

# Bridging Communities Network (BCN)

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## **District Consultations Report**

Fambul Tok International Sierra Leone

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## Introduction

Since the declaration of the outbreak of the Ebola Virus Disease by the Government of Sierra Leone in May 2014, Ebola has claimed many lives. Recent Government official data indicates that as of December, 2014, Sierra Leone has recorded over 6,000 infections and over 2,000 confirmed deaths. The Government with its international partners has put institutional response mechanisms in place to help fight the disease. With all these mechanisms, the infection rate still remain high. Part of this can be attributed to the continuing gap in communication between the government response mechanisms and communities living with the virus. In an effort to respond to this gap, national civil society organisations as well as community based organizations, under the leadership of Fambul Talk International-Sierra Leone have come together and established the **Bridging Communities Network (BCN)** to provide a critical communication bridge to communities.

At the national level, Fambul Tok International Sierra Leone (FTI-SL) in collaboration with the Center for the Coordination of Youth Activities (CCYA), Campaign for Good Governance (CGG), Advocacy Movement Network (AMNET), Defense for Children International (DCI), SLYEO, Movement for The Restoration of Democracy (MRD) and Center for Accountability and the Rule of Law (CARL) all facilitated the mobilization of district BCN structures and also supported the organization of the consultations.

As a way to complement government-led efforts in the fight against Ebola in Sierra Leone, the **Bridging Communities Network (BCN)**, a network of national Non-Governmental Organizations and Community Based Organizations, coordinating at national, district and community levels, embarked on district level consultations with the main goal of facilitating stronger collaboration around the national Ebola response strategy. It is a platform of interaction and interface between citizens' action groups and the National Ebola Response Centre (NERC) as well as the District Ebola Response Centre (DERC) at the national and district levels. The purpose of the district consultations was to enhance citizens' understanding about the national Ebola response generally; understand the obstacles to constructive community engagement in Ebola prevention and management, so that they may be constructively addressed; as well as highlight and share innovative community actions amongst citizens, particularly the most vulnerable, in order to stop the spread of Ebola.

This report provides an account of the consultations that have taken place so far in the months of November and December 2014.

## Objectives

- To facilitate district community's participation and engagements in the governance and decision making of the District Ebola Response efforts.
- To facilitate and strengthen civil society and communities' mobilization to engage in Ebola Infection Prevention Control processes through communication feedback that put people and communities at the centre of the action to control the disease.

## Approach

The district consultations brought together representatives of the District Ebola Response Center, or DERC, which provides a multi sector coordination hub as well as lead institution for the district Ebola response efforts; the District Councils, the local government administrations of the Districts; the Districts' Health Management Teams (DHMT), lead agencies for health service delivery within specific district jurisdictions; International Non Governmental Organizations (INGOs), National Non Governmental organizations (NGOs)/ Civil Society groups. At the community level, the BCN emphasized inviting representation from chiefdom communities and brought together two (2) representatives from every chiefdom in a given district, one male and one female.

The consultations were organized such that there was an official part which provided an opportunity for key stakeholders to share experiences and report on the national and district Ebola response efforts. It started with official reports from the district leadership for the Ebola Response coordinating center and was followed by individual reports from district health services about the state of Ebola in the district and the scale of the response efforts. These official reports set the tone of the meeting, clarified the expectations of participants and established their commitment to work collectively together in the fight against Ebola.

The second part of the meeting commenced after FTI-SL explained the purpose of the meeting and concept of the BCN. This second segment facilitated interaction and discussions among community representatives. The meeting took the form of plenary presentations, question and answer/experience sharing sessions and group discussions around context-specific community experiences from the respective participants.

## Progress

District Consultations have so far taken place in nine out of the fourteen districts in Sierra Leone.

District	Consultation dates
Port Loko district	26 <sup>th</sup> November 2014
Bombali district	27 <sup>th</sup> November 2014
Koinadugu district	28 <sup>th</sup> November 2014
Moyamba district	30 <sup>th</sup> November 2014
Tonkolili district	9 <sup>th</sup> December 2014
Western Rural district	12 <sup>th</sup> December 2014
Kenema district	12 <sup>th</sup> December 2014
Western Urban district	16 <sup>th</sup> December 2014
Kono district	20 <sup>th</sup> December 2014

The districts targeted are a mix of high and low risks districts. The consultations commenced in areas that had increased rates of new transmissions in their communities. The consultations took place at the district head quarter towns because of the proximity to representatives of many of the coordinating entities and organizations.

## Key Issues, learning, and recommendations

Key issues that emerged in the consultations from all the districts so far consulted include the following:

### 1. The BCN, a positive move towards greater community involvement

All of the district meetings were unanimous in their agreement that the role being played by Fambul Tok International through the BCN concept of bridging communities was facilitating the involvement of communities to complement government's efforts in the Ebola fight. They described these engagements as timely and likely to produce positive results and impact by addressing current gaps in information sharing and feedback response in the current Ebola fight at districts level.

**It is being strongly recommended that the BCN concept continues to roll out to other communities and build a formidable web that would support the Government led efforts through this platform and stimulate essential community efforts.**

### 2. NERC/ DERCs and communities

At the district consultations, the meetings shared graphic stories providing evidence of the level of misunderstanding and apprehensions about the relationships, efforts and responsibilities of the state and that of citizens. State and citizens linkages between the NERC/ DERC and communities were observed to be very weak in some districts such as Kono, Western Rural and Urban districts, Bombali and Tonkolili districts irrespective of the level of social mobilization

efforts by the DERC and information dissemination efforts that are taking place in these districts. CSOs/ NGOs have been playing some supportive role by monitoring activity and sensitizing communities about support available from government and international partners.

**It was clearly identified that there is need to deepen the engagements with communities by facilitating the articulation of stronger communities' roles, responsibilities and leadership in facilitating general policy prescriptions in facilitating the Ebola response efforts. This provides the basis to build community capacity for any future response and will ensure sustainability of interventions in the immediate post Ebola era.**

### **3. International efforts MUST support National priorities, and MUST directly engage communities**

The current Ebola crisis has generated a lot of international interest and has received massive influx of aid to Sierra Leone. Since this is the first outbreak of this scale in such a small country, it is evident that outside technical and financial resources are required to help keep the crisis in check. Such support should ideally be channeled and aligned to the emergency response plan developed by the Government. Even though the NERC's role at the national level is to coordinate the effort of all partners, the impression from district representatives was different. In all the district consultations, it was revealed that international response could be more effective if such efforts sought to give support to government led efforts - not only international financial support but more coordination – at all levels. Interventions at community levels bear the hallmark of either what Government is doing or what INGOs are doing. Their opinion indicates that at the community levels the ebola response efforts are not collective and not properly coordinated. Disjointed efforts undermine the virtues of participation and collective efforts.

In addition, it was clearly recognized that efforts at fighting Ebola should not only be left in the hands of the structures of government but should incorporate communities as well. Communities should be supported and empowered to play meaningful roles to enhance these efforts.

**There were suggestions in all the districts for stronger collaboration and greater community participation in addressing Infection prevention control and adherence to regulations and by-laws to stem the spread of infection. There is need to articulate and spread information about tangible community contributions as well as their responsibilities in the fight against Ebola.**

## 4. Ebola Response Architecture

Since the district consultations were meant to also facilitate information sharing and learning about the national Ebola response generally, information was shared with participants about the NERC and the DERC and what they do.

The ensuing question and answer sessions in the meetings challenged the low level of district response to community demands, which was identified as a structural problem and the result of communication gaps.

However, the level of community structures and communities' responses varied from district to district. For example, Kenema district, which had now gone a couple of weeks without registering a new infection, revealed that efforts were made to establish real time community/ chieftdom response mechanisms (Chieftdom Task Forces) and sub committees to cascade some of the functions of the DERC mechanisms as well as ensure the participation of communities in the general response efforts but specifically focused on:

- Promulgation and monitoring of implementation of chieftdom by-laws on ebola ,such as reporting all strangers and sick people within the community to the Town Chief
- Monitoring movement of people in and out of the communities. Many chieftdoms seriously regulated movement of people
- Facilitated surveillance and contact tracing
- Supported for general sensitization

These measures have built community solidarity, respect for the rule of law and the authorities, and prevented the further spread of Ebola.

Communities in Kenema recognized there were problems in getting quick response from the burial team, so communities opted to take the initiative themselves, and cascade the burial mechanism at the districts level to their communities in order to avoid unnecessary burial delays and decay of dead bodies.

**These are examples of good practices that were shared with other districts when they came to light. Some request is being made by communities to share more experiences among communities to help spread an understanding of best practices. The BCN has been requested to facilitate community exchange and learning visits that would facilitate experience sharing and learning from communities with good practices.**

## 5. Concerns of the ordinary people disregarded in the Ebola response

The district consultations were an eye opener for all the organisations represented and for the district Ebola response infrastructure, as they were revealing in many ways. One key observation from all of the consultations was that communities claimed their concerns are normally not considered in decision making processes. This was expressed in *all* of the district meetings as a critical issues. Communities repeatedly indicated they are not well connected to district level processes and there was still no genuine line or medium of communication. They

also stated that feedback between communities and the Ebola response mechanisms, which have the potential as learning forums are almost outlawed in all districts. A basic observation from the contributions was that there are inappropriate or no medium for communities to report incidences of infection because there was always the issue of cross checking incident reports. There are also no feedback mechanisms to ensure that their concerns are heard by the DERC/ NERC on issues related to Ebola, as well as more generally on peace and security.

**There is need to build some level of communication platform with communities that are trusted remove the element of doubt. Rolling out BCN to serve as a facilitator and an interlocutor presents bright prospects for this. The interventions with opinion leaders is part of the process of accompanying communities but other trusted and respected channels need to be further explored and supported**

## **6. Community responsibility in the Ebola fight is appropriate**

The initiative of collaboratively working with communities in a network was lauded and all district Ebola response structures emphasized the value BCN added in terms of community mobilization, involvement, participation. The DERC's committed to fully cooperate, collaborate and get engaged with communities using the platform and process set up by BCN/ FTI-SL. BCN has therefore been asked and invited to serve as a member of the pillar working groups in the DERC at district level.

**Communities need to be trusted and given greater levels of freedom to accept responsibility to save their communities.** There are a lot of threats and coercion being used in an effort to ensure compliance with rules and procedures that affect communities' way of life without due consultation and consent. There were cases recounted about their chiefs being a bit heavy handed on subjects found wanting for some outlawed behavior. The chiefs explained their behavior by stating that the President has threatened to take away their symbol of authority if they fail to ensure their subjects' compliance to certain rules particularly the rule concerning non burial of dead bodies by communities which is now a government responsibility. This has ultimately left room for resentment because the critical issues about who is buried by government the responsibility for the timely disposal of dead bodies still remain unresolved. Stronger partnerships and greater collaboration are required with the right basic community structures to facilitate greater community involvement and commitment to live by and respect the rules of engagement in the fight against Ebola.

## **7. Communication gap with communities in the current Ebola response**

There was a resounding complaint from community members about the limited access and in some cases no access to information about positive cases from communities. Stories from



community participants indicated that in most cases relatives and family members do not receive feedback from medics about their sick members when they are taken to Ebola isolation, holding, or treatment centers. There was usually no feedback on the status of patients generally. In some cases, where patients do not survive, nothing is communicated with families about the death and burial place of their loved ones.

It was repeatedly noted that this was the first time communities were brought together to share experiences and perspective about Ebola and what is being done at the communities' levels. This level of communication gap was noted as very difficult to take and described as a bit part of the reason why communities were becoming apprehensive in complying with regulations instituted from the districts.

**CSOs and communities' commitment to fill the gap of reporting and feedback is quite critical in the fight to succeed. The need is still very evident and the BCN provides a platform and process to support community response initiatives. These initiatives would require greater support to get this going in a timely manner.**

## **8. Communities' role in contact tracing and burials**

Contact tracing infected persons and conducting safe burials of Ebola victims are an integral part of the national Ebola response efforts. It is a proven fact that communities can be of help in tracing contacts of infected persons as well as facilitating the burial of persons. The participants at the meetings in all the districts were in general agreement that tracing of contacts of Ebola patients and conducting safe burials in communities is not effective for a number of reasons. For example, the fact that community members are not being given priority when community contact tracers and members of burial teams are recruited. Initially, those who could volunteer to get involved were given the opportunity even though they were often not members of that specific community. As a result, people who come from other areas were tasked to work tracing contacts and conducting burials. Experiences from communities indicated that tracing of contacts of Ebola positive infected persons was hard for people who were not members of rural communities as the contacts made during their period of illness in most cases could not be adequately traced.

**This reveals a clear need to find a way to recruit community-based contact tracers.**

It was also evident that in some hard to reach communities, safe burials were not conducted on time as it took about 2 to 4 days for burial teams to reach such locations. Burial teams have been constituted at district level with the mandate to conduct all burials. The delays accounted in part for why communities risked burying their dead as the response time became

unacceptable in their view (looking on as bodies of their loved ones decompose). **There is a need for more localized burial teams, to allow for more rapid burials.**

The practice of burials is normally the domain of male members of communities. Participants at the district consultations in most of the districts visited indicated that the composition of burial teams is male dominated. Although this is the normal practice in normal times, community representatives speaking on behalf of their communities revealed that the emergency has provided the opportunity for some consideration for women to be encouraged to play this role since all deaths even of prominent traditional female members of communities could be handled by strange people and is culturally fitting. **There is a general call for community women to serve in burial teams in an effort to ensure the cultural needs of women who succumb to the virus or die naturally are met particularly in culturally sensitive communities.**

## 9. Slow response to community needs

The current emergency response architecture has created an emergency response hub that is toll free. The official public information claims this call centre facilitates quick response for Ebola related queries from communities. In all the districts where consultations have been facilitated, there is a general agreement that the emergency (117) response to queries has been mixed. Some recounted that some of the responses were timely but there were many that were painfully slow, particularly the response to disposing of dead bodies.

In all the districts, there were numerous accounts of suspected or confirmed Ebola cases taken from communities to holding or treatment centers with absolutely no feedback to such communities. Even where family members attempted to trace their sick siblings there were problems of inadequate information. This is part of the gap in communication that exists between the response efforts and communities in the current Ebola fight. This lack of appropriate response to community calls for urgent interventions either for Ambulance, tracing of contacts and burying dead bodies is continuing to undermine the good efforts of getting communities to report suspicious incidents to help stem the rate of infection.

There is a rising level of mistrust in the current response efforts which is quite alarming and is a serious cause for concern.

The apparent mistrust between communities and the health sector in the current Ebola fight is also strongly related to the levels of negative reaction to medics who are reluctant to treat community members for fear of contracting the virus and request an Ebola virus test even when some presents symptoms of a common cold or have injuries as well as the lack of communication between communities and medical personnel and feedback on status of where

communities should seek treatment for other kinds of illness. **A way around this need to be found quite quickly, otherwise the level of non Ebola fatalities will continue to increase and the communities will be at high risk. Increasing communication between communities and health workers is thus critical at many levels.**

### **10. The importance of stronger collaboration among key actors**

The national Ebola response is led by the National Ebola Response Centre with its district structures replicated at each level. This Ebola emergency response effort has almost replaced normal development activity and hitherto related structures have been rendered almost defunct. The district consultations raised questions about the role of DERC, Local Councils and District Health Management Teams in this response currently and beyond. There was a strong suggestion about the need for increased collaboration between DHMT, district councils and DERC in facilitating Ebola related response efforts. Community members have started to think ahead and suggested this because of the apparent confusion and apprehension/ fear that the Ebola response efforts is threatening to dismantle existing lower level development units and structures such as Ward Committees that are mandated by law as the first unit of development.

**There were suggestions that community structures like ward committees can be used now and capacitated to play important community participation facilitation role for future post Ebola interventions. The BCN can support such processes to strengthen what the Government is currently doing in that direction.**

### **11. The need for stepping up psychosocial services in the Ebola response**

The Ebola Virus Disease has posed and continues to pose serious challenges in the general response efforts. In the early days when the epidemic was declared, whole families died and there were increasing cases where the head of households die leaving a growing number of orphans within communities. Psychosocial support services to vulnerable groups, even though they have improved considerably and are receiving increasing recognition, are still not effective. There were reports during the consultations of the need to focus on the needs of survivors and relatives of deceased persons. In Port Loko, Bombali, and Kono district communities, there are claims that some children taken to treatment centers in far away districts like Kailahun and Kenema find it difficult to re-connect/ reunite with their relatives and family members after recovery from Ebola.

These are areas the BCN can be helpful in working with the Ministry of Social Welfare Gender and Children's Affairs and orphanages to identify such children, provide psychosocial support and reunite them with their families and communities for a lasting community support initiative for such persons.

**Communities should be consulted in an ongoing way to identify priority needs, as well as mobilize resources for addressing those needs.**

## **12. Socio-economic impacts of Ebola on communities**

In all the consultations it came out clearly that the current Ebola epidemic is posing socio-economic impacts on communities. The social lives of communities have been seriously disrupted by the pronouncement by the government order to avoid body contact in whatever form and by putting communities and whole chiefdoms under quarantine for 21 days. In Moyamba, Koinadugu and Port Loko districts there were reports that communities in a specific chiefdom where the outbreak is serious have been quarantined in the range of 6 to 8 weeks with minimal support in some cases from government or its partners. The stringent security measures that have accompanied these processes across sections of these districts particularly restrictions in movement and activities, is becoming a nightmare for ordinary people.

**Supporting local economic efforts will inject some skills and needed capital into the economies of these communities - it is important to facilitate livelihood security among poor communities in the affected communities**

## **13. Need for alternatives in the Ebola response**

The district consultations reported government and communities' efforts in the fight to stem the spread of the virus. In some cases, there were hopeless accounts of how hard individuals have tried to respond. At the current stage, there is the need for communities to think out of the box in seeking solutions to the problems of combating Ebola. There is therefore an urgent need to develop alternative measures that are appropriate and culturally sensitive for community members in the Ebola response, especially when dealing with infected or dead relatives or loved ones before burial teams arrive. Alternative measures of disposal of dead bodies in non Ebola communities are concerns that need to be considered to allow communities to take care of their problems particularly where district capacities (for disposing dead bodies) are stretched and unable to provide the required support to communities on time.

**Communities need to be accompanied and supported through their local networks to advocate and propose local solutions to some of the difficulties they currently face.**

## Key considerations

In all the districts covered so far, communities are calling on NERC to take the following into consideration:

- a) Putting communities at the center of the response efforts is a major call by community members. Communities seem committed and ready to get involved rather than have external facilitators acting on their behalf. They require actions around Ebola to be facilitated by communities themselves using their resources and efforts with some minimal support
- b) The idea of networking organizations and other related partners should be supported to rally grass root / community participation in the Ebola fight. The need for community planning that looks at “after Ebola” issues like community psychosocial healing support needs to be strongly considered. Fambul Tok facilitating such a process is a ready fit for such an initiative
- c) Stronger linkages are required between civil society representing communities interest and all decision making processes in the Ebola response architecture. Such engagements should promote transparency, accountability and facilitate speedy response oriented actions on community concerns and Ebola related incidents at all levels
- d) Communities must be supported to actively get involved in the current Ebola fight for innovative positive behavioral change practices in infection prevention control. This will involve strengthening community structures to take the lead in the Ebola response at community levels
- e) System of communities taking the fore in responding and taking up the role of safe burials and tracing contacts of infected members at the community level should be explored and invigorated to facilitate greater communities’ involvement and participation in these processes.
- f) Decision making that impacts on communities should take into consideration their concerns as well as their involvement. Local stakeholders in the district should consult the grass root people before taking decisions that would affect them, their living conditions and the ways of association. This should be a strong call going forward.
- g) The BCN initiative to bridge existing communication gaps in the Ebola response through messaging. Reporting of incidents and facilitating a dual feedback process between communities and DERC/ NERC, should be supported and deepened. Direct involvement of credible community members in information dissemination by BCN should be applauded