



Social Mobilisation for Ebola in Sierra Leone - WASH Focus

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GOAL

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GOAL in Sierra Leone

- 15 Years
- Child Protection
- Health/Nutrition
- WASH





GOAL Sierra Leone in Ebola

- Building on Strengths
 - Relationships with communities
 - Trusted source of information
 - Liaison between community and authorities
- Developed 2 Key Innovations for the Ebola Response for Social Mobilisation
 - WASH Behaviour Change is CRITICAL





Innovation 1: Uniformed Services Ebola Training

- “Protecting Myself, Protecting the Nation”





Innovation 1: Uniformed Services Ebola Training

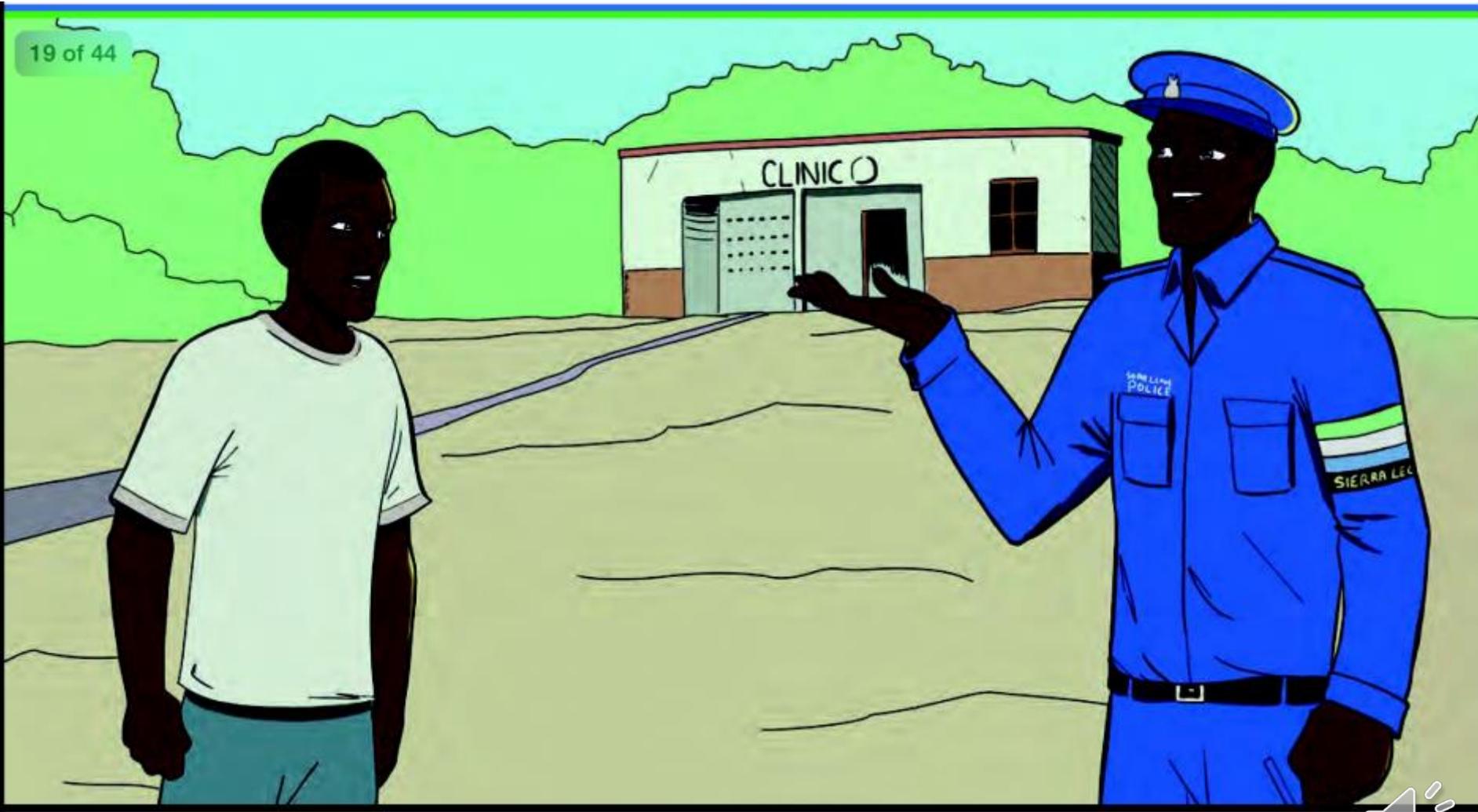
- Request from the Sierra Leone Police Chief in Eastern Province
- Evidence Base for Intervention – 3 Officers Infected in Kenema
- Support Uniformed Services to STAY SAFE at Work
 - Police themselves identified how to do this.
 - Handwashing, Chlorine, Sanitation etc
- 2 Day Curriculum





Innovation 1: Uniformed Services Ebola Training

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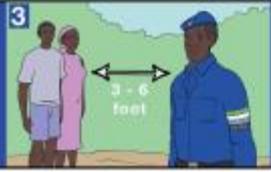


Innovation 1: Uniformed Services Training

Sierra Leone Uniformed Services Ebola Quarantine

Officers Should:

- 1) Ensure the family being quarantined has been informed of why they are being quarantined
- 2) Ensure the family does not leave the compound
 - a) Do NOT allow them to leave to go to market, visit friends, or to the water point
 - b) Watch the backdoor to ensure they do not leave that way
- 3) Maintain a minimum 3 – 6 foot distance from anyone being quarantined
- 4) Ensure NO visitors enter the home, even Contact Tracers must stay outside and talk to the family from a distance
 - c) If Contact Tracers do not visit each day, call the Ebola Line
 - d) If a visitor enters the home, get their name and report this to the Contact Tracers
- 5) Call the Ebola Line IMMEDIATELY in the event someone in the home becomes ill or runs away



Officers Should NOT:

- 1) Enter the home of the family being quarantined
- 2) Touch anyone under quarantine (even shaking hands)
- 3) Share food with the family being quarantined
- 4) Share a toilet with the family being quarantined





Innovation 2: Survivor & Champions Campaign

- Stigmatisation of Survivors and Key Workers (Healthcare Staff, Uniformed Services, Ambulance Drivers, Burial Teams)
- Rumour Mill:
 - Health care staff are spreading Ebola
 - Ambulances are not cleaned between patients
 - Burial teams are treating patients with disrespect
- Evidence Base for Intervention:
 - 77% of population have heard of a Survivor
 - 91% of population believe that survival is more likely if early treatment is sought
 - 60% of population trust Health Care Professionals to deliver good information
- Trusted Community Leaders Supporting this Campaign





Innovation 2: Survivor & Champions Campaign

EBOLA SURVIVOR

ALHASSAN

When Alhassan got Ebola he would not allow his family to touch him. Now, thanks to the treatment he got at the hospital, Alhassan has survived Ebola and can touch and hug his family again without putting them at risk.

EBOLA SURVIVOR

JULIANA

When Juliana got Ebola she knew she needed to go to a treatment center immediately. Now she is an Ebola Survivor. This means she does not have Ebola, cannot pass it to others, and cannot get it again.





Innovation 2: Survivor & Champions Campaign

EBOLA CHAMPIONS

DRAFT

MOHAMED & JOYCE

Mohamed and Joyce pick up people suspected of having Ebola and transport them safely to health facilities. Before they go to help someone they clean the ambulance from top to bottom so there is no risk of getting Ebola from the ambulance.

The poster features a man and a woman standing in front of a white ambulance. The man is wearing a white t-shirt with "PREVENT EBOLA" and "unicef" logos. The ambulance has "AMBULANCE" written on its side. The background is a stylized green and blue geometric pattern. In the bottom right corner, there is a small logo of the Sierra Leone government and the GOAL logo.





Take Home Messages

- Use Evidence Base where available to determine your messaging
 - GOAL thanks Focus 1000, CRS, UNICEF for the KAP survey!
- Consider that the situation is **CONSTANTLY** changing and **ADAPT!**
- Ensure you have a robust mechanism to disseminate through trusted channels.





Little Chat Re. WASH in ETCs

- Most complicated and important part of running an ETC
- Staff Behaviour Change is critical
 - No touch
 - Handwashing
 - Chlorination
 - Control of insects (food disposal etc)
 - Washing of confirmed toilets etc
 - Sharing of food, mobiles, pens etc
 - Water bottles
 - Patient and Staff movement for IPC





Thank you

