

### INTRODUCTION

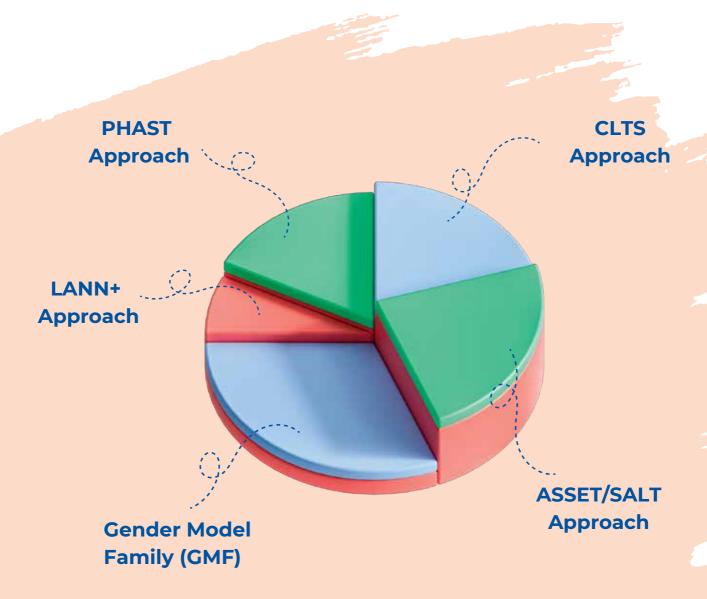
With a firm focus on the construction of health, sanitation and water facilities, this strategic direction strives to reduce the incidence of related deaths and illnesses across Sierra Leone. To support our critical infrastructure efforts, we employ a comprehensive approach which encompasses the provision of essential services, the implementation of training programs, and the organization of community sensitization initiatives that include local resource mobilisation, to ensure that even the most remote rural communities can access safe and affordable water and sanitation facilities.

We empower and support healthcare workers and structures to promote effective healthcare service delivery in several districts across Sierra Leone.



## Our Approach to Health, Hygiene, Sanitation and Water

Our approach to health, hygiene, sanitation and water is multi-faceted focusing on community-led initiatives, gender transformative practices, awareness raising, participatory hygiene and sanitation transformation, health insurance schemes, nutrition and natural resource management, and community-led total sanitation.



## **Our Approaches**

#### **ASSET/SALT**

To actively promote community development, we build the capacity of community members through our SALT/ASSET approach tool, which encourages self-help projects. Through this approach, communities identify their challenges, propose and implement local solutions to address these challenges. We build the capacities of communities to embark on sensitization campaigns on health, hygiene and sanitation through community engagements and radio broadcasts.

## GENDER MODEL FAMILY APPROACH

Our Gender Model Family (GMF) approach seeks to address socio-cultural beliefs that place a significant burden on women and girls for providing access to health, water, and sanitation. The approach promotes equitable allocation and distribution of economic resources, decision-making authority, and responsibilities between spouses within households. GMF also encourages shared management responsibility of health, sanitation, and water facilities between gender groups within communities





## **Our Approaches**

#### PHAST APPROACH

Our use of the Participatory
Hygiene and Sanitation
Transformation (PHAST) approach
is designed to empower
communities to improve hygiene
behaviours, reduce the incidence of
diarrhoeal diseases and encourage
effective community management
of water and sanitations facilities
and services. We employ a host of
specifically developed participatory
techniques that enhance the
community's learning, participation
and subsequent implementation.

#### **CLTS APPROACH**

We also employ the community-led total sanitation approach to drive a shift in sanitation behaviour by fostering active community involvement. Through this approach, we mobilize community members and raise awareness to encourage the adoption of positive hygiene practices, such as eliminating open defecation and implementing measures to achieve a clean and hygienic environment that benefits all.

## HEALTH INSURANCE SCHEME

We utilize the health insurance scheme as a resource mobilization tool in rural communities. This scheme unites community members in solidarity to save financial resources, thereby providing access to funds that can be used to solve health-related challenges and needs.

#### LANN+ APPROACH

The LANN+ approach, developed by a group of INGOs, aims to foster the nutritional status of rural communities. It is based on the adult action learning concept. It comprises four modules covering basic nutrition principles, the specific nutritional needs of pregnant women, mothers and children, hygiene and basic sanitation, and agriculture and management of natural resources.

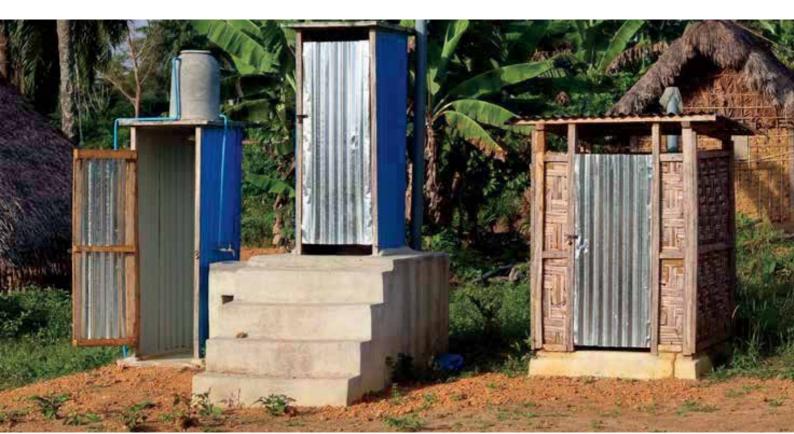


- As part of the SABI Project, our team sensitized the community about the importance of antenatal care, resulting in more women seeking care at healthcare facilities. Additionally, we operationalized complaint and response mechanisms at health facilities and schools by installing suggestion boxes to encourage citizens to share their concerns. The team reviews the concerns and communicates grievances to the appropriate service providers.
- With funding from BMZ through Welthungerhilfe, SEND Sierra Leone helped increase the understanding of how hygiene and nutrition impact a person's health among healthcare providers and the public. 48,966 people in 179 communities from 14 chiefdoms in Kenema and Kailahun districts were trained on the effects of hygiene and nutrition on health. Of this total number, 24,390 females and 24,576 males participated.
- In Kailahun and Kenema districts, we constructed or rehabilitated 28 health centres and equipped them with waste management systems and accommodation for health workers assigned to the Peripheral Health Units.
- The capacity of Health Development Committees was strengthened in 15 peripheral health unit (PHU) locations, and the committees expanded their monitoring activities to include projects and health service delivery.
- SEND carried out preventive health education on Ebola, Lassa Fever, and Cholera. This program was implemented in 114 villages, and we educated 7,815 women and 4,728 men on the spread of infectious diseases.





- SEND trained 1,000 households in 50 communities in two chiefdoms (Sittia and Dema) of the Bonthe District to increase their knowledge in hygiene/sanitation, nutrition, and health. Successful business activities were linked to the construction and rehabilitation of 600 household latrines in 4 chiefdoms in the Kenema and Pujehun districts and 2 chiefdoms in the Bonthe District. Low-cost hand-dug wells were constructed in 14 chiefdoms.
- SEND implemented projects in Kailahun and Kenema Districts to improve the delivery of healthcare services through community empowerment. The team trained 6,347 people on the ASSET/SALT Approach that promotes community-led initiatives to improve health and hygiene. Participants also received training on Sierra Leone's Free Healthcare Initiative (FHCI). As a result, the target communities constructed household toilets, established waste management sites, and better managed their community health assets.





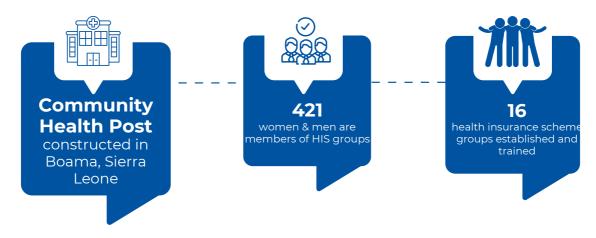
- SEND saved a total of Le 687,526,000 (\$67,972.9) under the Health Insurance Scheme, Community Development Box savings, and the VSLA schemes by 9,907 community members. The Health Insurance Scheme provided loans to community members, increasing their access to health services to address communities' difficulties accessing finance for health purposes. Communities also invested part of their savings into household WASH facilities and improved household waste management.
- Our work contributed to the strengthening of Bonthe, Kailahun, and Kenema districts' health systems through training and support to health institutions and community health Based structures in the districts.
- SEND sensitized communities on strengthening safe drinking water, hygiene, sanitation, and WASH systems through WASH maintenance funds to ensure sustainability and universal access to affordable water.
- In supporting the fight of COVID-19, SEND worked closely with community people, local authorities and government representatives to reach 24,379 (9222 female and 15157) beneficiaries from 40 communities in Kenema, and Bo districts. Beneficiaries were sensitized on COVID-19 prevention, sanitation and hygiene promotion and containment using mass sensitization techniques such as mobile film vans, market sensitization, and community stakeholder capacity building.





- In 2021, SEND provided a total micro-finance loan of \$54,341.22 to 66 VSLA groups of mostly women from 15 communities in 5 chiefdoms in the Kenema district. This enabled beneficiaries to pay weekly savings contributions for WASH facilities and personal household use. Additionally, in the Kailahun district, 406 community members mobilized \$5,534.8 through the Health Insurance Scheme (HIS), which provided access to loans for medical emergencies and common community health needs. In Bonthe and Kenema districts, 4,851 community members mobilized \$65,743.3 through the VSLA approach, constructing 1,098 EMAS wells and 377 EMAS latrines in 68 communities.
- SEND also awarded grants worth \$82,143.87 to 100 VSLA groups and 1,250 members to improve WASH facilities, livelihood, and community development initiatives. Moreover, 468 new water taps and 257 latrines were constructed within the year, and 118 WASH Management Committees with 910 members were reactivated to develop management systems focusing on formulating and enforcing bye-laws and resource mobilization for proper management and maintenance of WASH facilities. SEND trained 3,000 VSLA members on best practices in credit union operations and 500 VSLA executive members on micro-finance management and establishing a WASH maintenance fund





- In 2022, SEND constructed the Baoma Community Health Post CHP in Baoma Village, Nomo Chiefdom in Kenema district, providing health services for six catchment communities in the Nomo Chiefdom in Kenema District. A Health, Hygiene and Sanitation Manual/ Health Awareness curriculum was developed and distributed to community health-based structures to guide community engagement. SEND also strengthened the work of communitybased health structures through a series of capacity-building training, which contributed to improved health and sanitation practices, including good health-seeking behaviours in communities by members and setting of bylaws to promote sound community health.
- Moreover, 10 awareness raising/sensitization on health, hygiene and sanitation sessions were conducted by Traditional Birth Attendance trained and community health workers, serving as a means of linking pregnant women to the health facility and improving good health practices in communities and health-seeking behaviours. In addition, 16 HIS groups were established, strengthened, and given needed logistics to mobilize resources, with a total membership of 421 238 women and 183 men.



Project Name:	Improved Nutrition and Food Security in Rural Areas of Kenema District, Sierra Leone
Donor Partners:	Welthungerhilfe and the German Federal Ministry of Economic Cooperation and Development-BMZ
Budget:	€813,532.09
Target District:	Kenema and Pujehun districts
Status:	Completed

#### Key Actions:

- Provided capacity building for community structures on climate-smart agriculture practices
- Improved knowledge on climate change and natural resource management
- Supported the establishment of green micro-enterprises

- 28 Value addition infrastructure were established and are operational.
- 51 VSLA groups were established and strengthened to mobilize resources for their health needs and other developmental issues.
- To ensure the sustainability of the VSLA groups and the revolving funds at the end of the project, a credit union was set up at a strategic point between the four chiefdoms of operation, in Ngegbwema town, Tunkia Chiefdom.
- Animal production has expanded as snail faming was been incorporated into the animal protein pilot project which improved household nutrition and created alternative income generation source for the farmers.
- Increased yield of fleshed sweet potatoes, banana, plantain and beans and which led to the expansion of farm cropping and capacity building in good agronomic practices, this lead to the establishment of two bakeries in Kenema and Pujehun districts.

Project Name:	Promotion of Nutrition-Sensitive WASH Self-Sufficiency in Bonthe Island-SLE 1061 Project
Donor Partners:	Welthungerhilfe and the German Federal Ministry of Economic Cooperation and Development-BMZ
Budget:	€555,855
Target District:	Bonthe District
Status:	Completed

#### Key Actions:

- Training of 1,000 households in 50 communities in two chiefdoms (Sittia and Dema) in Bonthe District to increase their knowledge in hygiene/sanitation, nutrition, and health
- Strengthening of Bonthe districts health systems through training and support to health institutions

- 1,000 Bonthe Island households (6,000 inhabitants) are using sustainably managed and protected water supply systems and practicing safe hygiene and sanitation practices.
- Sixty-four (64) communities developed annual WASH
   Maintenance plans, implemented the plans and have
   taken steps towards improving hygiene and sanitation at
   household and community level.
- A total of 2,327 group members were trained on the Village savings and loan associations (VSLAs) concept, and fifty (50) communities received VSLA Kits from the project in the first year of implementation and are contributing to finance the community WASH Self-supply proposals.
- 100% of targeted households are financing sanitation facilities and products.
- 96% of VSLA participants (borrowers) fully repay their micro-finance loan within the repayment schedule.
- A total of 100 multipliers (50 males and 50 females) were trained on the linkage between nutrition, safe hygiene/sanitation practices, and health. These multipliers are from 50 clustered communities only but covered the additional 14 new communities with project activities.

Project Name: Improved Access to Sustainably Managed Micro-Finance and WaSH Systems – WASH Self-Supply Project

Donor Partners: Welthungerhilfe and the European Union

Budget: €356,850

Target District: Kenema district

Status: Completed

Key Actions:

- Establishing 100 VSLA groups
- Training community members in the maintenance of WASH infrastructure
- Constructing 293 latrines in 27 communities in the Kenema district using the CLTS approach

- 100 VSLA groups established and linked to the Kenema cooperative credit union. The 3000 VSLA members now have easy access to financial services/loan for income generating activities to invest in sustaining the WASH facilities and improve livelihood of their families and contribute to community development.
- All the 100 VSLA groups established and linked to the Kenema Corporative Credit Union have a total current deposit of 44,094.2 Euros (LE 341,613.16) with the credit union with some of the amount deposited into their various VSLA boxes at field level.
- Constructed 293 latrines in 27 communities in the Kenema district using the CLTS approach
- Over 61% of the VSLA groups are engaged in local food cultivation and part of the harvest consumed while part sold to improve on funds in their VSLA boxes.
- WASH committees established and trained, increased access to loans through the VSLA boxes, etc. the communities are cleaner compare to before project intervention

Project Name: COVID-19 Prevention and Response Project

Donor Partners: CARE Sierra Leone

Budget: £78,099

Target District: Bo & Kenema districts

Status: Completed

**Key Actions:** 

- Surveillance and monitoring outreach sessions by DHMT and MOHs organized to sensitize communities on COVID-19, hygiene promotion and underlying illnesses and health concerns
- Social Mobilization (house-to-house/small-groups) at community level to raising awareness among community members to improve their knowledge on the current status of COVID-19 pandemic, preventive measures and available COVID-19 including other disease vaccinations for infection prevention.
- Development, reprinting and sharing of community bylaws in collaboration with DICOVERC and DHMT leads (DMOs and district DIVOVER coordinators) for onward sensitization and prevention of COVID-19spread in targeted communities.

- 6711 vulnerable households received hand-washing materials (tippy tap materials, and soap) that has enhanced improved hand-washing practice by the households.
- Awareness-raising on COVID-19 and acceptable hygiene practices at the community level were carried out enhancing acceptable hygiene practices.
- Targeted community were provided with relief items including food items,

Project Name:	Enhancing Community Health Resilience Project –(P-138)
Donor Partners:	Engineer Without Borders-Denmark
Budget:	\$109,209
Target District:	Kenema district
Status:	Completed

Key Actions:

- Constructed the Baoma Community Health Post (CHP) in the Baoma Village in Nomo Chiefdom, Kenema district
- Established 16 HIS groups (with a total membership of 421, 238 women and 183 men) and provided needed logistics to mobilise resources
- Developed a Health, Hygiene and Sanitation Manual/ Health Awareness curriculum and distributed it to community health-based structures to serve as a guide during community engagement.

- A solar powered Community Health Post (CHP) was constructed to provide 24-hour health services to the catchment communities and Baomal6 HIS groups
- 16 HIS groups were established (membership of 421, 238 W & 183 M), strengthened and given needed logistics, and to mobilized financial resources for health needs. Le 16,725 (new) was mobilized by the groups within 9 months.
- A Health Hygiene and Sanitation Manual was developed and distributed to serve as guide during community engagement.

Project Name: Democratic and Participatory Sector Governing Institutions-Civil Society Engagement in Water Sector Management in Kenema District (P-100) Donor Partners: Engineer Without Borders-Denmark Budget: \$109,209 Target District: Kenema district Status: Completed **Key Actions:** • Training of 686 HDCs, WMCs, WDCs and community stakeholders on the CLTS and EMAS technology, and on the management of health driven activities in communities. • Rehabilitation of four (4) water wells and construction of latrines through the CLTS and EMAS approach communities. • 686 HDCs, WMCs, WDCs and community stakeholders Achievements: were trained on the CLTS and EMAS technology, and on the management of health driven activities in communities • Four (4) water wells were rehabilitated and 633 latrines constructed through the CLTS and EMAS approach in communities

Project Name: Community Empowerment to participate in Health Service delivery

Donor Partners: DHMT and Deutsche Gesellschaft für Internationale

Zusammenarbeit (GIZ)

Budget: €100,000

Target District: Kailahun district

Status: Completed

Key Actions:

- Training and strengthening of 132 Community based health structure representatives (CHWs, C/Fs, , TBAs, FMCs) to facilitate policy literacy and community awareness activities in the 32 communities.
- Building relationship between Communities and health care providers to support each other to improve health service delivery in communities
- Awareness raising of communities to enable them use available local resources to support prevention and control mechanisms in managing future occurrences of infectious diseases and viruses.

- 132 Community based health structure representatives (CHWs, C/Fs, , TBAs, FMCs) were trained and strengthen to facilitate policy literacy and community awareness activities in the 32 communities.
- Communities and health workers built relationships to support each other to improve health service delivery in communities
- Participants (Border personnel, community members and Health Workers gained knowledge to enable them develop skills and new awareness to support preventive and control mechanisms and to manage future occurrences of infectious diseases and viruses.

Project Name:	DERF Covid 19 Relief Fund
Donor Partners:	CISU and Engineers without Borders-Denmark
Budget:	\$57,485.7
Target District:	Kenema district
Status:	Completed
Key Actions:	<ul> <li>Conduct awareness-raising on COVID-19 campaigns and acceptable hygiene practices at community level.</li> <li>Provide six thousand seven hundred and eleven (6,711) hand-washing materials (tippy tap materials, and soap) to vulnerable households to improved hand-washing practices.</li> <li>Provide improved meal to Six thousand seven hundred and eleven (6,711) vulnerable households due to the food items supplied for two months for each of the 26 communities.</li> </ul>
Achievements:	<ul> <li>6,711 vulnerable households received hand-washing materials (tippy tap materials, and soap) that has enhanced improved hand-washing practice by the households.</li> <li>Awareness-raising on COVID-19 and acceptable hygiene practices at the community level were carried out enhancing acceptable hygiene practices to ensure prevention and control in communities.</li> </ul>

• Targeted community were provided with relief items

including food items (Rice, Palm oil etc).

Project Name:	Prevention of Zoonotic caused Health Epidemics in Sierra Leone (1043)
Donor Partners:	Welthungerhilfe and the German Federal Ministry of Economic Cooperation and Development-BMZ
Budget:	€183,500
Target District:	Kailahun and Kenema districts
Status:	Completed
Key Actions:	<ul> <li>Establish information, control and response mechanism to prevent transmission of infectious diseases.</li> <li>Initiation of early response by local authorities.</li> <li>Organize awareness campaigns towards disease</li> </ul>
	prevention and develop early warning systems to timely curb the early spread of contagious infectious diseases through stimulation exercise.
Achievements:	36 Selected Health personnel including PHU in-charges

- 36 Selected Health personnel including PHU in-charges had refresher training in identifying signs and symptoms, prevention and control of zoonotic infections such as Ebola, Lassa fever and cholera including improved knowledge on environmental hygiene and sanitation practices.
- 50 multipliers across the five (5) project target chiefdoms
  were equipped in basic health knowledge, nutrition and
  early identification on the causes, signs and symptoms of
  Ebola, cholera and Lassa fever, they were supported to
  disseminate the knowledge further in their target villages
  and in the medium term, contribute to a behavior change
  in the target villages
- Communities were equipped with increased knowledge on the causes, signs and symptoms of zoonotic related diseases such as EBOLA and LASSA FEVER.
- Increased knowledge in community preparedness and response in preventing the reoccurrence of emerging contagious diseases such as epidemics through capacity building trainings and community simulation exercises.

Project Name:

Building A Resilient Community Health System to Prevent Infectious Diseases

Donor Partners:

United Nations Development Programme-Sierra Leone Country Office

Budget: \$ 223,252.56

Target District:

Kailahun district

Status:

Completed

Key Actions:

Construction and rehabilitation of 6 PHU (3 each).

Identification, formation, training and strengthen of 210 women folks for VLSA to mobilize resources.

Formation of 6 health structures, membership of 10 each (HDCs, FMCs, Local authorities) to support the effective

development.

#### Achievements:

- 6 MCHPs were rehabilitated to facilitated the efficient and effective delivery of health care services to community members.
- 10 VLSA of 325 women and youths from the 6 MCH communities were formed, trained and supported to mobilize income to save lives and support the PHU.

functioning of targeted PHUs and to also serve as champion for community health improvement and

 4,500 people were directly sensitized on the infectious diseases through the use of IEC materials during town hall meetings and monitoring sessions

Project Name: Improvement of Health Care through Infrastructure

Development and Capacity Building Measures in Kailahun and

Kenema District (1045)

Donor Partners: Welthungerhilfe and the German Federal Ministry of Economic

Cooperation and Development-BMZ

Budget: €5,555,555

Target District: Kailahun and Kenema districts

Status: Completed

Key Actions:

• Rehabilitation or construction of 20 PHUs.

- Training of 200 multipliers in basic health knowledge and community engagement on Health, Hygiene and Sanitation.
- Organization of half yearly food fairs.
- Awareness raising on risk and prevention of infectious diseases (Ebola, Cholera diarrhoea) as well as on hygiene and sanitation necessities through radio, theatre and public discussions.
- Capacity building for health authorities in planning and management to enable the sustainability of developed health infrastructure.

- Twenty (20) health facilities were constructed or rehabilitated to effectively enhance the efficient delivery of quality health service delivery in the two districts
- Through this intervention, the project supported communities with a total of 52 water points to enhance the availability of a safe, affordable and accessible drinking water facility in the two districts
- Improved patient and health worker inter personal relationship and health care – seeking behaviour
- Increased confidence of the population in their healthcare system to seek and experience good treatment at the rural health facilities
- Improved knowledge and behaviors of the population with regards to nutrition education, health, hygiene and sanitation practices

Project Name:	Sustainable Health Service through Entrepreneurship and Economic Empowerment of the Women in Baoma (SHSEEE)
Donor Partners:	CISU and Engineers without Borders-Denmark
Budget:	€47,552
Target District:	Kenema district
Status:	Ongoing
Key Actions:	<ul> <li>Selection and training of 80 women entrepreneurs on entrepreneurship and business plan development.</li> <li>Provision of start-up kits for 80 women entrepreneurs</li> </ul>

- Provision of start-up kits for 80 women entrepreneurs.
- Leadership and capacity building training for community leaders and HIS executive members using SEND's leadership training manual
- Construction of solar kiosk to support the health facility there by enhancing the sustainability of the facility.
- Training of Facility Management Committee members on management and administration of the kiosk and supporting them with logistical for the running of the kiosk.
- Selection, formation, training and strengthening of four new HIS groups in 3 additional communities.

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