Effective Implementation of Public Health and Social Measures in Guinea: Situational Analysis

Highlights

Public health and social measures should respond to data about the growth of the epidemic and be implemented in a way that engages communities. Communities should be involved in helping to determine strategies for adapting measures to the local context, protecting livelihoods, and introducing appropriate relief measures to counteract the economic impact of these measures. The government should counter misinformation with appropriate risk communication and engage with communities to ensure voluntary adherence to COVID-19 response measures.

• The COVID-19 epidemic in Guinea has been increasing steadily with a total of 1,351 confirmed cases, following the disease dynamics of African Union Member States with the highest caseload. However, mortality from the disease is reportedly low, at only seven deaths.

• The government has adopted strong measures to slow the epidemic, and is one of the few African Union Member States to require people to wear masks in public. There is strong support for closing schools but limited support for measures that would affect access to markets or workplaces.

• The Guinean government has also released substantial relief measures to offset the economic and social burden of COVID-19.

• While Guineans are aware of the epidemic and expect it to have a significant impact on their country, there is a concerning degree of misinformation and lack of trust in some information sources including government officials and doctors.

• Guineans have a high degree of confidence of being able to get care for COVID-19 if they get sick. Many Guineans believe that they cannot contract COVID-19 or are personally at low risk.

• There have been a number of COVID-19-related security incidents reported, including heavy-handed enforcement of PHSMs and looting by police/security forces.
Effective Implementation of Public Health and Social Measures in Guinea: Situational Analysis

Disease Dynamics

GUINEA’S CASELOAD HAS BEEN GROWING RAPIDLY AFTER A TWO-WEEK LAG FROM THE FIRST REPORTED CASE IN MID-MARCH, MIRRORING THE DYNAMICS OF THE AFRICAN UNION MEMBER STATES WITH THE LARGEST CASELOADS.

<table>
<thead>
<tr>
<th>Total cases</th>
<th>Total deaths</th>
<th>Case-fatality rate (%)</th>
<th>Total # of days to double case count</th>
<th>Date of first reported case</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,351</td>
<td>7</td>
<td>0.52</td>
<td>9</td>
<td>March 14</td>
</tr>
</tbody>
</table>

The epidemic in Guinea has grown at the same pace as the five African Union Member States with the highest caseloads.

The daily number of new reported cases has been increasing since the beginning of April. However, reported mortality from COVID-19 remains very low, at only seven deaths.

In Guinea, the most recent doubling time is 9 days, which indicates a slowing growth in cases. Doubling time is the number of days it took for cases to double to reach their current level. This metric can be used to estimate the recent rate of transmission, with higher doubling times indicating slower growth. In general, doubling times exceeding seven to 10 days and increasing over time suggest a slowing of the epidemic.

If testing is deemed to be sufficient or is increasing, then changes in case counts per day can also be used to assess COVID-19 transmission. No data on testing are publicly available for Guinea, so the degree to which reported cases reflect disease transmission is difficult to assess.

Implementation of Key PHSMs

WITHIN TWO WEEKS OF ITS FIRST REPORTED CASE, GUINEA STRONGLY RESTRICTED POPULATION MOVEMENT, AND IS ONE OF THE FEW AFRICAN UNION MEMBER STATES REQUIRING PEOPLE TO WEAR MASKS IN PUBLIC.

3-day moving average of new cases and date of PHSM implementation

March 13:
Travelers must test negative for coronavirus to obtain entry visa

March 21:
Airport closed to commercial flights

March 26:
State of emergency declared for one month; all bars, cinemas, religious spaces, theaters and schools closed for 14 days; gatherings of more than 20 people banned; land borders closed for 30 days

March 30:
Ban on movement from Conakry to other parts of the country; national curfew from 9 p.m. to 5 a.m.

April 13:
Requirement to wear face masks in public spaces at all times; extension of the state of emergency until May 15

preventepidemics.org/coronavirus/perc/
Public Reactions to COVID-19 and Related PHSMs

RESULTS FROM RECENT POLLING
Market research firm Ipsos conducted a telephone poll of 1,034 adults in Conakry between April 2 and April 5. At the time of polling, Guinea had 30 to 111 confirmed COVID-19 cases.

**Information on COVID-19**
Urban Guineans had high awareness of the epidemic (95%). However, many continued to hold misperceptions, including some that could offer a misplaced sense of protection or contribute to stigma. For example, 57% said that hot climate prevents spread, and 40% said it was a germ weapon created by a government. Almost half (44%) said they are seeking more information, particularly on prevention, transmission and causes.

**Belief in Misinformation and Rumors**
Percentage believing each false statement is probably or definitely true

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hot climate prevents spread</td>
<td>57%</td>
</tr>
<tr>
<td>People who have recovered from COVID-19 should be avoided to prevent spreading it</td>
<td>55%</td>
</tr>
<tr>
<td>COVID-19 is a germ weapon created by a government</td>
<td>40%</td>
</tr>
<tr>
<td>You can prevent COVID-19 by drinking lemon and vitamin C</td>
<td>38%</td>
</tr>
<tr>
<td>Africans can’t get COVID-19</td>
<td>38%</td>
</tr>
<tr>
<td>Drinking bleach cures COVID-19 disease</td>
<td>29%</td>
</tr>
<tr>
<td>You might get COVID-19 from any Chinese person in your country</td>
<td>21%</td>
</tr>
</tbody>
</table>

**Risk Perceptions**
While 89% of urban Guineans reported that the virus will be a problem for the country, a much lower share (53%) said that they were at a high personal risk of contracting COVID-19.

**Demand for Information**
Percentage reporting they do not currently have enough information about COVID-19

<table>
<thead>
<tr>
<th>Country</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guinea</td>
<td>44%</td>
</tr>
<tr>
<td>Western region</td>
<td>37%</td>
</tr>
<tr>
<td>All AU Member States surveyed</td>
<td>32%</td>
</tr>
</tbody>
</table>

**Information Needs**
27% want more information on how to protect themselves and their families
27% want more information on how COVID-19 spreads
18% want more information on how to cure COVID-19 or if there is a cure

preventepidemics.org/coronavirus/perc/
Support for Government and PHSMs

Only 58% of respondents were satisfied with the government’s response to date and only 54% trust the information provided by the government on COVID-19. Four of five (80%) reported that they trust health information from doctors, with the presidency trusted by 43%. Seven of ten (74%) respondents felt confident they would get the help they needed immediately if they were to fall sick.

Urban Guineans were supportive of PHSMs that restricted gatherings to help limit the spread of COVID-19, such as closing schools (90%). Support is lower for shutting down spaces and services that are essential to the economy (63% support shutting transport; 57% support shutting workplaces; and 53% support shutting markets).

Barriers to Adherence

It may be difficult for households to comply with stay-at-home orders, as most would run out of food (82%) and money (74%) within a week, particularly low-income households. In addition, only one in five (22%) households had a separate room to isolate sick people.

22% of respondents have a separate room in the home to isolate someone with COVID-19

19% of respondents in families making less than US$100 per month have a separate room in the home to isolate someone with COVID-19

Supplies of Food & Money

Percentage who expect to run out in 1 week or less

- Overall
- Low-income (Less than US$100/month)

Trust in Information Sources

Percentage that completely or mostly trust each source for health information

- Doctors
- Religious leaders
- The presidency
- Community Leaders
- Political leaders
- Traditional herbalist/healer

Perceptions of Government & Health System

Satisfaction with government response to COVID-19 (% responding somewhat or very)

- Guinea
- Western region
- All AU Member States surveyed

Trust in government information about COVID-19 (% responding mostly or completely)

Confidence in ability to get help immediately if sick (% responding somewhat or very)
Economic and Relief Measures

The government announced a US$290 million economic response plan on April 6 to offset the economic impact of COVID-19, representing an estimated 2% of GDP.

- **Health care**: A National Emergency Preparedness and Response Plan, supported by donors, will increase capacity for entry screening, testing, quarantine, and treatment, and support the cost of medical equipment and a communication campaign. The COVID-19 Economic Plan also includes efforts to strengthen health infrastructure.

- **Social support**: The COVID-19 Economic Plan includes labor-intensive public works, a new cash transfer program, and waived utility fees (electricity and water) for vulnerable households for three months. The cash transfer program will provide 250,000 GNF (US$26) per month to 240,000 households (1.6 million people) for seven months, from June to December. The social protection agency will also distribute sanitation kits to 130,900 households.

Overview of Security Incidents Related to COVID-19

A rise in unrest or insecurity—including peaceful protests as well as riots and violence by and against civilians—can affect adherence to PHSMs and serve as a warning sign of the burden such measures are imposing on the population. The number of security incidents reported in Guinea related to COVID-19 has been rising, including demonstrations, clashes between police and protesters, looting, and violent measures used to enforce PHSMs. Abuses by security forces, including harassment, intimidation, and arrests of opposition supporters, have been reported and risk fueling distrust of authorities. There were also 10 deaths due to election violence in March in the context of the COVID-19 crisis.

INFORMATION ABOUT DATA SOURCES AVAILABLE HERE: HTTPS://PREVENTEPIDEMICS.ORG/CORONAVIRUS/PERC/DATA