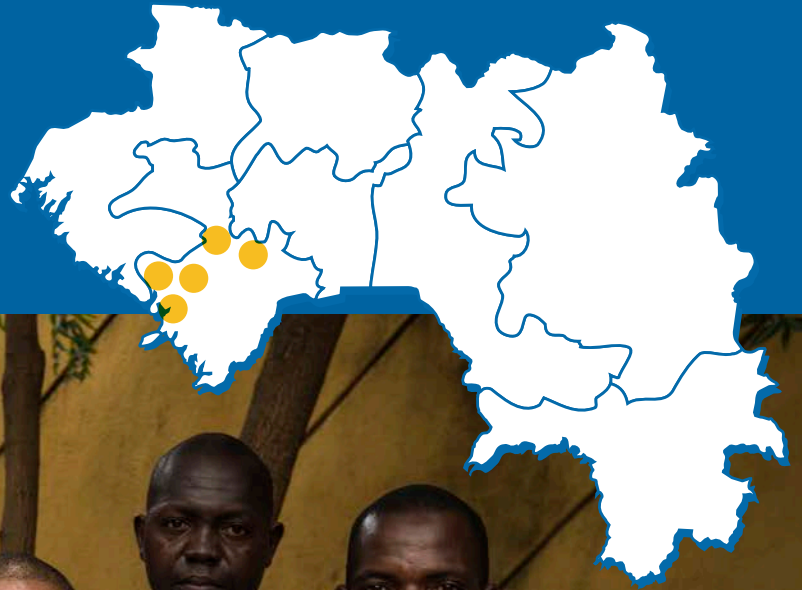
In February 2015, International Medical Corps launched a response to the Ebola outbreak in Guinea.

The programs draw on our experience in Ebola prevention and case management in Sierra Leone and Liberia, the two countries with the highest rates of infection in the outbreak. International Medical Corps is working to eradicate Ebola in Guinea by breaking transmission within health facilities through screening and referral units in public hospitals, community education activities, and Rapid Response Teams that quickly investigate potential Ebola cases and, if needed, transport them to the nearest Ebola Treatment Unit (ETU) for testing and treatment.

WHERE WE WORK:

COVERAGE IN GUINEA

- Conakry
- Dubreka
- Coyah
- Kindia
- Boké



RAPID RESPONSE TEAMS

International Medical Corps is operating two Rapid Response Teams in Guinea. The teams consist of specialized personnel who are able to quickly contain a potential flare-up of Ebola. This includes identifying, isolating, referring, and transporting suspected cases as well as taking specimens for testing, contact tracing, and safe burials. The RRTs work with government officials, community leaders, and other humanitarian organizations to ensure that reports are investigated and a swift, effective response follows. The teams are currently operating in the Ratoma and Dixinn areas of Conakry and have previously been deployed as part of national coordination campaigns to conduct case finding and patient transport in the hotspot areas of Tanéné and Dubréka.

From May to October 2015, the RRT investigated 57 reports of potential Ebola cases and transported 53 patients to an ETU or transit center for isolation and testing. Twelve of them tested positive for Ebola. The RRTs have also conducted 12 safe and dignified burials, one of which tested positive for Ebola.

International Medical Corps is working to train 800 full-time SRU staff in IPC and water, sanitation, and hygiene.

SCREENING AND REFERRAL UNITS

International Medical Corps is helping health care workers to safely identify and isolate potential Ebola cases in health care facilities through screening and referral units (SRU). Located at the entrance of health facilities, SRUs are staffed with trained health professionals who check people's temperatures and symptoms before they enter the building.

Our teams have built 12 SRUs in eight different locations across the country, including at Donka Hospital in Conakry, the largest in Guinea. Where needed, International Medical Corps also built isolation units where health facilities can hold any suspected cases before they are transferred to an ETU for testing and possibly treatment. At all of these sites, International Medical Corps trainers are providing on-the-job training to staff on infection prevention and control (IPC) and water, sanitation, and hygiene. By isolating and referring any potential Ebola case, the SRUs help to curb the spread of the virus and build confidence in Guinea's health system for both health care workers and the wider community. These SRUs will continue to triage patients, staff, and visitors even after the outbreak is over.

From May to October 2015, more than 110,000 people were reached through International Medical Corps community outreach sessions about Ebola.

COMMUNITY ENGAGEMENT

To fight Ebola transmission in households, International Medical Corps is running awareness-raising campaigns about the virus and how it is transmitted. Our 25-member community outreach team goes door-to-door in communities and organizes group workshops and discussions. The teams employ a participatory approach that starts a wider conversation about the virus in which people can ask questions and express their fears and concerns. The community outreach staff also work at SRUs to orient patients and visitors on the screening process. They have also involved various groups, including women's, youth, religious, civic, among others.



“The SRU and screening helped us so much. We would have had to close without it.”

– Dr. Bakayoko,
Director, Dubréka Hospital



“Ebola was very difficult to declare. In the beginning, no one knew what it was. It had never happened here. The group helped me so much in explaining what I never knew.”

— Mihawa Keita,
a traditional healer in Dubréka

INTERNATIONAL MEDICAL CORPS IN WEST AFRICA

International Medical Corps was one of the first international NGOs treating Ebola patients and training health workers in West Africa. Operating in Guinea, Liberia, and Sierra Leone, the three countries with the highest infection rates, our focus has been on getting to zero new cases while supporting recovery efforts in the wake of the devastating crisis. In Mali and Guinea-Bissau, we are building capacity for preparedness against an Ebola outbreak, as both countries are considered two of the four most at-risk for a spillover epidemic. Across the region, we are working to scale up the cadre of health professionals able to safely and effectively respond to Ebola.

INTERNATIONAL MEDICAL CORPS ORGANIZATIONAL CAPACITY

Since 1984, International Medical Corps has demonstrated the ability to deliver major relief and development programs to improve lives and strengthen national capacity through health, education, and social programming. International Medical Corps has responded to complex emergencies and implemented transitional development programs in more than 70 countries worldwide.



Since its inception 30 years ago, International Medical Corps' mission has been consistent: relieve the suffering of those impacted by war, natural disaster and disease, by delivering vital health care services that focus on training. This approach of helping people help themselves is critical to returning devastated populations to self-reliance.

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