



Still Surviving Ebola

Emergency and Recovery Response in Sierra Leone

January 2016

World Vision is a global Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

World Vision began operating in Sierra Leone in 1996 in the midst of a decade-long civil war, assisting children and their families in the poorest communities. Today World Vision supports more than 58,000 children through 25 long-term area development programmes in four districts (Bo, Bonthe, Kono and Pujehun).

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Front cover photo: Sierra Leonean Ebola survivor, Theresa Conteh, volunteered to help care for children orphaned by the virus, such as Safiatu, age 6.
Jonathan Bundu ©World Vision

Dedication

This report is dedicated to memory of the 3,955 men, women and children who lost their lives to Ebola, as well as Sierra Leone's courageous 6 million people – all of whom remain profoundly affected by the Ebola crisis.



With gratitude

World Vision would like to acknowledge the generous support of governmental, multilateral and other agencies, including:

Government of Sierra Leone	Global Fund for Malaria
Aktion Deutschland Hilft	Irish Aid
Austria Aid	Samenwerkende Hulporganisaties (SHO, Netherlands)
AusAID	UNICEF
Department for International Development	USAID
Disasters Emergency Committee	World Food Programme
European Commission	

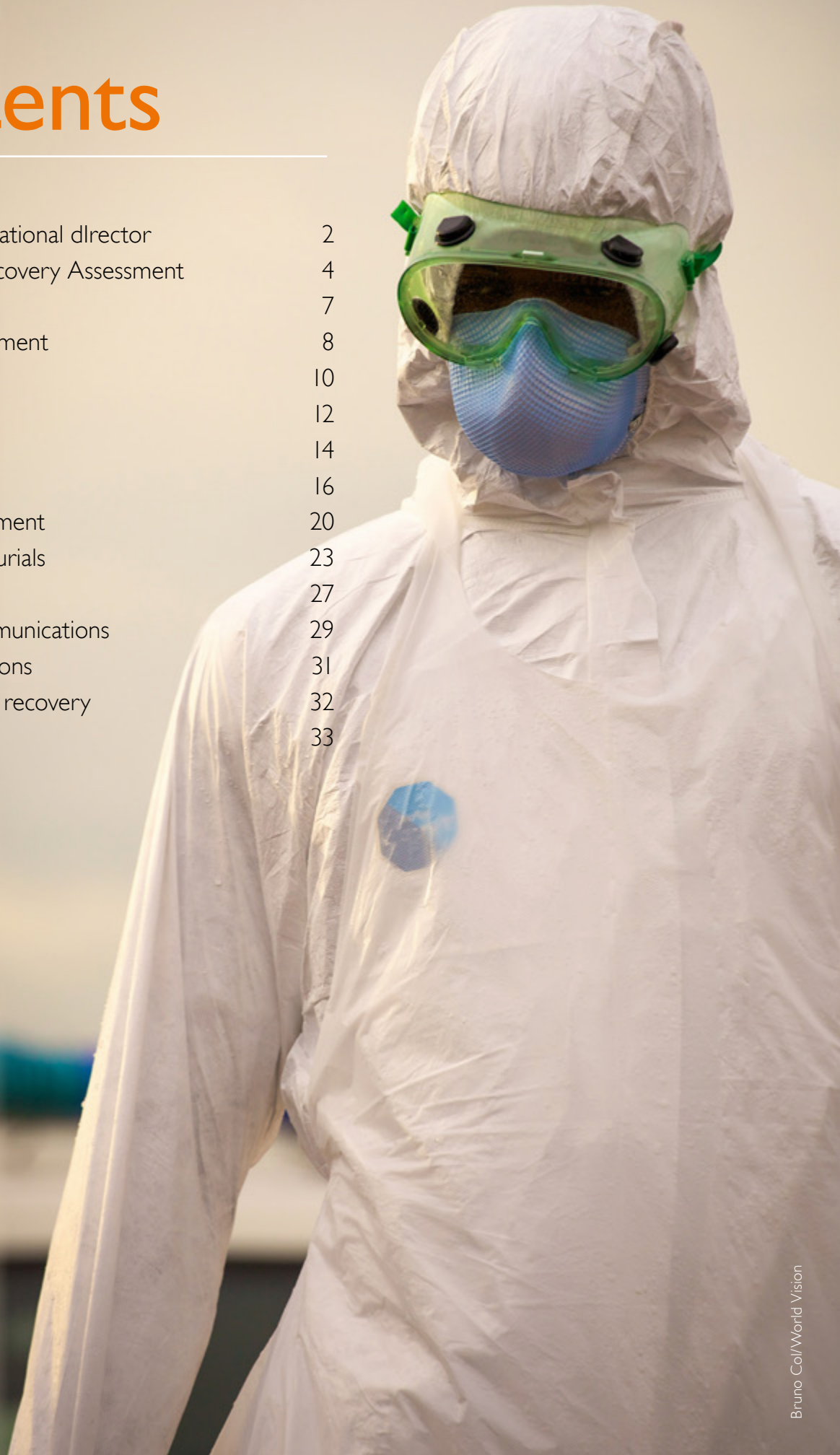
We are also grateful for the commitment of World Vision's 58,000 child sponsors and other donors representing nine countries worldwide.

List of abbreviations

CAFOD	Catholic Agency for Overseas Development
CoH	Channels of Hope
CRS	Catholic Relief Services
CVA	Citizen Voice and Action
DFID	UK Department for International Development
LEAP	Livelihood Enhancement for Affected People
MDGs	Millennium Development Goals
MEST	Ministry of Education, Science and Technology
NGO	Non-governmental organisation
SG	Savings groups
SMART	Social Mobilisation And Respectful Burials Through faith-based alliance
WFP	World Food Programme
WHO	World Health Organization

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Message from the national director

‘Am I in the valley of the shadow of death, Lord?’

I asked this question daily at the height of the Ebola crisis in November 2014. Corpses lay in the streets. Every ambulance siren reminded me of yet another virus victim. Even the experts seemed unsure how to contain Ebola’s rapid-fire spread.

My country had survived a 10-year civil war, but Ebola was clearly a different battle. An invisible enemy stalked us. We found ourselves at the epicentre of a global public health crisis that confounded the world.

Ebola infected more than 14,000 people in Sierra Leone and claimed the lives of 3,955 victims, including 945 children. Not everyone was *infected* by the virus, but every Sierra Leonean was profoundly *affected* by the epidemic.

During the 15-month crisis, World Vision worked tirelessly to protect the 58,000 children in our programme and their families from Ebola. Our response – and our future recovery plan – took a three-pronged approach. Throughout the epidemic, we remained:

1. **Consistently child-focused:** Children and their well-being are World Vision’s priority, and the organisation maintained its strategic, laser-sharp focus on health, education, child protection and family livelihoods throughout the Ebola response.

2. **Grassroots-engaged:** Communities trust World Vision based on its proven 20-year track record of results delivery – trust that was critical in mobilising leaders and families to fight Ebola.
3. **Committed long-haul:** Children and their families will still be surviving Ebola for years to come; World Vision will be there to support them.

World Vision reached 1.6 million people during the epidemic. We are thankful that not one of the 58,000 children in our partner communities was lost to Ebola.

On 7 November 2015 we celebrated the defeat of Ebola in Sierra Leone. We are grateful to God for this victory and for the many friends and partners who stood with us throughout the crisis.

In responding to Ebola, perhaps the most critical lesson we learned is this: our potential to affect the lives of children and families lies in our willingness to step out of our comfort zone in the face of a difficult, unfamiliar situation. Resilience is borne in those who think and act outside the box.

World Vision’s provision of medical supplies at a critical time of need, along with the engagement of community and faith leaders, helped stall the spread of Ebola. However, it was our outside-the-box willingness to set up and manage

World Vision Sierra Leone received the President’s Award for its lifesaving Ebola response operation.



Children and families will need long-term support to recover from the Ebola crisis.

Sahr Ngaujah / World Vision

12 District Ebola Recovery Command and Control Centres, maintain a fleet of 1,073 ambulances, hearses and service vehicles, and provide 36,533 safe and dignified burials that will perhaps be remembered as our greatest contributions.

World Vision demonstrated that it is a courageous partner that can rise to the challenge. This is our organisational character, of which you are all a part. Whether you bravely came to Sierra Leone when many feared to, worked long hours to raise funds and international awareness or provided leadership, advice and guidance to the team on the ground – whatever you did in your own way – you are part of this story of character in action.

We emerged from the valley of the shadow of death, and we emerged stronger. But the assault on Ebola is far from over. We cannot become complacent. A reported 50 per cent of countries that previously had Ebola outbreaks suffered a new outbreak within 24 months of being declared free of the disease. We must strengthen our health-care systems and education structures to ensure that our children are protected from future epidemics.

Thank you for walking with us and for your continued support on the long road to recovery ahead.

Leslie Scott
National Director
World Vision Sierra Leone

CHILDREN'S EBOLA RECOVERY ASSESSMENT

What the children told us

Children across Sierra Leone report that exploitation and violence against them – especially girls – increased during the Ebola crisis. They remain fearful about their future, even as their country moves towards recovery.

Children shared their personal experiences and deep concerns about the devastating long-term effects of the crisis on their lives as part of the *Children's Ebola Recovery Assessment* report. The study was conducted by World Vision, Plan International and Save the Children, with the support of UNICEF, in March 2015. More than 1,100 girls and boys aged 7 to 18 from nine districts were consulted about the impact of Ebola.

The fear of sexual assault was common among the children interviewed. A large number spoke of at least one case of rape against a girl in their communities, including attacks on girls in Ebola-quarantine households. Boys were also acutely aware of the risk faced by their sisters and friends.

The children viewed Sierra Leone's nine-month school closure as being directly linked to increases in child

labour and exploitation, exposure to violence in the home and community, and teenage pregnancy.

Most of the 617 girls interviewed said they believe that higher incidences of teenage pregnancy in their communities are as a result of girls being outside the protective classroom environment, exposing them to the risk of sexual exploitation or assault. Classrooms were closed for nine months in Sierra Leone to help prevent the spread of Ebola, delaying the schooling of some 1.7 million children.

Some children (10 per cent of the focus group discussion participants) reported that vulnerable girls, especially those who have lost relatives to Ebola, are being forced into transactional sex to pay for their basic daily needs, including food. Children saw this as one of several factors contributing to increases in teenage pregnancy.

Children also said they were concerned about the impact of rape on their peers, including psychological damage, pregnancy, sexually transmitted infections, physical harm or death, discrimination and stigma.

‘I lost my mother to Ebola and I am now the breadwinner... I struggle to feed my family.’

Girl, age 15-18, Bo, Sierra Leone





Elizabeth, 14, worries about catching up after the nine-month school closure in Sierra Leone.

Sahr Ngaujah/World Vision

Children participating in the survey called on the Government of Sierra Leone to:

1. ensure that education is accessible for all children, including school fee subsidies and scholarships for those who have lost relatives to Ebola, especially orphans.
2. strengthen the health system, providing additional qualified staff, especially for rural clinics that have been abandoned by personnel fearing Ebola.

3. stop child labour and exploitation – and thereby reduce teen pregnancies – by sensitising parents and providing livelihoods to poor families in order to protect girls from transactional sex.

The children's feedback and recommendations informed the Government of Sierra Leone's National Ebola Recovery Strategy, as well as World Vision's care for children throughout the Ebola emergency. For the full report, please visit www.wvi.org.

Living with relatives is never the same like living with parents.... They will never treat you like their child.... Now I have no one to call mother.'

Boy, age 11-14, Port Loko, Sierra Leone



'Every calamity brings new opportunities to correct the mistakes of the past. The Children's Ebola Recovery Assessment emphasises the opportunities to redefine the roles of children and child protection.... Together, we must all ensure that children's fundamental rights to education are assured and that we close the gender inequality gap in access to education for boys and girls.'

Her Excellency Mrs Sia Nyama Koroma
First Lady of the Republic of Sierra Leone



AT A GLANCE

World Vision's Ebola Emergency Response
November 2014 to October 2015

EDUCATION

13,430

World Vision volunteers cleaned 2,686 schools for class re-opening

30,000

radios distributed to children to support broadcast catch-up classes following the nine-month school closure

36,000

teachers trained in psychosocial first aid, using a manual coproduced by Government of Sierra Leone, World Vision and partners

US\$425,000

banked by 566 savings groups (women and men) trained by World Vision



500

farmers provided with seeds, tools, training in post-harvest management

276,653

vulnerable people supplied with 3,688 MT of food and/or cash transfers

LIVELIHOODS/ FOOD SECURITY

LOGISTICS

1,073

vehicles, including ambulances and burial team trucks, maintained and serviced

12

inter-agency Ebola-response Command and Control Centres managed

1.6 million
Ebola-affected people reached

2,117

ministers and imams and 30 paramount chiefs trained in Ebola prevention

371,580

community members reached by faith leaders

FAITH LEADER ENGAGEMENT

HEALTH

1,020

health-care professionals and 950 community health workers trained in infection prevention and control

7,000

hygiene kits distributed to 200 schools

5.4 million

personal protective equipment items (suits, gloves, face masks, goggles, etc.) procured and delivered to hospitals and primary health-care units

36,533

safe and dignified burials conducted by 800 burial workers trained by World Vision and partner NGOs

500

citizens mobilised to advocate for improved health services

1,100

children surveyed for the Children's Ebola Recovery Assessment

3,000

members of local Mothers' Clubs and Community Welfare Committees trained in child protection legislation, parenting and psychosocial first aid skills

CHILD PROTECTION AND ADVOCACY

COMMUNITY ENGAGEMENT

Building on 20 years of trusted partnership

The Ebola crisis taught frontline non-governmental organisations (NGOs) many hard lessons. Responding to this unprecedented global health emergency was uncharted territory for medical and non-medical organisations alike. But we all agree that more effective community engagement at every level could have saved more lives more quickly.

Initially, many Sierra Leoneans did not believe Ebola was real. They did not trust the prevention messages delivered by mass media, and they fearfully resisted seeking treatment at hospitals and NGO-run Ebola clinics. As in any emergency, people need to receive information directly from recognised, trusted local leaders – paramount chiefs, pastors, imams, teachers and health workers – who respect and understand their culture and religious traditions. Citizens don't want to be told what to do; they want to participate in finding and owning workable solutions to protect themselves, their children and their communities.

For World Vision, community engagement is not about top-down approaches. Our staff members don't parachute into communities where they work; they live there. They attend

baptisms, weddings and funerals. When you celebrate and mourn alongside people over years, you earn the right to be heard. We sit with paramount chiefs and national ministers, parents and children – dialoguing and listening to their vision and their challenges. Then we work together to achieve our shared goal: the sustained well-being of our children.

Children remained our top priority throughout the Ebola crisis. We continued to focus on their health, education and protection, and on enhancing their families' livelihoods. To protect them from Ebola, we mobilised our networks and tapped into relationships built with national and district governments, fellow NGOs, faith leaders and other partners over 20 years of grassroots work in Sierra Leone.

We organised forums where people could share their fears and unanswered questions about Ebola. We worked with paramount chiefs to develop effective bylaws to help shield their communities from the virus. For instance, anyone hiding sick family members or refusing to be tested for Ebola if symptomatic would be fined up to 300,000 leones (about US\$60) – several months' salary

Community engagement was decisive. The distribution of messages and leaflets does not win the cooperation of communities. This happens when communities understand and own the problem, and carve out their own socially and culturally acceptable solutions. For example, when communities worked out their own way to separate the sick from the healthy, that solution was far more effective than quarantines enforced by armed military personnel.'

Dr Margaret Chan
Director-General,
World Health Organization



for many rural people. Outsiders – even relatives – were not allowed to stay in communities without permission. Violators faced stiff fines and sanctions. Communities that respected the bylaws prevented and contained Ebola more quickly.

Our community engagement went broad and deep. We trained more than 950 community health workers who went door to door raising awareness about Ebola and its prevention. Some

2,117 faith leaders – both Christian and Muslim – participated in 130 workshops on Ebola awareness, reaching over 371,580 community members. And we managed 800 burial workers, who provided safe and dignified burials for 36,533 people across Sierra Leone.

If we are to prevent future Ebola outbreaks, World Vision and other NGOs must continue to strengthen our community engagement to ensure sustained community ownership.

‘God bless World Vision, who helped us with knowledge about Ebola prevention and response, and how to mitigate against stigma and shame. Had it not been for them, more of our relatives would have died.’

Community member,
Tonkolili, Sierra Leone



World Vision equipped communities with Ebola prevention information, such as the importance of handwashing.



EDUCATION

Creating safe, supportive learning environments

Eleven-year-old Millicent describes 14 April 2015 as 'the best day of my life'. That's the day that schools officially reopened in Sierra Leone after a nine-month closure to help contain the spread of Ebola.

'When my teacher came by to tell my family that school was reopening, I was so happy,' says Millicent, a World Vision sponsored child. 'But I was also worried that I had forgotten everything I ever learned.'

The shutdown affected more than 1.7 million children, who are still struggling to catch up academically and cope with post-Ebola stress.

Many students are also still grieving lost classmates and loved ones. A reported 12,012 children lost one or both parents to the virus. Preliminary results of a survey conducted by the Sierra Leonean Government suggest that 181 teachers and 945 students died of Ebola virus disease, while 597 teachers and 609 students contracted the disease but survived.

'We needed to create a supportive learning environment where children feel safe to express their emotions about what they have endured,' says Alison Schafer, World Vision's mental health

and psychosocial support specialist. Equipping teachers with psychosocial first aid skills is key to helping students get back to their books. In partnership with the Ministry of Education, Science and Technology (MEST), UNICEF and other NGOs, World Vision coproduced a manual that was used to train 36,000 teachers to recognise and deal with signs of stress in children, including poor focus, irritability and hyperactivity.

During the school closure, some children began working to support their families and did not return to class, especially girls. Teenage pregnancies spiked – with 14,000 new cases reported – but pregnant girls were banned from returning to school, as officials believed the girls' presence could negatively influence other students. World Vision is supporting a national program initiated by Mrs Sia Nyama Koroma, Sierra Leone's First Lady, and Mrs Jonta Foh, wife of the Vice President. It provides continuing education for teenage mothers and strives to keep girls in school, thereby helping to reduce the high rate of teenage pregnancies (34 per cent) in the country.¹

Glad to be back at school, Millicent is now focused on her future. 'I want to be a lawyer,' she says confidently.

World Vision is one NGO that does what it promises. They promised to provide these 30,000 radios to our students and they delivered.'

Dr Minkailu Bah, Minister of Education, Science and Technology, Sierra Leone



¹ Government of Sierra Leone, *Let Girls Be Girls, Not Mothers*, National Strategy for the Reduction of Teenage Pregnancy (2013–2015), February 2013.



Solar-powered radios provided by World Vision enabled 30,000 children to follow broadcast lessons.

Tuned in to learning

Like most 10-year-old girls, Fatima loves music. 'I love dancing and singing. I really love Indian movies because of the dancing,' she says, giggling as she shows off her best Bollywood moves.

But in many other ways, Fatima is quite unlike girls her age. She survived Ebola last year but lost her mother and father to the virus. Fatima now lives with her uncle and his family, and is adjusting slowly to life without her parents. In the midst of her grief, she also lost the company and comfort of her classmates during the nine-month school closure.

During the shutdown, Fatima and other students could tune in to classes broadcast by MEST, which were supported by World Vision. The radio classes helped restore a sense of normalcy and routine that helped Ebola-affected children like Fatima begin to recover from their grief and loss, in addition to the obvious educational benefits.

Students returned to class in April 2015, but the radio lessons continued to help them catch up after the

long school closure. However, some children in rural communities lacked access to radios and were missing out on the classes.

To fill that gap, World Vision distributed 30,000 radios to children across Sierra Leone, including Fatima. She is now the proud owner of a hot pink, solar-powered handset.

'World Vision gave me a radio to listen to my classes. I followed my lessons, but I also listened to music and danced to keep from feeling sad,' she says with a shy smile. Fatima's uncle reports that she is doing well in school.

The radios operate on solar power or by hand-cranked rechargeable batteries. They feature a flashlight, a USB port and a memory card so children can record and replay the lessons. World Vision distributed the radios to schools in Bo, Bonthe, Kono and Pujehun districts, where it operates community development programmes.

HEALTH

Protecting families' physical and mental health

The Ebola outbreak in West Africa was the perfect storm: an unprecedented epidemic colliding with already fragile health-care systems.

Health-care workers bore the initial brunt of the virus. A reported 513 health-care workers in Guinea, Liberia and Sierra Leone died from Ebola. More than 881 contracted the disease.² Many of those infected lacked adequate protective equipment and prevention training. Before the epidemic, Sierra Leone had 120 doctors to treat almost 6 million people; 11 died of Ebola.

To support frontline health-care workers, World Vision procured and transported a cargo-plane load of donated medical supplies – 5.4 million pieces valued at US\$500,000. Distributed to hospitals and clinics across the country, this equipment helped save the lives of both health professionals and their patients.

Our community health-care workers went door to door to inform families about prevention measures, such as frequent handwashing. We also equipped schools, churches and mosques with buckets, soap, chlorine and thermometers.

The epidemic took a tremendous psychological toll on Ebola survivors and those who lost loved ones, especially children. Psychosocial support is the key to emotional resilience and recovery in crisis situations. Coming to terms with changing conditions, haunting memories and community isolation is difficult. Children have particular needs in this regard. However, few professionals, including teachers, social workers and counsellors, were equipped to help people cope with their stress and grief. They needed materials and training on psychosocial first aid immediately.

World Vision helped to develop the government's three-year Mental Health and Psychosocial Support strategy and related service package – the first of its kind in Sierra Leone. It was recently signed and endorsed by the Ministry of Social Welfare, Gender and Children's Affairs.

The development of this pioneering strategy demonstrates how World Vision optimised a national crisis as a catalyst for permanent national change – an often-unheralded outcome of our international emergency efforts.

‘I am grateful that World Vision provided coveralls, boots and face masks at a time when health workers were running away from clinics because we did not have the basic materials to protect ourselves from Ebola.’

**Jeneba Manseray, Nurse,
Seghema, Sierra Leone**



² WHO, *Ebola Situation Report*, 4 November 2015.



Reducing high levels of maternal and infant mortality in Sierra Leone is a World Vision priority.

Innovations in health

World Vision initiated two ground-breaking health programmes in the midst of the Ebola crisis.

World Vision Ireland received a €15 million grant from Innovative Medicines Initiative to partner on the Ebola Vaccine Deployment, Acceptance and Compliance project in Sierra Leone. World Vision built trust among communities and dispelled misconceptions about Ebola and the vaccine, encouraging volunteers to participate in the trial. Implementation partners include Janssen Pharmaceutica N.V., Grameen Foundation and the London School of Hygiene and Tropical Medicine.

World Vision also conducted the first child nutrition and mortality survey done at chiefdom level in Sierra Leone, in coordination with the Ministry of Health and Sanitation. The data will enable World Vision to determine the impact of livelihoods on levels of child malnutrition and mortality.

The survey assessed the prevalence of acute and chronic malnutrition at chiefdom level and provided baseline indicators for mortality, water and sanitation, and infant and young child feeding practices in nine chiefdoms.

The data revealed unacceptably high levels of children affected by chronic malnutrition. In some areas, levels of mortality were higher than those occurring during humanitarian emergency situations. Researchers recommended that:

- mothers have greater information about proper nutrition and exclusive breastfeeding for the first six months.
- home gardens and income-generating activities be promoted to improve nutrition quantity and quality.

World Vision plans to use this information to help improve the nutrition levels of children and families in its community development programmes across the country.

All is not lost

My name is Bintu. I poisoned myself after I survived Ebola. I lived, but I planned to try and take my life again. Then World Vision staff came. They helped me go on. They reminded me that all was not lost.

Ebola took my husband, four of my children and 17 other people in my family. Two of my grandchildren caught it, but they lived. We were the first family in Moyamba district to get Ebola. Eventually, 78 people died in our community.

People blamed my family for bringing Ebola here. The stigma was so terrible that I fled to the bush. World Vision staff found me there and they brought me food – rice, beans and oil. They comforted and encouraged me. They trained home visitors in our community in psychosocial first aid, and now a neighbour comes to see us often. It has made a tremendous difference. The stigma is gradually going down. I took the training myself and now I'm supporting other Ebola survivors and their families. I am caring for six orphans. I tell these children that Ebola did not take us. We can go on. I no longer think about taking my own life.

CHILD PROTECTION

Coming alongside Ebola orphans

Children are the most vulnerable victims in any emergency – be it a natural disaster or an epidemic. The Ebola crisis proved no exception.

Across Sierra Leone, 1,459 children contracted the disease;³ 12,012 were orphaned by it.⁴

Orphans and other vulnerable children face many risks. They are commonly coerced into early marriage or forced to quit school and work to support younger siblings. They can be abused or exploited, sometimes by relatives and neighbours entrusted with their care. Child Ebola survivors are often stigmatised and rejected by their communities, compounding their grief and sense of alienation.

These children, especially those no longer living with their birth families, need extra protection and support as they grieve and adjust to their new family situations. World Vision has found that training and empowering local volunteers as home visitors is an effective way to do that.

Some 500 men, women and youth – including Ebola survivors – eagerly stepped up to the challenge. They were selected from among existing mothers' groups and children's clubs, as well as faith leaders and youth. In World

Vision training sessions, they learned simple but effective skills, such as active listening and stress management tools. Their goal was to support the protection and psychosocial well-being of orphans and other children living in alternative care, usually with extended family members.

'I encourage the children to understand that all is not lost,' says Jeneba Lassayo, a home visitor volunteer. 'Ebola has not taken us, and life will get better soon, if only we are patient.'

Jeneba and her fellow home visitors support both the children and their caregivers, while monitoring their progress and safety. They are people outside the immediate family who children can trust and ask advice. The home visitors play an invaluable role in the children's recovery and that of their broader community.

The Ebola recovery process will take time, even years, especially for children. They have experienced intense grief and loss and are making huge adjustments in living with new caregivers. Children will continue to benefit from their home visitors' support as the programme continues over the next year. This will help them learn more about coping with their sadness and grief.

³ Sierra Leone Ministry of Social Welfare, Gender and Children's Affairs.

⁴ Ibid.



Aminata (second from right) and her friends are Ebola orphans being supported by World Vision-trained community volunteers. Walking with Aminata at right is Dr Alison Schafer, World Vision mental health and psychosocial expert.

Honouring my parents

My name is Aminata and I am in second year of junior secondary school. My mother died of Ebola on 4 November 2014. My father passed away eight days later. My oldest sister, who was then 28 years old, died a week after that.

The ambulance came for my mother, and she did not return. It came for my father and then my sister. Neither of them came back. Then it came for me.

Soon after my parents' deaths, my throat became very sore, and I got a severe cold and joint pains. These are signs of Ebola. My relatives called the national Ebola hotline and an ambulance arrived. I told them, 'My own case will be different because Jesus will not fail me.' As I was about to get in the ambulance, I went back to my house to get my Bible.

I was in the isolation centre for six days. They took a blood sample to do the Ebola test. When they told me I did not have Ebola, I was so happy. I kept praying to God and he saved me. I am not happy living without my parents, but I thank God that I am alive and free of Ebola.

My father had two wives – my mother and my stepmother, Tity. I'm living with Tity now. I miss my father so much. I am the 10th of 12 children, but I know he loved me best.

I think about my parents the most at night. Sometimes I just like to go in a corner by myself and cry. All the things they used to do for me, they do no more.

I miss my friends, too. When I first came back from the isolation centre, they didn't visit or play with me anymore for fear of catching Ebola, even though I tested negative. Slowly, they came back and I'm making new friends at school now, too.

World Vision arranged for my neighbour, Isatu, to visit me regularly to see how I am doing. She comes by the house almost daily. She is my friend and I tell her my secrets. She encourages me to study hard and stay in school. I want to be a lawyer one day. Isatu reminds me that God loves me. I like to memorise Scripture. My favourite verse is 'Honour your father and your mother, so that your day may be long in the land that the Lord your God is giving you' (Exodus 20:12).

LIVELIHOODS

Boosting small businesses in a post-Ebola economy

Sierra Leone remains one of the world's poorest countries. More than 60 per cent of the population lives on less than US\$1.25 a day.⁵ However, prior to the Ebola epidemic, the country was seeing promising signs of economic growth, with gains in agriculture, mining, exports and other sectors.

Today, the World Bank estimates that Sierra Leone will lose at least US\$1.4 billion in forgone economic growth in 2015 as a result of the epidemic.⁶

The majority of Sierra Leonean households rely on retail trade and agricultural activity as a primary source of income. However, local bylaws set up to prevent Ebola, such as border restrictions, bans on public gatherings and 7 p.m. curfews, disrupted local market activity. These disruptions greatly limited the earning potential of a large percentage of Sierra Leonean families.⁷ Farmers could not properly tend their fields or buy and sell their goods at weekly markets, which were now prohibited. As a result, many small businesses suffered to the point of collapse or drastically reduced their scale of operations. Consequently, levels of unemployment and underemployment rose significantly.

The working poor were especially hard hit. In Sierra Leone, many families survive by selling items such as used clothing and fruit and vegetables in roadside markets. As their sales and income declined, these small traders consumed their business capital to cover daily needs. Some parents took their children out of school to work or borrowed money, driving them further into debt.

To help families recover from Ebola, World Vision is helping 42,000 petty traders – up to 80 per cent of whom are women – to kick-start their businesses by providing small loans and grants.

Funded by the UK Department for International Development (DFID), World Vision is leading the Livelihood Enhancement for Affected People (LEAP) programme in partnership with BRAC, Catholic Relief Services (CRS) and World Hope International.

'A business loan of just 100,000 leones [US\$200] will go a long way in Sierra Leone,' says Mattia Dimoh, World Vision Sierra Leone Operations Director. 'For instance, it will enable a mother to invest in her business so she can earn enough to pay her children's school fees and put food on her family's table.'

5 United Nations Development Programme (UNDP), 'About Sierra Leone' fact sheet, <http://www.sl.undp.org/content/sierraleone/en/home/countryinfo/>.

6 World Bank, 'World Bank Group Ebola Response Fact Sheet', 1 September 2015, <http://www.worldbank.org/en/topic/health/brief/world-bank-group-ebola-fact-sheet>.

7 Famine Early Warning Systems Network, *Guinea, Liberia and Sierra Leone Special Report*, 31 March 2015, http://www.fews.net/sites/default/files/documents/reports/Ebola_SR_2015_03_en.pdf.



Sorbeh group member, Hawa Josiah, managed to save profits from her business to pay her children's school fees.

Sahr Ngajiah/World Vision

Savings groups buffer economic effects of Ebola

'Had I not belonged to a savings group, things would have been much worse during this Ebola crisis for us,' says Hawa Josiah, 29, a mother of two daughters. She is the family's sole breadwinner after her husband suddenly became ill and could no longer work.

Hawa belongs to one of 566 World Vision-initiated savings groups (SGs) in Sierra Leone, representing 13,694 members.⁸ The average savings held by SG members as of October 2015 was 133,793 leones (US\$31) per person.

Members save together, lend their savings to each other and share the profits earned from interest. They provide their own savings and credit services at negligible cost, while retaining earnings and investment in their own communities. The groups are simple, transparent, autonomous and locally run.

Hawa earns money by selling cassava and potatoes in season. She also resells granite from the local quarry that is used for road construction and building projects. She makes at least 50,000 leones (US\$10) a week and contributes 12,500 leones (US\$2.50) of her income to *Sorbeh* ('seriousness' in Krio), her savings group.

Sorbeh has more than 15.7 million leones (US\$5,000) in its coffers. Savings are maintained as a loan fund from which members can borrow small amounts. The group decides the loan terms and sets a maximum ratio of

loan size to a member's savings. The service charge or interest rate is determined by the members. They also manage an emergency fund from which members can borrow.

Members save to invest in potentially profitable opportunities (e.g. purchasing a cow, starting a small enterprise, storing grain to resell during shortage periods). They use their profits to pay for their children's education and other welfare expenses.

During the Ebola crisis, many groups worked together to find ways to continue their income-generating activities despite the many government restrictions on trade and travel. One group pooled their resources to start a farm so they could sell locally grown food, according to a World Vision report. Many group members organised to promote public health messages in their communities about handwashing.

Hawa's daughters returned to class in April 2014 after the nine-month school closure during the Ebola epidemic. She could afford their school fees, including textbooks, uniforms and lunches, thanks to her savings and investments.

'I am in a better position to see my children through school, as are other *Sorbeh* members,' says Hawa. 'I never had the opportunity to go to school, but my girls do because of this savings group.'

8 World Vision Sierra Leone, *Savings Group Report*, October 2015.

A new destiny

Mohamed, 5, is an aspiring money manager with a vision. He is developing his mother's timber sales business with a loan from Destiny – the first children's savings group in his community.

Mohamed, a World Vision sponsored child, and 24 of his young friends launched this pioneer project in December 2014. At that time, up to 400 people per week were dying of Ebola in Sierra Leone, according to the World Health Organization (WHO). Thankfully, Mohamed's community escaped Ebola, although the broader district registered 231 deaths.

Economically, the Ebola outbreak hit small rural communities hard, including Mohamed's village. Most families here earn their living by subsistence farming, petty trading and processing foods, such as palm oil and cassava. However, public gatherings, including weekly farmers' markets, were banned during the epidemic to help contain the virus. Farmers' unsold produce rotted in storehouses, and families' incomes fell.

Schools also closed during the crisis, leaving students with little or nothing to do except worry about their future. Concerned parents asked World Vision to help the children start a savings group while they were out of class.

'The parents all belong to adult savings groups supported by World Vision, and they wanted their children to reap some of the same benefits and develop new skills,' says Michaela Tucker, a World Vision programme manager.

And so Destiny was born.

'We called ourselves Destiny Savings Group [DSG], because we know that education determines our destiny,' says Kadiatu, chair of the group. 'And that is what we are saving for.'

The children, from 5 to 18 years of age, save together and can borrow small loans from the pooled funds.

(Continued)

During the Ebola crisis, Mohamed (far left) and his friends started Sierra Leone's first children's saving group.



Destiny members hold regular meetings to discuss money management.



Sahr Ngaujah/World Vision

(Continued from previous page)

DSG members contribute 1,000 leones (US\$0.20) weekly, which they receive from their parents. The children also invest any small cash gifts from relatives into the group's coffers. They have saved more than 1.4 million leones (US\$275) – a substantial nest egg in a country where most people earn less than US\$1.25 per day. Cash savings are safeguarded in a heavy wooden box equipped with a substantial padlock. Its three keys are held by three members to ensure security.

Mohamed was the first DSG member to take a loan. 'I borrowed 50,000 leones and gave it to my mother to invest in her fruit and firewood trade, so she can buy me books, pencils, uniforms and a bag from her profits,' he says.

Mohamed's mother, Bintu, is proud of her entrepreneurial son. 'Being part of Destiny will help the children grow up to be responsible and prepare them to be good leaders, decision makers and even savings group coordinators in the future,' she says.

Inspired by DSG's success, children in two neighbouring communities recently launched savings groups. They have already tucked away more than 1 million leones (US\$200).

'These children are change agents in their communities,' says Michaela. 'Instilling a culture of saving in the hearts and minds of children is helping us to build a young leadership that will be with us long after Ebola is finally gone.'

FAITH LEADER ENGAGEMENT

Mobilising faith leaders to fight Ebola

Ebola sparked a spiritual crisis in Sierra Leone that debilitated morale and compounded the devastating health emergency.

Responding to the nation-wide fear and grief, faith leaders risked their own lives to comfort the sick and bereaved throughout the epidemic. And they did so much more.

World Vision mobilised these respected men and women in the fight against Ebola, building on our 20-year partnership with faith leaders in Sierra Leone. More than 2,000 leaders – both Christian and Muslim – were trained in Ebola awareness and prevention through World Vision's Channels of Hope (CoH) programme.

CoH is a catalyst that transforms and motivates faith leaders and their congregations to respond to tough development issues that affect their communities. The CoH process directly

addresses faith leaders' perceptions about especially volatile or taboo community issues. It mobilises them to break down walls of stigma and discrimination and respond with compassion, particularly to issues related to children's health and well-being.

Following the CoH training, faith leaders debunked rumours and stigma about Ebola. They called for compassion for virus survivors. They urged their congregations to adopt Ebola prevention measures – like regular handwashing – and equipped them with buckets and chlorine. The clerics also helped followers to better understand passages in the Qur'an and the Bible about burial practices and caring for the sick. They successfully influenced hard-held attitudes, convincing people to change cherished traditions, such as unsafe burial rites – at least during the Ebola crisis. United, they saved lives.

‘When faith leaders got involved in the fight against Ebola, it was a turning point. They convinced people in churches and mosques to stop touching and burying Ebola victims, who remain highly infectious.’

Dr Alhaji Sanyi Turay,
Bo District Medical Officer



Faith in action	
371,580	Community members reached by faith leaders
18,840	Community focus groups conducted by faith leaders
2,117	Faith leaders (Christian, Muslim, and traditional chiefs and healers) trained through CoH training workshops
130	CoH workshops held
20	Facilitators from partner organisations trained (CRS, Catholic Agency for Overseas Development [CAFOD], etc.)



Chief Imam Alhaji Mustapha Alpha Koker and Pastor Peter Kainwo collaborated across faiths to save lives.

A tale of two clerics

Following a Channels of Hope training in Sierra Leone, these two faith leaders swapped pulpits to teach Ebola prevention to their congregations: Peter Kainwo, pastor of the United Brethren in Christ Church, and Alhaji Mustapha Alpha Koker, chief imam of Bo District.

Is it common for imams and ministers to work together in Sierra Leone?

Pastor Kainwo: Sierra Leoneans see themselves as one people, and we lay aside our doctrine for the survival of our country. For instance, during the civil war, Muslim and Christian leaders negotiated with the rebels for peace. This unity made it easy for us to work together when Ebola struck.

Chief Imam Koker: Yes, as Muslims and Christians, we grew up going to the same schools, and intermarriage is common here. There are no boundaries between us... If I don't respect their beliefs, how on earth can I expect them to respect mine?

Why did you become involved in interfaith work through Channels of Hope?

Chief Imam Koker: Channels of Hope gave us the opportunity to prove what we could do as religious leaders for this country.

Pastor Kainwo: Yes, in Sierra Leone we say, 'Doctrine divides, but service unites.' We didn't come together at the [Channels of Hope] workshop just to discuss our beliefs. We came together to work and help save lives.

What happened in your communities when Ebola erupted last year?

Pastor Kainwo: At first, people denied that it was real. They believed it was some sort of rumour or political plot. Even some pastors spread false information, saying it was a result of sin. Early in the crisis, World Vision organised a Channels of Hope workshop on Ebola that Alhaji and I attended. Afterwards we convinced our congregations that Ebola is real; it is a killer virus. We taught them what to do to stay alive.

Chief Imam Koker: Through the workshop, I realised that Ebola would be beaten only by using the Bible and the Qur'an, plus scientific know-how, to convince people to change their ways.

How did you mobilise your communities?

Pastor Kainwo: After the Channels of Hope training, we spoke to thousands of people about changing their habits and practices to prevent the spread of Ebola. Then my friend Alhaji and I decided to do something quite extraordinary to catch people's attention. We swapped pulpits. I spoke in Alhaji's mosque, and he spoke in my church. Hearing messages about Ebola from a leader of a different faith reinforced the urgent need to change our traditional practices to stop the virus.

What was the reaction to the pulpit swap?

Pastor Kainwo: People told us how much they appreciated it, but even more importantly, they changed their behaviour. They practised good hygiene, such as handwashing, which is critical to Ebola prevention. They

also agreed to lay aside the sacred tradition of washing the bodies of their deceased loved ones before burial... We convinced people to call the national hotline, which would send a team to bury their loved ones in a safe and dignified way. World Vision managed the burial teams in our area. Imams and pastors were invited to pray at the burial, which was very comforting for families.

What have you learned from working together?

Pastor Kainwo: I've learned over the past five years of working closely with my Muslim colleagues that they are very open to collaborating when they feel their beliefs are respected.

Chief Imam Koker: I realised that Christians love us and want to work together.

What is your vision for this kind of interfaith work?

Chief Imam Koker: My dream is that Sierra Leone will be the world's most tolerant country – a model to others. I pray that the bond between Christians and Muslims in our country will hold fast, for generations to come.



Grave markers provided by World Vision helped bring dignity to burials and closure for grieving families.

SAFE AND DIGNIFIED BURIALS

Honoring the departed, protecting the living

World Vision is not in the burial business. Quite the contrary: our focus is the well-being of children and their families.

But extreme times call for extreme measures. And the Ebola crisis was nothing if not extreme.

World Vision responded to 87 disasters worldwide in 2014. We act immediately when an earthquake, flood or conflict erupts anywhere. But few organisations or governments were fully prepared for the West Africa Ebola outbreak – the worst in history.

At the height of the crisis, World Vision accepted an unprecedented challenge from the Government of Sierra Leone. Prayerfully, we agreed to provide burials for Ebola victims and all other deceased in 10 districts across the country for the next year.

We did this work to protect the living – the children in our programmes, their families and communities. We did it to honour the departed – to protect their dignity in death.

The situation was critical. By September 2014, the mounting Ebola death toll overwhelmed government undertakers.

Ebola victims were being disrespectfully removed from homes and buried, sometimes in unmarked mass graves. To help prevent contamination, the

government banned funerals. Families were not permitted to pray over the dead, conduct services or choose a gravesite. The ritual washing of deceased loved ones before burial – an essential traditional practice – was forbidden.

The Ebola virus is shed from the body during illness and after death: it remains viable and infectious long after its hosts have breathed their last. Preparing deceased loved ones for burial turned hundreds of mourners into Ebola victims.

However, families still resisted the ‘dead body management teams.’ They hid the sick and buried the dead themselves secretly. WHO reported that at least 20 per cent of new Ebola infections occurred during burials of deceased Ebola patients. Yet people struggled to lay aside their comforting rituals, believing that there is no rest for the soul without a proper burial.

It was clear that defeating Ebola required respecting faith traditions and practices. In September 2014, WHO and the International Federation of Red Cross and Red Crescent Societies conferred with World Vision, the World Council of Churches, Caritas and Islamic Relief to revise the standard operating procedure for Ebola burials. The new Safe and Dignified Burial Protocol rolled out in November. It allowed families to attend burials at a safe distance, and pastors and imams to lead simple services.

‘The task of delivering all burials in a safe and dignified manner nationally was a daunting challenge of enormous technical, cultural and logistical difficulty. The SMART consortium bravely stepped up to the challenge – despite having no prior experience in this line of work – because they knew that Ebola could not otherwise be beaten.’

Chris Gabelle, DFID Sierra Leone, Deputy Head of Office





World Vision and its partner NGOs provided safe and dignified burials for 36,533 Sierra Leoneans.

World Vision mobilised and trained faith leaders to convince followers to accept the improved burial practices. Burial teams clad in protective 'space suits' would conduct the burials in a respectful, dignified manner that engaged families.

And then we began training 800 civilians to conduct burials, and managing a fleet of 1,073 ambulances, hearses and motorbikes to support their work. In November 2014, World Vision launched the SMART (Social Mobilisation And Respectful Burials Through faith-based alliance) project, in partnership with CRS and CAFOD. DFID provided generous funding.

More than a year later, SMART teams had provided safe and dignified burials for more than 36,533 people. Their work dramatically helped reduce new Ebola infections and saved lives. But it was not without challenges. The burial teams risked their health and safety daily. Many were abandoned by family and friends, and they continue to be reviled and stigmatised by the very communities they served.

World Vision entered the burial business somewhat reluctantly. Today, we are proud of our contribution and deeply grateful for our SMART team colleagues. Their courageous work helped protect 58,000 children in our programmes – none of whom contracted Ebola.

Winning the war on Ebola – one burial at a time

By Maseray Kamara as told to Karen Homer

I am an Ebola survivor. My husband and my sister are not. They are among the 3,995 Ebola victims in Sierra Leone.

Life as my family knew it ended when Ebola began. Before, I was a multi-tasking mother, grandmother and wife. My husband, Issa, taught in Freetown, and I sold used clothes to make money, earning about 80,000 leones (US\$9) a day. Together, we raised five children in Bo, Sierra Leone's second largest city. We did not have much, but as I realise now, we were happy.

In late May 2014, we heard rumours about a deadly disease that had spread to Sierra Leone from neighbouring Guinea. Many people argued that Ebola did not really exist. They believed witchcraft was killing people, not an invisible virus. Others heeded the wisdom of pastors and imams who preached about Ebola prevention. They saved many lives.

Fear and stigma mushroomed as infections spread. Police arrested suspected Ebola patients and forcibly took them to hospitals; the corpses of others lay in the streets.

Health officials organised 'dead body management' teams that often took days to arrive. For Muslims, who must bury their dead before sundown, this was horrific. Christians were denied their funeral rites that honour the deceased over several days. Mourners watched helplessly as overwhelmed undertakers shoved their parents and their children into trash bags and tossed them into pickup trucks, never to be seen again. 'How will I live with myself if I let my mother be buried like a dog?' asked a friend. Soon people resisted the authorities – hiding the sick and burying their dead in secret.

In November, I travelled to Freetown to see Issa and my sister, Fallay. I also visited a close friend, who was unknowingly in the early stages of Ebola. I soon



Maseray Kamara was the first female Ebola survivor to join World Vision's burial teams.



Maseray vowed to God that if she left the hospital alive, she would do something to honour the women who died of Ebola there.

Jonathan Bundu/World Vision

developed a fever followed by stomach cramps and vomiting. I called 117 – the national Ebola hotline – and an ambulance finally arrived. Fallay and Issa felt ill, too, but they refused to go to the hospital. ‘No one comes back from the Ebola ward,’ they said. ‘It is a death sentence.’

In the treatment centre, I tested positive for Ebola. For one month and one day, I lay among the dying and the dead. I watched nurses trying to manage the mayhem. They lacked plastic gloves to care for contagious patients, let alone to clean the floors slick with vomit and feces. They tossed food at us like prisoners for fear of touching the contaminated. Orderlies piled the dead in a corner, often dropping corpses on their heads. My heart especially broke for the women – naked, exposed – no one to protect their dignity in death. I vowed to God: if I leave here alive I will do something to honour the memory of these sisters.

Pumped full of fluids, I defeated the dehydration that claims many Ebola patients. Still too weak to walk, I was released from [the] hospital. Relatives broke the news to me that Issa and Fallay had died of Ebola.

Widowed. Unemployed. Unemployable. Ebola survivor. My new identity. At 53, no one would hire me. Neighbours shunned me, blaming me for spreading the disease. My landlord threatened to evict me.

In December, I heard that World Vision was hiring workers to conduct safe and dignified burials for Ebola victims and others. As a survivor, I am immune to the disease and faced less risk. I recalled my promise to God and to my sisters on the hospital floor. I was the first woman Ebola survivor to join the team.

My first burial was a 1-year-old baby girl. I cradled her as we walked towards the forest gravesite. It was important for me to bury my fellow mother’s child in a safe and dignified way. I wanted to give this child a peaceful farewell.

To date, our SMART teams have buried 36,533 people. I am extremely proud that we won the 2015 Bond International Humanitarian Award, honouring aid workers worldwide. I want to thank the British people for making our work possible through a grant from UK-aid. Amid the despair of Ebola, you enabled us to bury our loved ones the way you would bury your own – with dignity, respect and honour. Recovering from Ebola will take us years, but we will find comfort on the hard path to healing, knowing that we did right by our parents, our spouses and our children in death. Thank you for this most gracious gift.

FOOD ASSISTANCE

Feeding families in the midst of Ebola

The Ebola epidemic was a health crisis with potential to become a food crisis.

Thousands of families lost their main breadwinner to the disease, making already poor households more vulnerable. Food prices rose dramatically, and government-imposed quarantines and restrictions on movements disrupted markets. Sierra Leone faced food security challenges before the epidemic, and the situation became even more urgent as Ebola advanced.

In partnership with the World Food Programme (WFP), World Vision provided food assistance to 274,338 children and adults affected by Ebola. We reached families locked down in their homes for 21 days during quarantine. We helped orphans and their caregivers in virus hotspots, as well as widows, farmers and others. This life-sustaining work will continue into the Ebola recovery phase.

Protecting vulnerable families: World Vision helped protect and support 28,412 households (143,635 children and adults) in Bo, Kono and Moyamba

districts during the lean season (July and August) between harvests so they could begin to rebuild their livelihoods. They received 429 metric tonnes (MT) of food or cash vouchers (valued at US\$421,554), enabling them to purchase food in local markets that were closed for many months during the crisis, thus stimulating economic development.

Targeted supplementary feeding: Some 11,818 malnourished children under the age of 5 living in Ebola-affected families in Bo, Moyamba and Pujehun districts received 145 MT of enriched corn soy blend cereal.

Seed protection: Many farmers lost crops and income during the Ebola crisis. To feed their families, they were pressured to eat their seed stock needed for the next planting season. To prevent this, World Vision – in partnership with WFP, the Government of Sierra Leone and the Ministry of Agriculture, Forestry and Food Security – provided 13,430 farming households with 307 MT of rice, vegetable oil and yellow split peas so they could plant their seeds and harvest a good yield.



World Vision volunteers cleaned up 2,686 schools, making them more conducive to learning.

Classroom clean-up volunteers teach goats a lesson

Goats aren't common in the classroom. But the critters quickly learned how to make the most of schools being closed during the Ebola crisis.

'One Monday morning I was walking with my mother to our farm, and we passed my school,' recalls Veronica, 10, a student who lives in a small community in Bo District. 'I saw goats and sheep in the corridors. The building was covered with overgrown bushes and grass. I asked myself, "Are we ever going back to school?"'

Like Veronica, other students found their schools in a sorry state when the doors reopened in April 2014. The dilapidated classrooms were no longer conducive to learning.

World Vision counted 2,686 schools in its programme communities that were in need of a massive mop-up operation.

'We called for volunteers and they came,' says Musa Gamanga, World Vision Sierra Leone's food assistance manager. 'Five workers cleaned each school. World Vision worked with the community and the Ministry of Education, equipping each participating household with buckets and brooms, as well as machetes to clear brush.'

In thanks, every volunteer received enough rice, yellow split peas and fortified vegetable oil from World Vision to feed their families for one month. More than 13,340 families in Ebola-affected areas benefited from the programme.

'We calculate an average of five people per household, so that means 66,700 men, women and children didn't go to bed hungry thanks to this programme,' says Tom Ombogo, a World Vision food programming/cash transfer specialist. 'It was a real win-win: the schools are clean, students are learning, and families are fed. And the goats are gone.'

ADVOCACY & COMMUNICATIONS

Citizens lobby for better health services

The Ebola epidemic highlighted the acute need for Sierra Leone's health services to be not only improved but transformed. For this to happen, government representatives and citizens must work together effectively.

World Vision's Citizen Voice and Action (CVA) programme equips communities to hold their own governments accountable for the promises they make. CVA educates citizens about their rights and equips them with a simple set of tools designed to empower them to protect and enforce those rights.

Following CVA training, over 800 Sierra Leoneans – including children – organised a citizens' hearing in May 2015, supported by World Vision. They met with government representatives to

discuss progress towards achieving the Millennium Development Goals (MDGs), especially those pertaining to health and education. Citizens from trade unions, market associations, women's groups and children's forums participated, as well as district and national government representatives. The people presented their expectations regarding social services delivery, as well as recommendations to improve equitable development and progress.

Although wary at first, the elected representatives listened to the citizens' recommendations. The constructive dialogue strengthened accountability and trust – elements that will be foundational to Sierra Leone's post-Ebola recovery.

Recommendations from the citizen's hearing

The citizens of Sierra Leone recommend that the Government should prioritise the education, health and environmental sectors during the Ebola recovery phase in order to reach the MDGs and the Agenda for Prosperity by:

- involving ordinary citizens in development planning, coordination and decision-making processes to improve service delivery in health, education and environment sectors
- including the Free Healthcare Initiative in the national constitution
- ensuring adequate and timely distribution of medical equipment and supplies to ensure effective implementation of the Free Healthcare Initiative
- ensuring transparent and mutual accountability for quality, accessible and equitable service delivery in education, health and environmental sectors.

YouTube personality Louis Cole encouraged youth during his visit to Sierra Leone.



Karen Homer/World Vision

Throughout the crisis, World Vision's national and global Communications teams worked to help keep attention on the Ebola crisis as international interest waned. Media coverage included more than 100 international and national stories (e.g. Aljazeera, ABC, BBC, CBC, the Guardian, VOA, etc.), which served to raise awareness and support for the emergency response.

World Vision hosted Louis Cole, an internationally renowned vlogger (video blogger), on his first trip to Sierra Leone. More than 1.4 million viewers have watched his YouTube posts about his experience.⁹

⁹ Louis' video from his visit can be accessed here: <https://www.youtube.com/watch?v=kdcwwoZeYIM>

Lessons and reflections

1. Children and their needs related to health, education, protection and psychosocial care must be prioritised in all crises, including public health emergencies.

Children had specific needs during the Ebola epidemic, especially Ebola survivors and orphans. However, lengthy delays occurred in meeting some of those needs, such as psychosocial care, because trained personnel in psychosocial first aid did not exist. Disaster preparation should include specific preparation to address children's needs in all sectors.

2. Communities must be engaged during public health emergencies, just as they are in other humanitarian emergencies and ongoing development programmes.

Communities need to understand and own their problems so they can find their own socially and culturally acceptable solutions. World Vision can play a critical role in supporting partner communities in public health emergencies, just as it does in natural disasters and conflict situations.

3. Life-saving public health information should be conveyed by respected, trusted opinion leaders who understand cultural and religious traditions, practices and values.

Lives were lost in the beginning of the crisis because people did not believe health messages or trust the mass media communication method. Training and equipping imams and pastors to convey this information influenced knowledge, attitudes and practices, particularly regarding burial traditions.

4. NGO partnerships maximise resources, broaden reach and increase impact.

'If you want to go fast, go alone.

If you want to go far, go together,' says the African proverb. This proved especially true in the Ebola crisis. World Vision's work with partner NGOs, including CRS and CAFOD (SMART alliance), Plan International and Save the Children (Children's Ebola Recovery Assessment report) and BRAC (classroom reconstruction) among other projects, were game-changers in the response. Such partnerships could be strengthened across sectors to save lives. For instance, during the Ebola epidemic, people initially refused to attend medical clinics run by Médecins Sans Frontières and others out of fear. Known, trusted community development NGOs with an in-country track record could create advance memorandums of understanding with medical NGOs to enhance collaboration during emerging humanitarian crises, including public health emergencies.

5. NGOs can expand their niches, break new ground and create sustainable impact even during an unprecedented crisis.

World Vision, CRS and CAFOD successfully managed 36,533 safe and dignified burials and maintained a fleet of 1,073 ambulances and vehicles – new terrain for these faith-based development agencies. World Vision also played a lead role in developing the Sierra Leone Government's three-year Mental Health and Psychosocial Support strategy and related service package – the first of its kind in Sierra Leone. The development of this pioneering strategy demonstrates how World Vision optimised a national crisis as a catalyst for permanent national change – an often-unheralded outcome of our international emergency efforts.

‘If you want to go fast, go alone. If you want to go far, go together.’

African proverb



The bumpy road to recovery

The World Health Organization and the Government of Sierra Leone officially declared the country Ebola free on 7 November 2015. However, people will still be feeling the economic, social and psychological effects of Ebola for years to come. World Vision fully supports the Government of Sierra Leone's Ebola Recovery Plan, focusing on the following five areas.

1. Health

Before Ebola began, about one in six Sierra Leonean children died before their fifth birthday from preventable diseases like diarrhoea, pneumonia and malaria. Close to 40 per cent of children were chronically malnourished, which significantly affected their health and physical and psychological development.¹⁰ The Ebola emergency has further reduced children's access to health care, while increasing food insecurity.

Significant long-term investments are needed to build a strong and resilient health system that will provide quality essential care and respond better to future outbreaks, as well as other diseases that claim the lives of thousands of children each year.

World Vision will continue to operate health and nutrition programmes for children in its programme areas, while advocating for improved national health-care systems.

2. Education

Education experts indicate that it will take until 2017 for students to catch

up academically following the nine-month school closure during the Ebola crisis. World Vision will support MEST by working with existing structures (governments, schools, education specialists and community groups) to find solutions to education barriers.

3. Child protection

Children need extended protection following the Ebola crisis. World Vision's Home Visitors Programme will continue to support especially vulnerable children and families with psychosocial first aid until October 2016.

4. Livelihoods

To help families recover from Ebola, World Vision is helping 42,000 petty traders – up to 80 per cent of whom are women – to kick-start their businesses by providing small loans and grants. The LEAP programme will be conducted in partnership with BRAC, CRS and World Hope International.

5. Food assistance

Families across Sierra Leone face food insecurity following Ebola. World Vision will conduct a school-feeding programme benefitting more than 53,000 children. It will also provide food assistance through cash transfers to 5,460 households (32,000 people) in the hard-hit area of Port Loko. A nutrition programme will support 3,650 children under the age of 5 and 6,957 pregnant and lactating mothers.

¹⁰ Sierra Leone 2013 Demographic and Health Survey.

¹¹ UNDP, *Road to Recovery*, December 2014.

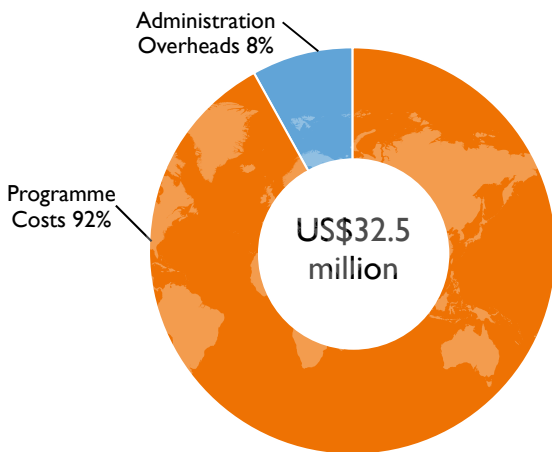
Financial summary

FUNDS RAISED
US\$32.5 million

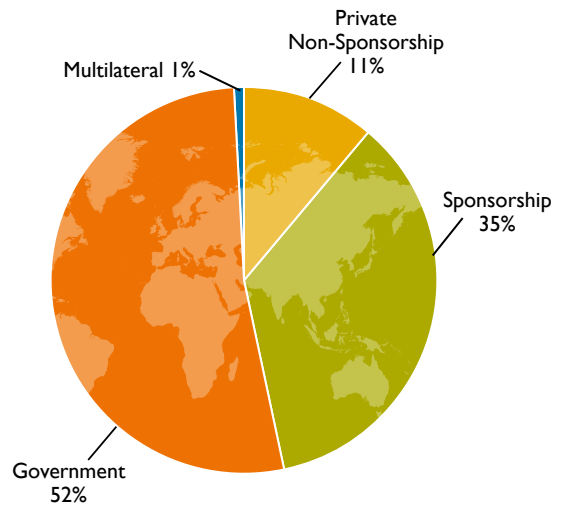
FUNDRAISING AND ADMINISTRATION
US\$2.5 million (8%)

TOTAL SPENT ON PROGRAMMING
US\$30.8 million (92%)

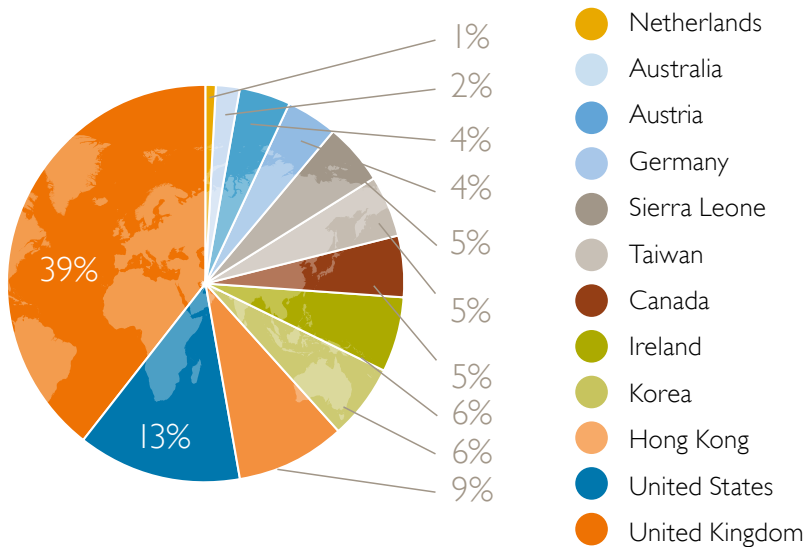
FUNDS RAISED



FUNDING SOURCE



FUNDS RAISED BY COUNTRY



World Vision is a global Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

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