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WE VOICE

The Restless Development Sierra Leone Newsletter Feb 2015



TAKING THE LEAD ON EBOLA—COMMUNITY AGENCY, VPEs AND THE 'CLEA' APPROACH

Adapting the Restless Methodology to a National Ebola Response.

The first six months of the Ebola outbreak has been a challenge of incredible proportions for Sierra Leone and the communities with whom we work.

For a decade, Restless Development's approach to community engagement in Sierra Leone has built on a long-term commitment of supporting to strengthen existing structures, through the leadership of young, dedicated and trained Sierra Leonean volunteers. Our 'young leaders'.

Within the context of the Ebola outbreak, this commitment and resolve to work with communities is stronger than ever. It has taken the highest levels of innovation, dedication and imagination of our team to ensure our activities continued, while scaling up as part of one of Sierra Leone's largest ever social mobilisation campaigns.

In our first newsletter for a while, we have a lot to catch up on and its a bumper addition for the New Year.....

Our Ebola Action

Volunteer Peer Educators (VPEs)

Restless Development continues to support the work of 166 VPEs, who are based in 83 communities across 11 districts. For the first time, our VPEs are drawn directly from the communities in which they are placed. UNFPA, UNICEF and One Girl Australia have continued to support our VPEs through a difficult period of quarantines and programme redesign.

SMAC and the CLEA approach

Restless Development is part of the UK Aid-funded Social Mobilisation Action Consortium (SMAC), together with our partners BBC Media Action, Centres for Disease Control, FOCUS 1000 and GOAL.

For Restless Development, SMAC has meant working with 1,780 mobilisers across 8,880 communities, drawing on our deep knowledge of, and national reputation with, community leadership and local structures.

Restless Development led on the development of the Community-led Ebola Action (CLEA) approach, putting communities at the centre of their response in reducing transmission (see page 2). In each district, SMAC social mobilisers are providing information and vital support to communities, as well as to those responsible for conducting safe burials and transporting the sick for treatment.

With our SMAC partners, we are working closely with the Government of Sierra Leone and coordinating agencies at national and district level.

REFLECT and Urban Mobilisation

In Freetown, REFLECT learning circles of young women, supported under the Comic Relief-funded 'Pull Slum Pan Pipul' project, continue to meet, save money, improve numeracy and literacy and act as Ebola champions. Together with partner organisations, we have extended the programme to undertake city-wide social mobilisation. 300 young volunteers have been trained and facilitated to support their communities respond to Ebola.

A COMMUNITY-LED APPROACH

- 1,780 Community mobilisers trained and working in 12 of the 14 districts in Sierra Leone.
- 8,880 rural communities supported by mobilisers to develop community-led Ebola-awareness action plans.
- 53% of rural communities reached across Sierra Leone every 3 weeks, with telephone access to mobilisers.
- Alerts raised for burials and ambulance response—for example 63 alerts made in Kono district since January.
- 194 children affected by Ebola identified and reported to the Ministry of Social Welfare.
- Taking community concerns to district authorities.

Social Mobilisation Action Consortium COMMUNITY ACTION IN ROBUNG, BOMBALI DISTRICT



Robung is in Bombali, one of the districts with the highest rate of Ebola transmission. One day in December 2014, with permission from the district and local leadership, two SMAC social mobilisers arrived in Robung. Mamusu and Ibrahim had been recruited and trained by Restless Development to undertake a 'triggering' discussion using the CLEA methodology.

The triggering was conducted with a large group of community members, including the chief, and the activities that formed the basis of conversation included Ebola risk ranking and a burial role play. As a result of the discussion, the SMAC team learned that issues of major concern in Robung included denial of the existence of the Ebola virus, as well the hiding of sick and dead bodies. The mobilisers thanked the community for their participation and promised to return at a set date in the next couple of weeks.

Between the triggering and the next visit, a community champion had emerged in Robung, Mr. Conteh. Working with the SMAC mobilisers, Mr. Conteh took the lead in the development of a community Ebola action plan. It was agreed in the action plan that: *nobody should hide the sick or dead bodies* and *anyone who fall sick should go to the*

treatment centre. These two action points were closely monitored by Mr. Conteh along with the Robung community.

In 11 other neighboring communities, Mamusu and Ibrahim provided support and encouraged their champions to maintain neighborhood watch strategies in order to properly monitor and implement their own action plans.

Before the mobilisers visited again, a man fell sick in Robung and went into hiding. Mr. Conteh contacted the SMAC mobilisers, and with their support the champions in surrounding communities agreed to assist in the search for the man. As a result of the community effort, the sick person was located by Mr. Conteh, who safely guided the patient to the treatment centre.

Together as partners SMAC – UK Aid, BBC Media Action, CDC, FOCUS 1000, GOAL and Restless Development – are working with communities, across the airwaves and with religious leaders to address Ebola with a comprehensive social mobilisation approach that works from the community up. With valuable support from **Age International**, **Comic Relief** and **UNICEF**, Restless Development has been able to expand SMAC's work through an additional 480 social mobilisers in 5,160 communities.

HOW 'CLEA' WORKS FOR RESTLESS DEVELOPMENT

- SMAC social mobilisers—Restless Development ex-volunteers, community health workers and community/youth leaders—are trained in the CLEA methodology, safety and security, M&E and social mobilisation techniques.
- Coordination and consultation occurs with community and district leadership in preparation for engagement.
- Social mobilisers are paired and then connected to 12 communities.
- Each pair of social mobilisers visit each community and undertake a 'triggering' session, igniting action against Ebola. Within one or two visits an action plan is developed and champions are identified
- Every 1–3 weeks, social mobiliser pairs visit each community once, 4 communities a week.
- Mobilisers become a reliable constant for communities, assisting with referrals, alerting burial teams and providing advice.
- Every Monday the mobilisers meet with staff, submit monitoring reports, share information and prepare for the week.
- Mobilisers are monitored through field visits, phone, local authorities and communities.



SMAC AND THE COMMUNITY-LED EBOLA ACTION (CLEA) APPROACH

CLEA is a Participatory Rural Appraisal approach that supports communities to conduct their own analysis and take their own action to prevent Ebola transmission. It is a combination of the Restless Development VPE methodology and Community-led Total Sanitation (CLTS). CLEA focuses on triggering collective action by inspiring communities to understand the urgency of the situation and the steps they can take to protect themselves. This is generated through a consultative process led by mobilisers from within and outside the community. Unlike previous mobilisation efforts, which have mainly used health education and one-way communication to raise awareness among individuals, CLEA focuses on the community as a whole and on its collective benefits. Social solidarity, cooperation, and mutual support are vital elements of community life in Sierra Leone, which can and already do contribute positively to Ebola response efforts. As in any society, Sierra Leonean communities will modify norms, beliefs and behaviours in response to the conditions around them. CLEA mobilisers simply ignite and support communities to take these necessary steps.

SNAPS FROM SALONE EBOLA ACTIVITIES

AN ALTERNATIVE TO SCHOOL DURING EBOLA.

Quarantines and school closures have had a considerable impact on our 2014/15 Volunteer Peer Educator cycle. However, community-based volunteers were recruited, trained and continue to provide valuable peer instruction on sexual and reproductive health, life skills, livelihoods and Ebola.



SRH Lesson at the YFRC in the Woama Community in Kono District

In consultation with local authorities, VPE peer instruction is continuing in Youth Friendly Resource Centres (YFRC) in 83 communities. While schools are not expected to open for at least two more months, YFRCs have taken on extra importance as community run centres for learning, play, information and psychosocial support.

A SURVIVOR'S STORY.



Yeanken with her Ebola-Survivor Certificate

Yeanken Kamara is from the community of Colbot in Freetown. Three days after she returned from her sister's funeral, she felt ill and started showing signs and symptoms of Ebola.

It was during this time that Restless volunteers identified her at home. Yeanken was unconscious and volunteers called 117 for help. She was taken to the holding centre and tested positive for Ebola. She was then taken to the treatment centre for care. After the 27 days, Yeanken tested negative and became a survivor.

Yeanken returned home in her community but was stigmatised by her family and community. She stayed in her room for two days because of stigma. Volunteers heard about her return and they visited and welcomed her for the second time.

She explained that she was ashamed to go out. Volunteers encouraged her to walk around and sensitised the community people to support her during her recovery. Yeanken is now helping the volunteers to raise awareness in her community about Ebola. She is now living a healthy life style without stigma from her community and playing a productive role in reducing transmission in Colbot.

URBAN SOCIAL MOBILISATION.

Ebola has reached urban centres for the first time in history. It is in Freetown that rates of transmission have been the highest and the challenges the greatest.

Working with our partners under the existing Comic Relief-funded 'Pull Slum Pan Pipul' project, we are supporting 50 volunteers in slum communities to work with communities, provide advice, guidance and support in reducing Ebola transmission in their communities

Volunteers find that rather than simple messaging, two-way dialogue is essential right now in order to understand community concern, address rumours and answer difficult questions on transmission and the national Ebola response. We have put away the megaphones for now.

Daniel Kettor, who is managing our Urban Programmes says:

'this can be a very confusing time for communities, when their loved ones can be taken away or subject to new and strange processes such as safe medical burials, quarantine and waiting for ambulances. Our mobilisers are able to provide trusted information to communities and support during these difficult situations. They become focal points for Ebola-related issues in their communities, while themselves learning valuable skills'.

As part of the National Ebola Response Committee Western Area Surge, Restless Development has played a role in delivering information and support to the rapid, government-led scale-up of services and mobilisation.



Mobilisers Get Advice from President of the Sierra Leone Council of Tribal Heads, Chief Gbekie, Before Starting Work in His Community

In December, with support from the CDC, Restless worked closely with traditional leaders in 33 communities in Freetown to select and train 250 young people to conduct a rapid one month mobilisation. In that time our teams:

- Held Ebola-focused discussions with **16,255 households** and **264,663 people**.
- Identified and notified for transfer **61 sick people**, while also supporting many more to self report to hospitals.

OUR VOLUNTEER PEER EDUCATOR PROGRAMME WITH UNFPA



A successful partnership ends and new one begins...



CELEBRATING THREE YEARS OF PARTNERSHIP

Restless Development and UNFPA are celebrating the renewal of our successful partnership under the UK Aid-supported 'Improving Reproductive, Maternal and Newborn Health in Sierra Leone' Programme.

Our contribution to the nation-wide effort is our Volunteer Peer Educator (VPE) programme, which focuses on the sexual and reproductive health (SRH) of young people.

Volunteer Peer Educators - Our Young Leaders



VPEs are recruited from across the country and are trained to live and work in rural communities throughout Sierra Leone for 8 months. Working closely with a community board, they undertake a range of activities including peer instruction in schools, youth friendly resource centres, psychosocial support and organising events and celebrations. All with a focus on encouraging young people to make healthy decisions in regards to their life and relationships.

Evaluations consistently find increases in youth access of SRH services and awareness of issues related to pregnancy and SRH in VPE communities. Our VPE Programme Manager, Mrs. Hawa Brima, said about the impact of the VPEs :

'The SRH and Life Skills lessons given by our VPEs have helped many young people, especially adolescent girls, to stay in school, while playing a valuable role supporting teenage mother to return to school.'

Teenage Pregnancy Secretariat

The launch of the President's National Strategy for the Reduction of Teenage Pregnancy was a landmark event in Sierra Leone. Working together with UNFPA, Restless Development has played a lead role in the implementation of the strategy, including the launch across several districts and participation in the Technical Working Group. The Strategy continues to put the spotlight on an issue during this difficult period, where girls are at further risk due to school closures.

VPEs in a time of Ebola

Our initial reaction to the Ebola outbreak was fear; to withdraw VPEs and wait. However, we soon realised that Restless volunteers were well placed to continue what they do best; supporting communities in finding their own solutions. Quarantines brought new difficulties. Our solution? Recruit volunteers from their very own communities to take the programme forward. It has been a huge success and will make our work more sustainable into the future.

MARIATU – A YOUNG WOMAN LEADING

Mariatu Kamara, 16 years old, lives in Bombali. She became pregnant after she was forced to have sex by her boyfriend. Mariatu, like many young girls in her community, had little or no information on SRH and SGBV. She was ill-prepared when confronted by her boyfriend to have sex and was not protected. As a result of the pregnancy she dropped out of school.

In Mayolo, VPEs brought together teenage mothers from both in and out-of-school to share experiences and gain knowledge on their SRH by forming clubs. Through these clubs, young mothers gained knowledge on SGBV and life skills. Through the work of the VPEs Mariatu, was counselled and supported into going back to school.



Today, Mariatu is back at school and a proud member of the Teenage Mother's Club. She has become a role model in her community. Previously viewed as a dropout, she now gained the respect and acceptance of her community. She is serving as a peer role model, encouraging other girls to practice healthy SRH.

Thank you to our VPE partners.

We want to say a big thank you to the UNFPA staff and partners for their support across four VPE cycles from 2012– 2015 . A particular thank you to UK Aid for continued support since the very beginning.

Also, thank you other VPE partners over recent years: UNDP, Waterloo Foundation, One Girl Australia and UNICEF.

We look forward to continuing our new project in 2015 with UNFPA and many more years of restlessly developing the young leaders of tomorrow (and today!) in Sierra Leone.

THE VPE PROGRAMME IN NUMBERS: 2012/13 –2014/15

- 454 Volunteer Peer Educators completed their work.
- 134 communities , 13 districts and 402 schools.
- 97,900 young people accessed peer instruction in schools.
- 45,544 out-of-school youth accessed psychosocial support and lessons at Youth Friendly Resource Centres.
- 162 Teenage Mother's Clubs supported.
- 20,995 young people accessed VCT services.
- 3,000 lessons delivered on sexual and gender-based violence.
- 200,000+ condoms distributed.
- 134 Community Boards trained.
- 1,148 teachers trained in SRH instruction.
- 1,000+ Community Health Workers trained.
- 50+ VPEs hired as staff or volunteers.

FROM EBOLA SURVIVOR TO CHAMPION



FRANCIS KOROMA – EBOLA CHAMPION

Francis Koroma comes from Bombali, one of the Districts of highest Ebola transmission in the country. He is 28 years old. He is a Restless Development Community Mobiliser. And he is an Ebola survivor.

From Ebola Survivor to Ebola Champion

Francis' family lived in a chiefdom where an Ebola infected woman was buried at the very beginning of the outbreak. Unfortunately, many community members were in touch with the victim during her sickness and her death. Her body was washed (as is traditional) by the women of the village, amongst whom were Francis' mother and sisters.

It is thought that everybody who had come in touch with the body became infected: over 166 people died in the community. Only 25 survived. Francis lost his mother, brothers, sisters, wife and son.

Francis himself was infected, but after 3 days he sought medical treatment. An ambulance took him to a hospital in Kailahun District, where he spent two weeks fighting for his life. With the necessary medical care and inner strength, he survived the virus.

Francis now works as a SMAC Social Mobiliser and his leadership skills are coming to the fore.

Working with Fellow Survivors

Francis has been undertaking support visits to his colleague survivors in his community to reinforce the message of maintaining good health practices, including use of contraception for 90 days after surviving. Working with fellow survivors, Francis has recognised the need for

Ebola survivors to be organised to constructively support the Ebola fight and for the general welfare of their community. Inspired, Francis decided to gather some of his colleagues and shared the idea of forming a formal body for EVD survivors in Bombali.

Establishing a Survivors Association

An interim executive of Ebola survivors met Restless Development/SMAC staff and the Psychosocial Pillar of the National Ebola Response. They sought support in establishing a formal network, recognising it will be essential to give survivors a voice in a post-Ebola context.

Restless Development, through SMAC and with the support of the Psychosocial Pillar head in Bombali, has started assisting Francis and his colleagues to develop a vision for the association. The Ministry of Social Welfare will support Francis and his network members to register, hopefully providing a model and inspiration for survivors throughout Sierra Leone.



Developing a Vision and Mission—Survivor's Association Meeting in Bombali District

When considering the establishment of the Survivor's Association, Francis said:

'We can make much more difference if we as survivors have a voice in addressing the Ebola challenges we are facing today and at the post-Ebola stage'

This young survivor's hope is bringing a new character to the Ebola outbreak and provide a much needed forum for survivors in coming years. It is hoped that the model developed by Francis and his colleagues will be taken up nationwide. Restless Development and SMAC will continue to support this initiative and advocate for development partners to support the establishment of the survivors network nationally.

OUR PARTNERS:



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