



MENTAL HEALTH COALITION OF SIERRA LEONE



An initiative coordinated by Enabling Access to Mental Health in Sierra Leone.
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COALITION NEWSLETTER



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WORLD MENTAL HEALTH DAY 2014

and its complimentary sub-theme “Effectively managing the mind to confront the Ebola Epidemic.”

CELEBRATING AMIDST THE DISABLING EFFECT ON THE EBOLA CRISIS IN SIERRA LEONE

Celebrating at a time of crisis was a very challenging moment for the membership of the Mental Health Coalition of Sierra Leone.

The scope and scale of the usual World Mental Health Day Celebrations was usually a growing one on a yearly bases and had being a collaborated efforts of three main parties: the Mental Health Coalition – SL (A project coordinated by the Australian Aid’s funded Mental Health Leadership and Advocacy Program and that of the European Union sponsored Enabling Access to Mental Health in Sierra Leone), the World Health Organization (SL) and the government of Sierra Leone (Specifically MOHS).

Unfortunately, the nourished hopes of all stakeholders for the 2014 commemoration were really dashed by the Ebola prolonged crisis; thus limiting the ultimate outcome as was initially designed. Clear enough, the celebrations of 2014 was in no way commensurate to the previous years’ celebrations.



Amidst all of the physical, social and emotional/mental challenge, it must nonetheless be noted that the attitudes towards every program/activities is what cultivates the needed impetus to accomplish any given task. With such a great resilience the Events Sub-Committee of the Mental Health Coalition was able to make great the little opportunity by planning to major low risk but awareness raising and advocacy focused programs.

Though in many ways not too far from what has been obtained in the previous year’s, yet the week long jingle, the annual press conference and the newly created Service Users Group seminar was enough to appropriate the theme “Living with Schizophrenia”

The coalition as at previous times was able to have the Awareness Raising Sub-Committee of the Mental Health Coalition of Sierra Leone, led by Ansinu Lamin of coordinating the airing of the jingle in three main nationwide coverage, broadcasting houses. The Coalition was also able to pull together the expertise from the government of Sierra Leone and the World Health Organization as well as its Chairman to be part of the panelists of the press conference held in commemorating the World Mental Health Day’s Celebrations. Dr. Andrew T. Muana who is doubling as the Focal Point for Mental Health in the Ministry of Health and Sanitation as well as the Medical Superintendent, for the Sierra Leone Psychiatric Hospital, Kissy, Freetown, Dr. Istvan Patkai, Mental Health specialist and consultants in the World Health Organization and Walter Carew – the Chairman of the Mental Health Coalition of Sierra Leone made great presentations of the topics. Major highlights included though in any way limited to:

The need have a broader and better perspective of what mental ill health really is.

The need for a change of attitude on how communities react to people with mental health conditions.

The need to raise awareness that such conditions are treatable or manageable.

The need to sensitize the public that traditional healers and religious leaders are not the only people that offer care (and should not really be the first point of call) but that better and evidence based treatment is available through the already trained mental health nurses in the fourteen districts.

Ebola can be defeated if the appropriate mind-set is cultivated to confront it and making a deliberate efforts to keep to the guiding principles required to stop its spread.



The press conference was balance with sensitive ques-



tions under the great moderator Joshua Abioseh Duncan (who doubles as the Country Facilitator for the Mental Health Leadership and Advocacy Program –Sierra Leone as well as the Project Coordinator for the City of Rest Wing of the Enabling Access to Mental Health in Sierra Leone).

Sahr Motatay Momoh and Jennifer S. Duncan (both mental health nurses) and George Bindi (Professional Counselor and Public Relations Officer of the Mental health Coalition – Sierra Leone) constituted the team that made presentations at the Seminar organized for the Service Users Group.

This very well represented meeting included family members, carers/ service providers and service users. Major highlights of the session included:

- Some major mental health conditions.*
- Possible signs and symptoms to watch out for.*
- Possible steps to manage presenting conditions.*
- Possible referral pathways*
- Of a truth, a family member commented, “this is a new and better direction of mental health care in the country – many thanks to the coalition and its funders for such a great initiative; keep it going!*

WORKSHOP ON COALITION BUILDING

Presenting learning opportunities for Mental Health Coalition members

As part of its advocacy, awareness raising and training drives for 2014, the month of November was slated for the Mental Health Coalition Building and Sustenance Workshop. The mental health coalition – Sierra Leone had in December, 2014, successfully carried out its fourth annual coalition building workshop.

The Mental Health Coalition of Sierra Leone/Stake Holders’ Council is being used as the medium of the Enabling

Access to Mental Health in Sierra Leone – City of Rest Project and the Mental Health Leadership and Advocacy Program to seek for and pursue better mental health policies and ensure that the implementation of approved policies are strictly followed. They had also being very much involved in capacity building and awareness raising to ensure that their targeted groups are empowered to provide the necessary services as well as allow for the increased knowledge in the area of mental health.

The 2014 workshop which was slated for Wednesday 11th through Friday 13th December, 2014 was held at the Christian Health Association of Sierra Leone (CHASL) Hall, 4^B King Harman Road, Off Old Rail Way Line, Freetown. The workshop hosted a total of Sixty (60) Participants representing twenty-three (23) different organizations.

Owing that Sierra Leone is being face with the Ebola Epidemic and that the coalition existed to not only create appropriate impact in response/reaction to existing/emerging issue(s), did not only decided to go on with the workshop but to re-design and contextualize it.

The contents of the sessions were therefore focused on possible mediate, proximate and above all the ultimate approaches the coalition could employ in helping to combat the negative impact of Ebola and its complexities at such a challenging moment of our country. This workshop had coverage with two main local radio stations in the country –That is Radio Democracy (FM 98.1) and that of Air Radio (FM 105.3). Each participant was presented with a file containing a spiral book, pen, time-table and evaluation form. Tea breaks and Lunch were served to all who attended. Attendees’ comments were made in four categories. They includes: Venue, Food, Facilitators and Topics treated as well as other comments. The rating scale was mainly grouped within the category of good and very good.

The Session was concluded with the presentation of certificates and a priority goal setting. The entire experience was indeed timely and relevant to the existing situation.



THE MENTAL HEALTH COALITION - SIERRA LEONE

The Mental Health coalition - Sierra Leone founded in 2011 is a five year European Union funded project through the Enabling Access to Mental Health Program is Sierra Leone. The Enabling Access to Mental Health in Sierra Leone team constitutes both local and international partners. Local Partners include the University of Makeni, the City of Rest Rehabilitation Centre and the Community Association for Psycho-social Services; whilst the Global Initiative in Psychiatry and CBM constitutes the International partners.

The Coalition was later on adopted as the stakeholders’ council of the Mental Health Leadership and Advocacy Program (mhLAP) – An Australian Aid sponsored program through the CBM and the University of Ibadan, Nigeria. The ultimate aim of the Coalition is to advocate for the Human Rights and dignity of mental health service users, their family members and service providers. Major among other objectives of this entity is to campaign for an increase national commitment in mental health issues in Sierra Leone. Hence a justification for this newsletter.





THE MENTAL HEALTH COALITION - SIERRA LEONE AT FOUR
“GROWING UPWARDS AND MOVING FORWARD”

The First Major Activity Done in Celebrating the Mental Health Coalition at Four was the Annual Leadership Training This is an annual event designed to empower its members to ensure that continued growth is maintained until the best is realized. The 2015 Leadership training commenced on Tuesday 9th and continued to Wednesday 10th December 2014 The training was done at the Enabling Access to Mental Health in Sierra Leone (EAMH-SL) Project Office, Bass Street 3 Brookfields, Freetown.

The training hosted about forty-One (41) Participants representing twenty one (21) different organizations. The entire session was facilitated by six professionals in their designated fields.

Growth, as believed by the coalition, is a general term and can only be measured by output. For better output there should be a proportionate input. When inputs and outputs are optimized, then sustained growth is fully enhanced. With this fact the coalition believes that if it could have a better team to lobby and advocate for better services and policies for its members (Users and providers of services), then there should be the desired skills and the leadership ability to do so.

Each facilitators (see table above) were very equip and knowledgeable in the subject matter and delivery style. Their presentations were rather an experiential than a descriptive one – hence making the entire training a practical and current session (a living learning experience). Each presenter as was expected created a road map for the up-coming year and helped participants in each working –group session realize that the outcome should reflect the first person pronoun (Singular and Plural) “I” and “we” instead of the second or third person “ You” or “they/their”. This graphic illustration created in the minds of participants was indeed motivational and resulted in the formation of the Mental Health Coalition Ebola Sub-Committee (A vibrant team under the leadership of Rose-Marie Boma).

Tea breaks and Lunch were served to all who attended and the session was climaxed with questions and answers and was concluded the issuing out of certificates, photos and transport refunds.

Below are some of the comments made by those who attended the December, 2014 leadership training program:

“I would have been thirty percent (30%) short of knowl-

edge if I had missed this training”.

“Each year’s training is designed for the upward growth of the coalition; I am in no way regretting being part of this noble entity”.

It was indeed great to have the sheared views by means of evaluation and this makes the Coalition’s Coordinator as well as the Executive Committee that the training is a living organism.

The Second Major Activity Done in Celebrating the Mental Health Coalition at Four was the Annual General Meeting: The Annual General Meeting was done on Thursday 11th December, 2014 at the Project Office (Enabling Access to Mental Health in Sierra Leone (EAMH-SL), Bass Street 3 Brookfields, Freetown.

This internal evaluating and planning activity hosted a total of forty-Two (42) Participants representing twenty three (23) different organizations.

The entire sessions was considered a great events as members were open to ask questions and also motivated by the good work that the sub-committees and ExCo had been doing over the years. Due to the unavoidable absence of the Coalition’s Chairman, it was unanimously agreed that the Coordinator (Joshua A. Duncan) presides over the business meeting sessions by a motion which was moved, seconded and carried by members in the session.

Major Issues Highlighted during these reports were:

The need to solicit funds to run the proposed annual Mental Health Conference.

Members to be willing to make financial donations to the coalition both at individual and organizational level.

Committee members to be sending regular updates to update the blog.

The need to push for the MH yearly Activity/Working document being actualized with the revision of the “Lunacy Act” being prioritized.

The nature and venue of the World Mental Health Day was revisited.

The need for continual articles to be sent to the News Letter committee for publications.

The Time table for the completion of the strategic plan and its feeding into the MHC-SL proposed Constitution.

A great miss was the election which was to have climaxed the entire session. After much open deliberations, it was agreed that this aspect be looked into in the future.

“What a great, better and democratic way we have all handled ourselves and the matters which were thought to have been complex”! - Major comments made by a senior member of the coalition.

The AGM was punctuated with tea break and lunch services. The Session was concluded with photos and the issuing of training Certificates.

If through one mind and one heart we have gone thus far, then at five we are sure to be even better and vibrant with one mind and hearts.



A SUSPECTED EBOLA VICTIM – SHARING MY TRUE STORY AND EXPERIENCE

Background:- My name is Marko Mahmud (real name not disclosed). I was born in the 1980's in one of the famous provincial towns in Sierra Leone. Like many other children I was the seventh child of my father and the only daughter to my mother. A position that most people would consider as inappropriate for a poor woman like my mother when compared to the several wives married to my father with the scores of children they had for him.

A Sad News:- Papa, being a soldier working for the government of Sierra Leone was very enthusiastic when he was posted to Freetown. Our long nourished hope was eventually greeted by one of my many most saddened events of life - the eventual death of papa in 1995. Conflict among the wives increased-each trying to seek the best interest of their child. Mama could not bear the effect and thought the obvious outcome was to relocate. Where? When? What are the survival possibilities? These were all issues we had to grapple with.

Negative Experience as a Child:- Eventually I was sent to Bo to stay with my uncle. My main aim for relocation was to access better schooling opportunities. This well nourished hope again resulted to nothing less than emptiness. My hope was altered with very painful moments like; Child labor - working for long hours and almost always late for school, social and religious restrictions and physical abuse causing injury.

My saddened memory could not allow me to be connected with the much wider society and I was very desperate to liberate myself from an involuntary slavery imposed upon me by my care-givers. Back to Freetown with the slogan "Fri po beteh pas tayt jentri" – "Freedom in material lack is much more preferred to that of slavery in abundance". I was hoping to be sent to formal schooling (precisely SSS 1) which I was very much qualified for but was rather sent to a vocational institute- this was very unfair.

Taking a Great Risk:- Unto the streets I went for two years as a means of revolting against forced decision and became a member of a famous team of commercial sex workers. Inexperienced resulted into an unwanted pregnancy which made me now a mother of a six year old daughter.

A suspected Ebola Case:- Worked at a bar (venue not to be disclosed) to be able to meet new needs of managing myself and my daughter, was an obvious way forward. It

was on one evening at work that I started feeling feverish with red eyes and sawed mouth.

Of course, those were also symptoms of Ebola and in order to avoid public stigma, I withdrew myself from work and was later admitted for three weeks with other patients at an isolation centre as a probable case of Ebola.

The Result of Psycho-Social Care:- The thought of being positive whilst waiting for my blood test result at the isolation centre was a terrifying one; It resulted in sleeplessness, lack of appetite and many other such heart breaking thoughts.

It was worsened when I was rejected by the Hastings Treatment Centre on transfer. Of course, no total communication break from my neighbors displayed the level of resentment they had against me. I was later on told that this came about as a result of the fear of them being quarantined, or being suspected of been in contact with me before I was declared a probable Ebola case.

Whilst still waiting for the result, the doctor assigned to the unit, was of great help. He provided some counseling session with me which restored some amount of hope in me. I then realized that the worse can only happen if I chose to accept it to be so. I then realized that my inner strength could play a great role to overcoming the sickness. Upon this a dim light started to make its rays visible at the end of the tunnel.

Positive Strides for Positive Results:- I became very cooperative; eating, exercising, so much so that even the deaths in the next ward could not change my resolve.

"Finally, your results are out", came the fatherly voice of the doctor, "Marko Mahmud - Thank God!!! You are Negative. No Ebola"!

Overwhelmed with joy and realizing later on that it was just measles I was having, was triumphant news. I received some basic treatment and was later on discharged with a certificate and a special package.

What a happy end and a victorious walk back home! Though unsure what community response would be, the gift of life and the resolve I had imbibed at the words of the doctor could not allow anything to move me. The package received was shared with neighbors who gladly received it and pretended to have been very concerned from the beginning.

Lessons Learnt:- The importance of the psycho-social support was very paramount. I would have otherwise given up if such was not the case. Family concerns were also a great support mechanism that gave me reason to endure. Going back to the streets was no longer an option for me and my piece of advice to all is; share the truth to your friends that Ebola is real, avoid it – but if you become a victim, go quickly to the nearest hospital. The possibility of recovering is very much contingent on your prompt response and the nature of care provided at each centre.

Our quarterly newsletter offers you the opportunity of making contributions to its periodic bulletin. You can send in identified challenges that need to be reviewed or changed, available opportunities that could be seized, and information for dissemination. You can take advantage of this opportunity by sending your contributions to the contact information below:

City of Rest Rehabilitation Centre, 34 Fort Street, Freetown, Phone: +232 (0) 78 982 554

Email: enablingaccesscorpa@gmail.com

Please enter comments, views, observations, and input at:

<http://mentalhealthcoalitionsi.com/>



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