

# Finding the Balance: Public Health and Social Measures in Guinea

Data updated 19 August 2020



## Background

Public health and social measures (PHSMs) are an important strategy to slow transmission of COVID-19 and reduce the pressure on health care systems, but they can place a significant burden on people, especially when they restrict movement or access to services. This brief aims to inform policy decisions in Guinea that balance the benefit of PHSMs for reducing transmission with other priorities, including economic and social impacts. It is based on the review, synthesis and analysis of data illuminating different dimensions of COVID-19 in Guinea—including a nationally representative telephone poll, media monitoring, epidemiological data and other publicly available data sources. Data sources and methods are described at the end of the document.

## Highlights

**Disease Dynamics:** Guinea has reported over 8,000 total cases since March. Reported cases in Guinea increased significantly during the month of April before leveling off in May. Since then, daily reporting has been inconsistent, but from 23 July to 19 August the country has reported a 17% average increase in the number of new cases reported each week. This should be interpreted with caution, as Guinea's test per confirmed case ratio is below WHO-recommended guidelines, suggesting low testing capacity.

**PHSM Implementation:** The government declared a state of emergency in late March, and a national curfew was imposed a few days later. The curfew was lifted in mid-May and commercial activities were allowed to resume. Reported cases continued to rise in July and August, and the state of emergency was extended through August.

**PHSM Support and Adherence:** Support for most PHSMs is high among survey respondents, especially for personal preventive measures such as washing hands and wearing a face mask. Self-reported adherence was lower than support, particularly for measures that restrict economic activity, which could reflect the burden that these measures place on the population as well as the limited restrictions currently in place.

**Risk Perceptions and Information:** Only one in five survey respondents in Guinea believe they are at risk for contracting COVID-19, a lower proportion than in other African Union (AU) Member States surveyed. Close to half of all respondents hold misconceptions or believe rumors or myths that could undermine adherence to PHSMs.

**Essential Health Services:** A high proportion of households that needed medical care have had difficulty accessing health care visits (41%) or medicines (55%), and people with longstanding illnesses are particularly affected.

**Economic Burden and Food Security:** The vast majority of respondents (87%) report having lost income compared to last year, and three-quarters are facing difficulty accessing food. One in four respondents in Guinea reported receiving government support in the previous month. Most of this was in the form of subsidies for services.

**Security:** There have been 32 reported security incidents as a result of the COVID-19 crisis and PHSMs. Many protests by civilians against PHSMs have become violent, and enforcement of PHSMs by the government has also resulted in violence.

## Disease Dynamics and PHSM Implementation

<b>Total Cases</b> (Cumulative incidence per 100,000 population)	<b>Total Deaths</b>	<b>Diagnostic Tests</b> (Tests per confirmed case ratio)	<b>Case-Fatality Rate</b>
8,715 (65)	52	72,510 (8)	0.6%

*WHO* recommends 10-30 tests per confirmed case as a benchmark of adequate testing.

*The use of PHSMs should respond to the changing epidemiological situation. When these measures are effectively implemented and adhered to, they can significantly reduce disease transmission. Phased and adaptive loosening of measures can prevent spikes in transmission while lessening the burden on communities. If transmission accelerates, reintroduction of targeted measures may be needed to control the epidemic.*

Following a rapid increase in reported cases throughout April, Guinea has seen inconsistent patterns in new reported cases.

- The Guinean government declared a state of emergency in late March and closed schools, bars, and places of worship. A few days later, a nationwide curfew was imposed and all workers who could work from home were required to do so. In April, the government announced that face masks would be required in public.
- Restrictions began to be lifted in mid-May with the curfew lifted outside of Greater Conakry. In mid-June, Phase 1 reopening began, which allowed commercial activities to resume. As measures have been relaxed, Guinea has seen inconsistent patterns in new reported cases.
- Currently, places of worship, schools, bars, and cinemas remain closed. Land borders are also closed.
- While more than 72,000 tests have been conducted, testing capacity remains a challenge, with a low number of tests per confirmed case (8).

Guinea implemented a nationwide curfew, internal travel restrictions, and work-from-home order at the end of March, but reported cases began to rise dramatically in April. A sharp drop in reported cases in mid-July was the result of inconsistent daily reporting.



## PHSM Support and Adherence

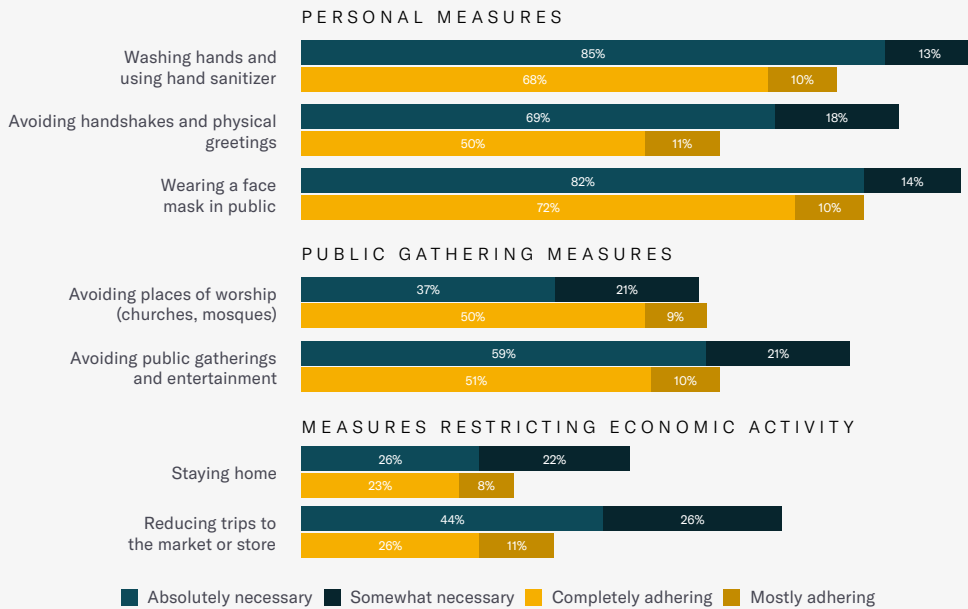
PHSM effectiveness relies on widespread behavior change. To identify measures that have a higher likelihood of acceptance, it is critical to monitor public support, adherence, and overall trust and confidence in the government response. Where adherence is lower, further analysis of barriers to behavior change can strengthen PHSM implementation and help to mitigate burdens.

A majority of respondents in Guinea support most PHSMs, according to survey findings, but self-reported adherence is lower among respondents—particularly for measures that restrict economic activity.

- Almost all survey respondents report having a face mask, and support for personal preventive measures (washing hands, wearing a mask, avoiding physical contact) is high. However, self-reported adherence to these personal measures could be strengthened; for example, only six in ten report avoiding handshakes and physical greetings. Guidance for physical distancing should take into account cultural norms around physical greetings.
- Support for measures that restrict economic activity, such as staying home or reducing visits to markets or stores is lower. Only around a third of respondents report adhering to these measures, which may reflect both the burdens they place on people as well as the limited restrictions now in place.
- With places of worship currently closed, low support for and adherence to avoiding places of worship is notable and likely reflects the high burden placed on people by restricting religious activity. Ensuring safe ways to continue religious gatherings will be important.
- Self-reported adherence to restrictions in place for avoiding public gatherings and places of entertainment is lower than stated support. Analysis of the environmental, economic or other barriers to adherence could inform strategies to increase adherence. A majority of respondents (63%) favor loosening restrictions overall to reduce economic burdens, although nearly 90% are anxious about resuming their normal activities.
- Narratives in traditional media and Twitter discussions of PHSMs were largely positive. However, Facebook comments were more negative, expressing mistrust of the government throughout the epidemic.
- Respondents in Guinea reported greater satisfaction (84%) with the government response when compared to other AU Member States surveyed.

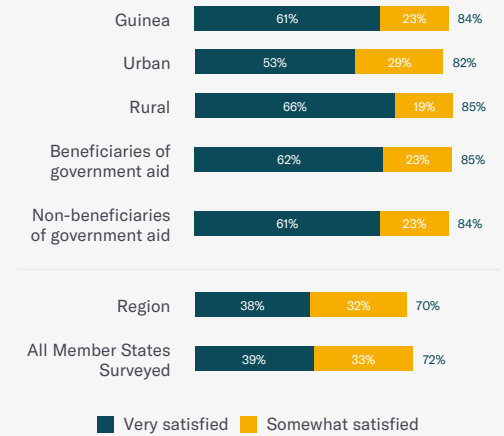
**Support for PHSMs is higher than self-reported adherence across almost all PHSMs, but support is highest for personal preventive measures.**

Support (perception of necessity over previous month) and adherence (over previous week) for preventive measures



**The majority of respondents in Guinea are satisfied with the government response, a higher proportion than other AU Member States surveyed.**

% satisfied with government COVID-19 response, by country, subgroup and region



Data Source: Ipsos Survey

**Face Masks**

Guinea requires the use of face masks in public, and offenders may be punished with fines.

**99%**

of survey respondents had a face mask ready to use

**92%**

recognized that wearing a mask could prevent spread

**82%**

report wearing a mask in the previous week

Data Source: Ipsos Survey

**Attitudes About Reopening**

Timing of reopening:

**36%**

favor waiting longer to loosen restrictions

**63%**

favor opening up to get the economy moving

Comfort with resuming activities:

**88%**

report that resuming normal activities makes them anxious

**74%**

would feel comfortable using public transport if it were not too busy

Data Source: Ipsos Survey

## Traditional news and social media coverage of PHSMs

Monitoring public narratives in traditional news and social media can shed light on how critical issues are perceived and beliefs are formed. By design, media monitoring and analysis captures the views and opinions expressed by a subset of the population that is actively engaged in public debates and discussion through online and social media. These data are qualitative and are not intended to be representative of the views of the wider population.

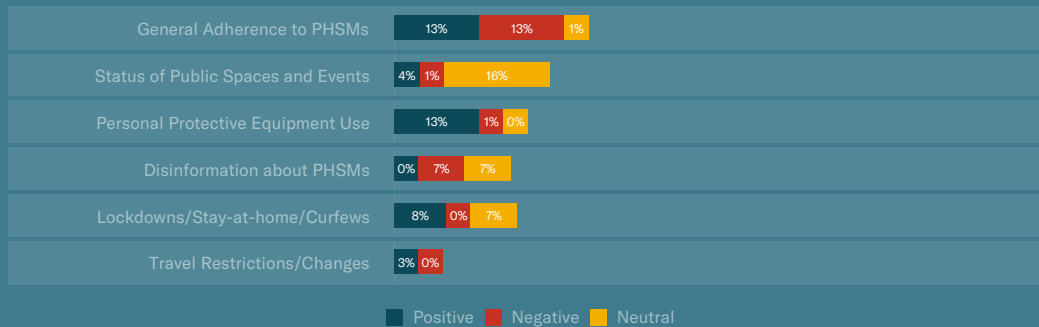
**From May to July, public narratives in both traditional news and social media around PHSMs in Guinea have been predominantly positive, driven by government messaging in traditional media.**

- Coverage of PHSMs peaked on 14 August, driven by a televised statement from Guinean President Alpha Condé, who acknowledged the economic burden of PHSMs but urged continued vigilance and adherence in the face of perceived relaxation.
- Despite the predominantly positive messaging in traditional news and Twitter, some Facebook users in Guinea rejected President Condé's calls for maintained public adherence, condemning the President and his government as out of touch and accusing them of using COVID-19 as a political tool. Others supported the measures.

*On 15 August, in response to the President's comments, a Facebook user wrote, "Your call in favor of respecting barrier measures and hygiene rules is of course understood. It is only through the application of these rules and measures that each citizen will take an active part in the fight against this pandemic."*

*On 14 August, a Facebook user in Guinea posted, "It's time to lift the state of emergency and the travel restrictions which are causing us to suffer."*

### Top Trending Topics in Traditional News and Social Media Coverage of PHSMs, May-August



Data Source: Novetta Mission Analytics

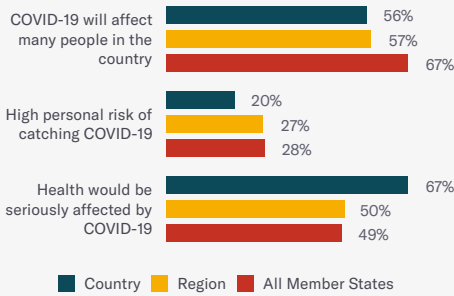
## Risk Perceptions and Information

*Evidence from past epidemics shows that both information and risk perceptions influence preventive behavior, including adherence to PHSMs. People who are well informed may have a high level of awareness about COVID-19, but may not perceive that their personal risk of catching the disease is high or that the disease would have severe health implications. In addition, people must believe that they can change their behavior to effectively reduce risk—both for themselves and the community at large. Misinformation narratives can undermine motivation to adhere to preventive measures.*

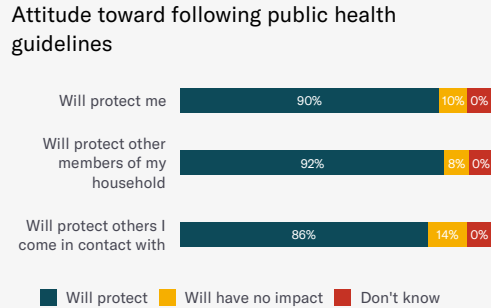
Most respondents in Guinea are aware of the risk to their country from COVID-19, but their personal risk perceptions are much lower. Many hold misconceptions about the disease or believe in rumors about foreign interference, which could affect adherence to preventive behaviors.

- Respondents in Guinea have lower perceptions of risk compared to other AU Member States in the region and across Africa. Increased risk communication and community engagement could reinforce the importance of adhering to preventive measures.
- Guinea has a greater perception of disease severity compared to the average across the Western region as well as all AU Member States surveyed.
- A majority of respondents agree that following public health guidelines will help protect themselves and others.
- Around half of survey respondents reported that they believed incorrect statements about disease transmission or agreed with rumors about foreign interference in treatment or vaccines. Early communication and community engagement to dispel misinformation about vaccines will be critical to ensuring vaccine uptake when a vaccine becomes available.

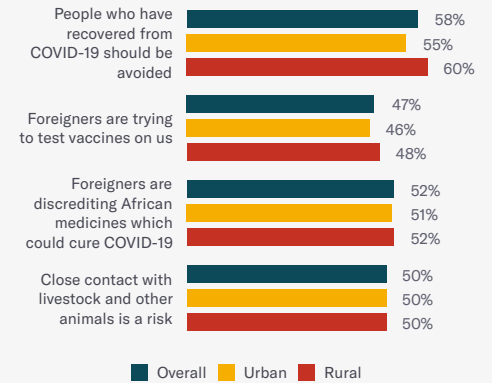
**Compared to other AU Member States included in the survey, respondents in Guinea had lower personal risk perceptions but higher perceptions of disease severity.**



**A large majority of respondents in Guinea agree that following public health guidelines will help protect themselves and others from getting COVID-19.**



**Approximately half of respondents in Guinea hold misconceptions about the disease or agree with rumors about foreign interference.**



Data Source: Ipsos Survey

**Risk perceptions and information in traditional news and social media**

Recent social and traditional media coverage of COVID-19 indicates high perceptions of disease risk, reflecting government risk communication.

- Many Facebook users in Guinea commenting on the statements also acknowledged the threat of COVID-19 globally and in Guinea.

*On 14 August, a Facebook user wrote, "COVID-19 is well present in Guinea. You will see."*

*On 14 August, a local media outlet quoted President Condé as saying, "From 15 July to 15 August, the positivity index rose...which shows that the virus is in circulation. This shows that despite the efforts made, much remains to be done."*

Data Source: Novetta Mission Analytics

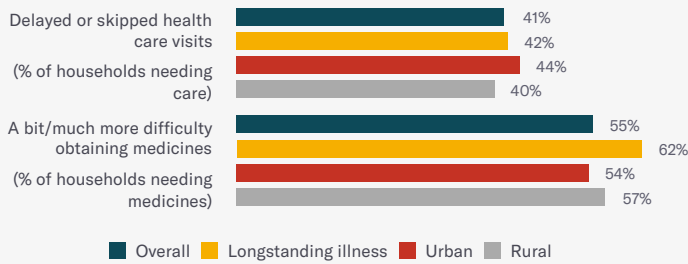
**Burden of PHSMs**

*Essential Health Services*

*The COVID-19 epidemic can disrupt essential health services through the burden it places on health systems, disruptions to medical supply chains and restrictions on movement. People may also be hesitant to seek care due to the risk of transmission or inability to pay for care. Evidence from past epidemics and initial reports from COVID-19 suggest that the indirect health effects can be far larger than the direct effects of the disease. Closely monitoring essential health services can inform policies to adapt PHSMs and maintain essential care. Data on disrupted services should be interpreted within the context of a country's disease burden and health care utilization patterns.*

Essential health services in Guinea have been significantly disrupted during the COVID-19 crisis, with four in ten respondents reporting that they, or someone in their household, needed care, but delayed or skipped a health visit. More than half of households that needed medication reported difficulties obtaining it, with challenges most commonly reported among respondents with longstanding illnesses. Reported barriers to accessing health facilities included affordability, concerns about getting COVID-19 while seeking care and facilities not being accessible/public transport not working. Of the respondents reporting disruptions to care, the most commonly reported missed visits were for general/routine check-up (42%), suspected malaria (24%), and vaccinations (5%). Compared to other AU Member States surveyed, Guinea reported a higher rate of skipped general check-ups, which are critical for preventative screening of both communicable and non-communicable disease. Any disruptions in malaria and vaccination visits will have major consequences for population health in Guinea, particularly among children under age five. Malaria is the second leading cause of death in Guinea and, according to UNICEF, accounted for more than 16% of deaths among children under age five in 2017.

**Close to half of households that needed health care services or medicines reported access issues. Difficulties obtaining medicines were more widespread for people with longstanding illnesses.**



**Barriers to Essential Services**

Among those who reported that someone in their household had delayed or skipped health care visits, the top three reasons cited were:

- 26%** Couldn't afford care
- 19%** Worried about risk of COVID-19
- 17%** Facility not accessible/public transport not working

The most common self-reported reasons for missed visits were:

- 42%** General/routine check-up
- 24%** Malaria
- 5%** Vaccinations

Data Source: Ipsos Survey

**Economic Burden and Food Security**

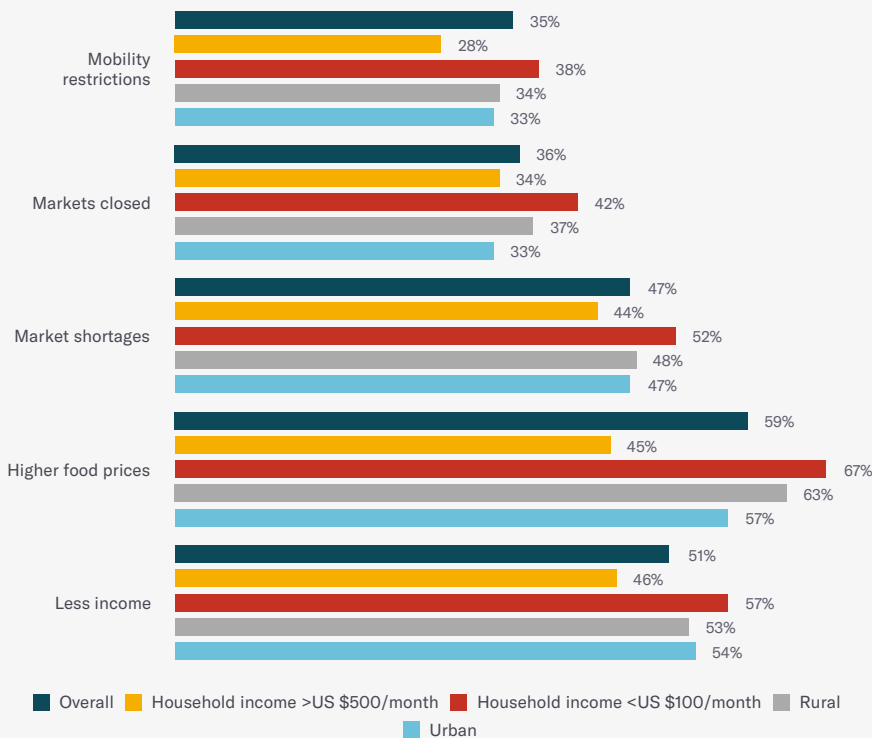
*PHSMs that restrict economic activity—such as workplace closures, restrictions on movement of people and goods, and stay-at-home orders or curfews—place high burdens on people by disrupting livelihoods and access to markets. Monitoring household economic burdens and food security can help identify people in need of support and inform the design of appropriate relief measures.*

Respondents in Guinea have experienced severe economic hardships during the COVID-19 crisis. Around three quarters of respondents currently face barriers to accessing food, including income losses, higher food prices, market shortages and other barriers. The World Food Programme estimates that around 20% of the population or nearly three million people are currently food-insecure, and an additional 600,000 people may be food-insecure by the end of 2020. Over half of Guineans already live below the poverty line, and a majority (86%) of respondents are surviving on lower incomes compared to this time last year. While the government has announced some social assistance measures that are still in place—including a waiver on the payment of utilities for the most vulnerable and the provision of cash transfers—only one in four households report that they have received any additional government support in the previous month. Most of this came in the form of subsidies for services. Fewer than 1% of households reported receiving cash.

**Respondents in Guinea face continued challenges with accessing food, with a large proportion of respondents reporting barriers to access in the past week. Low-income households faced more widespread challenges.**

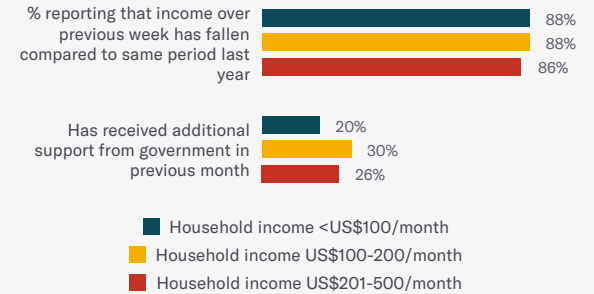
Note: Income categories should be interpreted as indicative as sample sizes vary and income reporting can be subject to bias.

(% of respondents reporting that they had difficulty buying food in the previous week for each of the following reasons)



**The vast majority of respondents in Guinea have experienced income losses, while only one in four households have received any additional support from the government over the past month. (Households with monthly income >US\$500/month excluded due to small sample size.)**

Note: Income categories should be interpreted as indicative as sample sizes vary and income reporting can be subject to bias.



Data Source: Ipsos Survey

**Narratives about burden of PHSMs in traditional news and social media**

From May to July, approximately 10% of monitored coverage of COVID-19 in Guinea focused on the burdens of PHSMs, primarily concerning the impact of COVID-19 on the national economy.

- Livelihood insecurity was a more pressing issue than COVID-19 for many in Guinea.
- Rising fuel prices and access to fuel were concerns for some social media users in Guinea.

*On 15 July, a citizen told a local newspaper, "This disease has really tired us. Many are now unemployed."*

*On 17 July, a Facebook user wrote, "Since the beginning of this pandemic the amount of people dying from it are not even up to one hundred, whilst thousands of people are dying of poverty on the other hand. In my opinion, it is necessary to fight more against poverty by improving the standard of living of citizens instead of COVID-19."*

Data Source: Novetta Mission Analytics



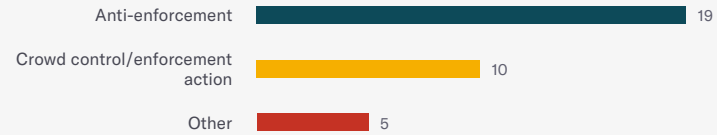
## Security

*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 people.*

A total of 32 COVID-19-related security incidents have been reported in Guinea since April, including a significant share that involved reports of violence. The majority of these incidents occurred in April and May. Of the 32 security incidents, 19 were civilian protests against PHSMs or the enforcement of PHSMs. Some protests involved residents demonstrating against the prolonged closure of mosques or against local checkpoints meant to restrict travel. In June, a group of youths demonstrated against acts of violence by the security forces enforcing the compulsory wearing of face masks. There have been 10 reports of violence against civilians during enforcement of PHSMs by state security forces.

## The majority of security incidents involved civilian protests against PHSMs or the violent enforcement of PHSMs.

Number of reported events by category, March-July



Data Source: ACLED Coronavirus-Related Events Database

## Data Sources and Methods

**Survey Data:** Ipsos conducted telephone poll of a nationally representative sample of 1,283 adults (642 urban, 641 rural) in Guinea between 6-18 August. The percentages reported in Ipsos charts may be different from percentages reported in other PERC products and communication of this data. Differences may be reconciled by investigating the denominator used, as indicated in each instance of use.

**Traditional News and Social Media:** Research is conducted by Novetta Mission Analytics using online, open-source African media, and geolocated African Twitter and Facebook sources. These qualitative data reflect public narratives in online media sources and among social media users. Quotes have been edited where necessary for clarity, with modified text in brackets.

**Epidemiological Data:** Provided by Africa Centres for Disease Control and Prevention.

**Other Data:** Drawn from publicly available sources.

Findings reflect the latest available information from listed sources at the time of analysis, and may not reflect more recent developments or data from other sources. Data vary in completeness, representativeness, and timeliness; limitations are discussed further at the link below.

For full details on data sources and methods see [preventepidemics.org/covid19/perc/](https://preventepidemics.org/covid19/perc/).