

# IOM Sierra Leone Ebola Response

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SITUATION REPORT | Issue 34 | 19-25 July 2015



IOM Sierra Leone staff with delegates from IOM Guinea in Suzan's Bay community near Guinea Wharf, Freetown on 25 July 2015. IOM Guinea's three day visit to Sierra Leone was centered around field visits to Health and Humanitarian Border Management areas of operation—Freetown seaports, Port Loko and Kambia districts with the objective of standardizing implementation strategies.

# SITUATION OVERVIEW

- A total of 4 confirmed cases were reported from Freetown (2) and Port Loko (2) in the week to 19 July. A new EVD confirmed case has been reported in Tonkolili after 150 days with no cases as of 23 July.
- The first case from Freetown is a health worker who tested positive for EVD after the onset of symptoms in a voluntary quarantine facility. The second case was found with advanced symptoms outside a community health facility near the Magazine Wharf community, which reported 8 cases last week. However, the case is not a registered contact of any case from the Magazine Wharf chain of transmission. Investigations are underway to determine the source of infection and any contacts of the case. Contact tracing is complicated by the fact that the case has no fixed address and was symptomatic for an unknown period prior to identification.
- Two cases were reported from the chiefdom of Marampa in Port Loko.
  Both are registered contacts associated with a transmission chain linked to an EVD-positive mother who died during childbirth in mid-June.
- Three of the 4 cases reported from Sierra Leone in the week to 19 July were registered contacts. No cases were identified as a result of postmortem testing of community deaths.
- On 19 July, a total of 618 contacts were being monitored in 4 districts: Kambia, Port Loko, Western Area Rural, and Western Area Urban.
- Laboratory indicators continue to reflect a heightened degree of vigilance, with 1502 new samples tested in the 6 days to 19 July.

# Weekly Highlights

- From 24-26 July, a delegation from IOM Guinea visited Sierra Leone on a fact finding mission to share and harmonize cross-border interventions.
- IOM is sustaining its Magazine Wharf outbreak response support to 8 Peripheral Health Units.
- IOM clinicians continue Infection Prevention and Control (IPC) training support at Connaught, Princess Christian's Maternity and Ola During Children's Hospitals in collaboration with the Ebola Response Consortium in Freetown.
- 23-24 July- IOM's Health and Humanitarian Border Management (HHBM) Project Manager Ben Potter traveled to Bombali on an evaluation mission.
- Three 2-day IPC/health screening trainings for over 100 Republic of Sierra Leone Armed Forces (RSLAF) personnel stationed at category B and C (semimanned and informal) border crossing points in Gbileh Dixon, Samu and Bramaia chiefdoms in Kambia are running until 28 July 2015.

# IOM Guinea delegation in Sierra Leone on HHBM fact finding mission; visits Suzan's Bay

and develop a standardized approach to Health and Huppoints in roving motorbike teams. manitarian Border Management (HHBM) as well as oth-

er areas of intervention. Both missions have sizeable HHBM programmes involving 100s of staff spread across large geographic areas yet similar chal-

lenges are present on both sides of the border.

The IOM teams met in Kambia before heading to Freetown for a debriefing regarding ongoing projects and best practices on 25 July.

A tour was arranged to HHBM operations in Suzan's Bay at both the Guinea and Port visit to the Suzan's Bay Com-8 PHUs in the Magazine Wharf area where IOM trainers together with staff from Concern Worldwide, GOAL and Save the Children have been engaged in mentoring activities in support of local health care workers for the past 5 weeks.

On 26 July, the IOM Guinea delegation was escorted through HHBM operations at Vehicle Checkpoints throughout Port districts

On 24 July the IOM Sierra Leone team was proud to wel- Kambia sub-office for a briefing on the recent deploycome colleagues from IOM Guinea on a fact finding mis- ment of 21 IOM monitors and 80 Passenger Welfare sion. The purpose of the visit was to share information Organization staff to category B and C border crossing



Loko Wharfs followed by a IOM Sierra Leone and IOM Guinea at the IOM office in Freetown on 25 July 2015. IOM Guinea was accompanied by Dr Pépé Bilivogui, National Director of Public munity Health Center, one of Hygiene from the Guinean Ministry of Health (1st row far left).



Loko and Kambia IOM HHBM monitors at Guinea Wharf in Suzan's Bay. Monitors work in incredibly challenging before conditions (see inset) in order to ensure data is collected on incoming passengers and health stopping into the screening measures are enforced.

**IOM Sierra Leone staff** provide details about the Infection Prevention and Control mentoring and restock intervention in support of RING IPC and in partnership with ERC to delegates from IOM Guinea at Suzan's Bay Community Health Center on 25 July 2015. The center serves a population of 10-20,000 and sees mostly female patients.



## IOM HHBM project manager makes field visit to Bombali, Kamakwie sub-office

IOM's Health and Humanitarian Border Management ing and a request has been made to have an IOM night (HHBM) Project Manager Ben Potter, traveled to Bombali shift added at Sanya. on 23 July for an inspection tour of operations beginning From the sub-office, Ben met with IOM, RSLAF, SLP and destination, reason for travel, length of stay plus health VCPs dismantled in January was lifted.

related questions are being captured and recorded. Kainanday is a critical juncture on the road to Makeni and captures those travelers who manage to avoid the inter-district ferry crossing points to the east and west Kamakwie.

At the Kamakwie subheadcounts being recorded Sanya

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office weekly average HHBM Project Manager addresses IOM monitors at Tomparay VCP in Bombali on 23 July 2015.

the road north to Sanya; weekly average 549) and Kai- factor for population movement. nanday (weekly average 1075) were reviewed. It was not- IOM staff and partners are responding on the ground and ed that many people are traveling at night to avoid paying remaining vigilant despite challenging conditions. duty on imported items at the international border cross-

at Kainanday Vehicle Checkpoint (VCP). Two mobile tablets DERC/DHMT staff at the Tomparay VCP. The VCP was reare active and daily headcounts, point of origin/ established on 7 June 2015 after a directive that had seen

> In the past week two major health incidents have occurred at Tomparay. On 22 July a 2 year old girl arrived from Kufu village in Bramaia, Kambia district, with a high fever. After overnighting at Tomparay she died on the morning of 23 July, a swab was taken for testing and the corpse was collected by the Samaya burial team. A second couple arrived with a sick child from Tambe village in Kam-

(category A international crossing with Guinea 590 per bia. Results for both cases are pending. IOM monitors have week), Tomparay (VCP at crossroads with Kambia's Brama- noted that the PHU in Samaya (Bombali) is closer than ia chiefdom, Tamabaka chiefdom capital Samaya town and treatment facilities in parts of Kambia and therefore a pull

# Caroline Damba, IOM HHBM monitor- "Working for a stronger Sierra Leone"

Caroline Damba, 26, IOM health screening monitor in Bom- Tomparay, Tambaka chiefdom where IOM manages a Vehibali has been working with local communities for several cle Checkpoint (VCP) as a part of its wider Health and Huyears. As the communications focal person with the Atti- manitarian Border Management (HHBM) intervention in tude and Behavioral Change Secretariat (ABC Secretariat) in Bombali. With the Bombali sub-office located at Kamakwie, Makeni, she was heavily involved in sensitizing local com- IOM staff are deployed at the international border crossing munity members on a wide range of pertinent issues from with Guinea at Sanya, Kainaday VCP south of Kamakwie health and hygiene to law and order.

The Ebola epidemic has only reinforced Caroline's determination to make a difference in the lives

of vulnerable Sierra Leoneans. From No-

vember 2014, during the peak of the outbreak, Caroline began working on a 15person District Ebola Response Center (DERC) monitoring team. As Bombali was one of the districts with the highest transmission rates in the country, Caroline's team was responsible for making daily visits to Ebola treatment facilities, holding centers and Community Care Centers to report

on constraints and challenges.

Caroline is very passionate about field work and sees it as a learning experience that has opened her mind to new cultures and

relationships. "IOM is all about aiding vulnerable communi- residents go to seek medical care. ties. We are making sure Bombali stays safe by monitoring Caroline is firm when she says, "I am working with IOM to travelers on the road."

mates have been welcomed by the local community in ward."

and 2 ferry ports to the west and east of the town together

with members from the DERC District Health Management Team, RSLAF troops and Sierra Leo-

> ne Police every day from 0700-1900. Tomparay sits at a major transit route linking Kambia's Bramaia chiefdom, Tamabaka chiefdom capital Samaya

town and the road north to Sanya and Guinea. The VCP is currently seeing a weekly average of 549 travelers but this number remains low due to the curfew in Kambia which has shuttered markets until Ebola can be brought under control. In the past week two major health incidents were reported at Tomparay, largely a consequence of the clinic in Samaya

town- the nearest in the area- where Kambia

come to the aid of Sierra Leoneans. We need to help one As an IOM monitor since early July, she and her 6 team- another to overcome Ebola and move our country for-

# Ongoing transmission in Freetown, new case in Tonkolili demonstrates importance of SocMob

IOM's 32 community social mobilizers will continue house away with no explanation as to their whereabouts. to house sensitization activities in the wake of ongoing In an effort to overcome these negative perceptions, the transmission in Freetown under Operation Safe Guard Social Mobilization Pillar and DHMT held an ambulance Western Area Phase II which aims to strengthen health exhibition at Magazine Wharf with the intention of building screening at wharfs to prevent or limit inter-district travel confidence about the safety of ambulances, dispelling misalong the coast. The Social Mobilization Pillar will also im- information and reinforcing the importance of timely re-

plement the Ward 69 Strategy in order to revitalize social mobilization activities in the most vulnerable wards. The activities will be divided into three areas: silent wards: current and posttransmission wards. In Magazine Wharf and Mabella communities mobilizers are carrving out surveillance and with UNICEF, the Social Mobilization Action Committee, the Sierra Leone Red Cross,

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contact tracing in partnership IOM Social Mobilization Project Manager Katrina Hann speaking with her team at Suzan's Bay on 25 July 2015.

(DHMT).

difficult is communities' negative associations with the 117 the area and the deceased's village of Messessebe along hotline and ambulance interventions. Common perceptions with Lionheart and Masanga Hospitals will be quarantined. among community members include a fear of being Presently 49 contacts have been line listed. Freetown consprayed with chlorine and of being infected with Ebola tinues to report new confirmed cases and high profile eswhile in an ambulance and of having loved ones taken capes from under resourced treatment facilities.

porting of disease symptoms to 117. The exhibition will be held in a number of communities in Western Area.

# **Ongoing Transmission**

A new positive EVD case has been confirmed by postmortem swab in Tonkolili district after 150 days without any cases. According to initial findings, a 27 year old male resident of Freetown, fell sick on 19 July and was taken to Lionheart Hospital in Yelle

before returning to his village. He returned to Masanga the military and District Health Management Teams Hospital on 21 July for further treatment but died on 23 July. One high risk contact of the deceased has already One of the pivotal reasons why getting to zero has proven been admitted to the International Medical Corps ETU in

### **BEST** of the **WEB** (click links for story):

Ebola cases ebb, with Conakry, Freetown as hot spots, CIDRAP, 22 July

WHO reports no new cases in Liberia, UN News Center, 22 July

Sierra Leone athletes try to regain stride after Ebola, Voice of America, 24 July

UNMEER prepares for Sierra Leone drawdown: Freetown reacts, Ebola Deeply, 22 July

Surviving and soccer in Sierra Leone, New York Times Insider, 23 July

Sierra Leone starts convalescent plasma to Ebola patients, Awoko, 23 July

Why I went to fight Ebola... three times, Red Cross blog, 24 July

From New York to the Ebola frontlines, Awareness Times, 24 July

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