OVERVIEW

From August 5-11, a group of members of Congress from California and their staff and guests traveled with CARE to Sierra Leone to see how vital U.S. investments and partnerships are improving health outcomes for women and their families. This group was joined by representatives from the Global Health Council, Bill & Melinda Gates Foundation and the Congressional Research Service.

The delegation’s journey took place in Sierra Leone, a country that is currently grappling with high poverty rates and very weak health indicators. Sierra Leone has the highest maternal mortality rate and the second highest infant mortality rate in the world. Fertility rates remain high with five children being born on average to each household and more than 60 percent of the population lives on less than a dollar a day. These challenges were further exacerbated by the 2014 Ebola outbreak in West Africa, as well as the decade-long civil war that devastated much of Sierra Leone’s infrastructure, which the country still struggles to recover from.

This Learning Tour highlighted the importance of U.S. investments in global health and women’s empowerment in Sierra Leone – particularly investments that have supported and continue to support the country’s transition from emergency health response to achieving long-term, sustainable health gains.

→ DAY 1

Setting the Scene – From Emergency Response to Sustainable Gains

The delegation began their first full day in-country with an introductory briefing by the U.S. Mission where they heard from representatives from USAID, CDC and the U.S. Department of State. The U.S. Ambassador to Sierra Leone Maria E. Brewer also gave remarks on the history and impact of U.S. investments in Sierra Leone, including the United States’ response to the Ebola outbreak. This discussion was further contextualized as the group had their first look at programming on the ground.

Disaster Risk Reduction Program

LOCATION: Freetown, Sierra Leone (Kroo Bay)

BACKGROUND: To strengthen the resilience of families and communities, Catholic Relief Services (CRS) invests in disaster risk reduction (DRR) activities that focus on preparedness in disaster-prone communities – those hit cyclically by floods, drought, typhoons and other crises – to mitigate the impacts of disasters, especially in areas facing the worsening effects of climate shocks. The DRR program provides comprehensive training to participating government and civil society members on the creation of emergency response and preparedness plans and vulnerability maps, managing solid waste through community engagement and cleanup efforts; integrating urban DRR concepts into government development planning; and integrating water, sanitation, hygiene, shelter and livelihood activities into the DRR planning process. continued on next page

The delegation heard from U.S. Ambassador to Sierra Leone Maria E. Brewer about the progress being made through U.S. foreign assistance, implemented in collaboration with the Sierra Leonean government and local partners, to respond to the urgent health needs of mothers, children and families.
**IMPACT: The project works through Community Disaster Mitigation Committees (CDMCs) to ensure all zones and social groups in the community are included in the disaster mitigation, preparedness and response. Risk maps and community disaster preparedness action plans have been developed for 21 flood-prone slum and informal communities in Freetown, Sierra Leone. In Dzarak slum, the DRR project has resulted in the construction of 400 meters of drainage and CRS has worked with CDMCs to promote drainage clearing of the main natural channels in Dzarak and Kroo Bay communities. To date, more than 1,000 first responders have been selected for training in disaster response, first aid and fire prevention and CRS has worked to train team leaders of CDMC rapid response teams across 21 communities in Freetown.**

**DONOR: Catholic Relief Services (core funding)
IMPLEMENTING PARTNER: Catholic Relief Services; Federation of Urban and Rural Poor**

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“**The challenges here are great, but the opportunity and potential are greater**

– MAYOR AKI-SAWYERR

Following their first program site visit, the delegation participated in a lunch briefing with local technical experts from CARE, the World Health Organization and UNFPA to learn about the maternal and child health and health systems strengthening work in Sierra Leone. The delegates also heard about the current health, gender and development landscape in Sierra Leone.

Later that afternoon the group met with the Sierra Leonean Minister of Health Dr. Alpha T. Wurie who provided an overview of the government’s health priorities. Next, the group had a chance to sit down with both the president and vice president of Sierra Leone to hear how the country’s new Administration aims to tackle poverty and address health by prioritizing education.

To close the evening, the group participated in a dinner discussion with representatives from USAID and the CDC as well as graduates and program staff from U.S.-funded training projects focused on building the capacity of field epidemiologists to identify and respond to public health needs and potential threats.

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**Emergency Response to Sustainable Gains**

On their second day in-country, the delegation explored the role that livelihood development, women’s political participation and the structural renovation of clinics play in helping communities transition from emergency response to achieving long-term health gains.

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**Ebola Survivors Program**

**LOCATION:** Port Loko District, Sierra Leone

**BACKGROUND:** Funded by USAID and implemented by World Vision, the Emergency Food Assistance to Port Loko District project sought to respond to immediate food and livelihood needs during the Ebola epidemic, while stimulating long-term recovery. During the crisis, the project provided emergency food, fortified rice seeds and collaborated with the Ministry of Agriculture to provide training for farmers as well as providing emergency cash assistance and establishing community-led savings groups. As the delegation saw firsthand, the community is still benefitting from these investments today.

**IMPACT:** The project has resulted in the distribution of $3,153,000 in unconditional cash transfers, often used to start small businesses or rebuild homes burned down during Ebola, and one-time conditional seed vouchers to farmers in 10,783 households in 7 chiefdoms of Sierra Leone’s Port Loko District. These transfers and seed vouchers have resulted in increased household dietary diversity due to enhanced household food access through markets and agricultural production. Furthermore, food security has increased in 98.2 percent of target households compared to the project baseline. World Vision also has worked to facilitate and strengthen 400 savings groups within the Port Loko District. This savings group component of the project has resulted in the use of social funds to finance health-related expenses and resulted in increased health-seeking behavior among project participants.

**DONORS:** U.S. Agency for International Development

**IMPLEMENTING PARTNERS:** World Vision International
**A Story from the Field**

**Catherine Zainab Tarawally** graduated from the WELD program in March 2018 after she won local parliamentarian elections in the Bombali District of Sierra Leone. She says she feels very proud to be a woman involved in politics in Sierra Leone because she knows the challenges women in her country face and she is proud to be a voice and a spokeswoman to defend issues affecting women, particularly mothers in her community. Through the WELD program she was able to hone her public speaking skills and improve her organizational, business management and writing skills, all of which she views as integral to her recent successful election campaign.

**CARE Health Worker Training Program**

**LOCATION:** Bombali District, Sierra Leone

**BACKGROUND:** The Manjorah rural health clinic is an example of coordination between a variety of partners and key stakeholders, including the Ministry of Health and Sanitation, USAID, the Government of Germany and NGOs like CARE. At this particular clinic, USAID constructed a patient isolation shelter, which was a measure put in place to isolate any potential health threats and prepare for future health emergencies; CARE, in partnership with the Ministry of Health and Sanitation, provided training for health workers at the clinic on maternal and child health; the Government of Germany helped to fund the water and sanitation infrastructure at the clinic; and the Government of Sierra Leone provided the performance-based financing to the health center staff, which helped two of the nurses build a residence for themselves on the clinic compound.

**IMPACT:** In 2017, CARE rehabilitated and re-deepened the water well in the Manjorah clinic resulting in continuous water supply for the past year. In the last year, CARE also helped install a piped water network that supplies water to the handwashing basins in the inspection room, maternity room, main entrance room and latrines. Rainwater is harvested and collected into an elevated water storage tank for this supply. CARE also constructed four disability-friendly and gender-separated pour-flush latrines with bathing spaces for patients. As part of the project intervention, CARE also rehabilitated the maternity ward of the Manjorah clinic.

**DONORS:** GIZ - Government of Germany; U.S. Agency for International Development; Government of Sierra Leone

**IMPLEMENTING PARTNERS:** CARE; GOAL International

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**Women Empowered for Leadership Development (WELD) Program**

**LOCATION:** Sierra Leone (nationwide)

**BACKGROUND:** Through the USAID-funded Women Empowered for Leadership and Development (WELD) project, women in Sierra Leone benefit from entrepreneurship and basic arithmetic training, improved farming technologies and from grants that enable them to manage complex and medium enterprises effectively, to engage in formal transactions and to expand their agricultural activities. WELD is also working on the supply of women with the skills, experience and the will to run for and serve in public office. The demand for women in leadership has also been strengthened. Women representatives, including local council representatives, have now been empowered to take on development and leadership roles.

**IMPACT:** The WELD project has reached out to more than three million Sierra Leoneans about behavior change and women’s empowerment. To date, hundreds of women entrepreneurs and political aspirants have benefited from training and thousands have received loans from savings groups established under the program. In addition, 88 paramount chiefs and seven district officers have benefited from forums on how traditional leaders can promote women’s participation in governance at the chiefdom and community levels. In addition, 289 female political aspirants at national and sub-national levels have been trained—185 were nominated (20 for Parliament and 165 for local council). Following the March 2018 elections, five women were appointed section chiefs, seven elected as members of Parliament and 50 as councilors. One female mayor, deputy mayor, and district chairperson were also elected.

**DONORS:** U.S. Agency for International Development

**IMPLEMENTING PARTNERS:** World Vision International

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**A Story from the Field**

**Mamasu Nuise** has worked as a nurse since 2010, providing pre- and post-natal care to pregnant women and lactating mothers. She says she decided to become a health worker because she saw the need and the challenges in her community and wanted to help the people of her country, particularly women. As part of the training she received from CARE, Mamasu goes door to door to provide community outreach and sensitization on the importance of healthy timing and spacing of pregnancies and to ensure women who are pregnant do not encounter any health challenges prior to or during delivery. Since receiving this training, her clinic has not witnessed a single maternal death in the last two years. She says she feels proud to be a nurse – though her earnings may be low, she’s proud to be able to support her family through work that she is passionate about and to be a role model for her three children, all of whom have finished school and have either graduated or are near graduating with a university degree.
Women’s Empowerment and Community Health

On the third day of the trip, the group had a look at the role women and girls’ equality and empowerment plays in promoting improved community health outcomes and reducing gender-based violence. Below are some of the program highlights from the day:

### Husband School Program

**LOCATION:** Makeni, Sierra Leone  
**BACKGROUND:** Husband Schools began in Sierra Leone in 2012 to provide a forum for engagement around issues of women’s health and access to health services and household financial resources. First developed in Niger, these schools train a handful of men on the importance of family planning, obstetrical care, maternal and child health and preventing violence against women. These “model husbands” then share their knowledge with other husbands and fathers in their villages and communities, spreading awareness of these issues and encouraging men to be active partners in the fight to reduce maternal and child mortality.

**IMPACT:** Implementers of the Husband School program have reported significant progress in health behavior and outcomes including more women giving birth in health clinics with trained medical staff, men accompanying women to pre-natal visits and reductions in teenage pregnancy. While UNFPA no longer directly supports the program, the program model continues and members in Sierra Leone continue to meet on a weekly basis to discuss issues related to gender and health in their community.

**PREVIOUS DONOR:** UNFPA  
**IMPLEMENTING PARTNER:** Fambul Initiative Network for Equality Sierra Leone

### Girls Access to Education (GATE) Program

**LOCATION:** Port Loko, Kailahun and Moyamba Districts in Sierra Leone  
**BACKGROUND:** In Sierra Leone, stories of early and forced marriage and harmful practices, like female genital cutting (FGC) are too common among girls. According to recent reports, 18 percent of women in Sierra Leone are married by the age of 15, while 44 percent are married by 18. Through the GATE program, Plan International works in Sierra Leone with families, local authorities and village chiefs to put a stop to these “traditions” and help girls affected by these practices move forward with their lives and become advocates for change. The GATE project aims to address these concerns by tackling issues related to girls’ safety and school retention. The GATE program also encourages girls and boys to form their own support networks. These groups provide a safe environment where adolescents can share experiences which help protect them from violence and discrimination.

**IMPACT:** The program covers 212 junior secondary schools in three districts throughout Sierra Leone, reaching a total of 4,240 children. Girls and boys in schools are mobilized in clubs where they discuss issues of sexual, reproductive health and rights, harmful traditional practices, including FGC, child marriage and teenage pregnancy. Mentors are trained to facilitate club sessions and youth in the clubs are working to sensitize their peers and communities on the dangers of FGC.

**DONORS:** UKAID, UNICEF  
**IMPLEMENTING PARTNERS:** Ministry of Education Science and Technology and Nine NGOs, including Plan International

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**A Story from the field**

Zainab Mambu is a 16-year-old girl who joined the Plan program in 2017. She remembers a time when she thought joining a local secret society group and undergoing the Female Genital Cutting (FGC) would be a good thing for her, because she could receive new clothing and money and respect from others in her community, particularly some of her peers who had already undergone FGC. Her parents also supported her undergoing this procedure, as her sister and her mother had done it at her age too. However, after joining the program, she learned about some of the potential negative implications of undergoing the cutting, including potentially deadly health complications, and of the importance of keeping girls at school and began to change her mind. She brought this information on the impact of FGC home to her family and her community, and although she faced resistance she was able to prevent them from making her undergo the procedure. Zainab says she is now proud to know the rights of the girl child at home, at school and within the community – and she’s excited for the future to try to help other young girls who may not yet have this same access to knowledge and information on their health and their rights as she does. She plans to continue her studies and hopes to attend university to study electrical engineering. She wants help be a driving force behind the growth and development of Sierra Leone.

After returning to Freetown, the group closed the day with a reception hosted by U.S. Ambassador Maria E. Brewer in her private residence. At the event, the delegation spoke with local NGO representatives, private sector partners and representatives from the U.S. Mission on the current development challenges in Sierra Leone and how the U.S government, in partnership with the Sierra Leone government and other key stakeholders, is working to improve opportunities for women and youth throughout the country.
CARE Village Savings and Loan Association (VSLA) Program

**LOCATION:** Freetown, Sierra Leone

**BACKGROUND:** CARE’s Village Savings and Loan Association (VSLA) model seeks to reduce poverty by empowering vulnerable communities to be financially self-sufficient through savings-led approaches. A key aspect of the VSLA program is its focus on creating economic self-reliance and empowering and enabling women to become more involved in the decision-making processes at all levels. The program strives to increase the community’s capacity in business skills and productivity. This is achieved by supporting different village savings and loan associations (VSLAs) with knowledge, materials and skills that will ensure increased engagement in viable economic activities. In the savings groups, participants also contribute to a social fund, which supports community members who need to access medical services or transportation.

**IMPACT:** As of 2016, globally there were 200,000 CARE VSLAs in 35 countries mobilizing five million members, 70 percent of whom are women. Together, these savings groups have generated more than 350 million financial transactions a year and create millions of dollars in annual savings. Their loan repayment rate is 99 percent. CARE’s VSLA model has recently been adopted by the Sierra Leonean government to be brought to scale at a national level by other key donors and implementing partners, including NGOs and community-based organizations, throughout the country.

**DONOR:** Global Affairs Canada; H&M Foundation

**IMPLEMENTING PARTNER:** CARE; Livelihood Development for Human Rights Promotion-Sierra Leone

“Coming here really reinforced my belief that women and girls are truly the cornerstones to their communities. I felt that the girls we met will be the change agents for their communities and future generations. What these girls showed me is that anyone is capable of success.”

CONGRESSMAN AMI BERA (D-CA-7)

Throughout the trip, the delegation saw firsthand the role that U.S. investments and partnerships play in empowering women and girls to lift themselves out of poverty and be catalysts for change in their families and communities. The highlight of the trip included field visits to programs in Freetown and throughout Sierra Leone’s Bombali and Port Loko districts, where the delegation sat down with women and girls in their communities to see the impact of investments in emergency health response and in programs that promote behavior change and long-term, sustainable health and development gains.

Through these program visits and meetings with local change-makers, NGO representatives, technical experts and the U.S. mission, the delegation learned about the positive reach and scope of U.S. foreign assistance in global health, sustainable development and women’s and girls’ empowerment in Sierra Leone.

**A Story from the field**

Marion Kamara – also known in her community as “Aunty Marion” is a widow and mother of four children. Her husband came down with Ebola after going to a burial service of a relative, where he unknowingly contracted the virus. Shortly after, Aunty Marion and one of her children also contracted the virus. She and her child survived but her husband passed away. As an Ebola survivor, she wanted to help so she decided to become a Community Health Worker (CHW). While volunteering as a CHW, she saw other women suffering like herself, as a widow. During her rounds as a CHW, she visited a nearby village and heard a bit about the VSLA program and wanted to learn more. She asked that they bring this same program and VSLA model to her community so that other women and families impacted by Ebola could have a chance to increase their savings and income too. So, the program was introduced to her community as well. Aunty Marion says the program “has helped me a lot” and with her savings, she has been able to educate all of her children and send three of them to universities in Freetown. Her savings also helps her afford transportation costs to the hospital to access medical treatment if ever she or one of her children or family members were to fall ill. If an emergency happens again, particularly a health emergency in her family or in her community, she feels more secure because of the VSLA social fund.
INVESTMENTS IN WOMEN AND GIRLS

CARE advocates for the U.S. government to integrate gender equality and women’s and girls’ empowerment throughout its foreign assistance programs. By placing an emphasis on empowering women and girls to exercise agency and influence through educational tools and economic opportunity, we can provide communities with the tools needed to sustainably lift themselves out of poverty. This, in turn, creates more stability and self-sufficiency at a national level and can help promote the United States’ prosperity and security around the world. This can be achieved by creating strong policies and dedicating robust resources to promote women and girls’ education and leadership, prevent child marriage, combat gender-based violence, improve access to voluntary family planning services and foster food and nutrition security.

CARE supports robust funding for international family planning and reproductive health programs. Access to modern contraceptive services has the potential to reduce the global maternal mortality rate by as much as 30 percent and Congress, as an oversight body, has a particularly important role to play in ensuring that the U.S. continues to provide evidence-based services and interventions. This includes facilitating access to a full method mix of voluntary family planning services, such as modern contraceptives and education.

CARE also strongly urges Congress and the Administration to reconsider the misguided decision to halt funds to the United Nations Population Fund (UNFPA). In 2016, UNFPA received over $69 million in funding from the U.S. government; this funding supported an array of programming from providing safe delivery services and family planning counseling to new mothers, to combatting child marriage and gender-based violence. Cutting off funding to UNFPA represents a major setback to efforts to ensure the United States meets the needs of the world’s most vulnerable populations.

THE IMPORTANCE OF U.S. LEADERSHIP

The group saw some of these proven solutions at work on this Learning Tour and witnessed the potential that is yet to be realized. The Government of Sierra Leone must prioritize maternal, newborn and child health and women’s and girls’ empowerment and education. At the same time, the international community should maintain investments and offer long-term, dependable financial support for global health programs and integrated health service delivery. Finally, the private sector must play a larger role by investing in the innovative solutions that are necessary for improving health outcomes, strengthening workforces and facilitating economic growth. Working together, these stakeholders can build smart, strategic, long-term approaches to health policies that emphasize the integration of proven solutions in Sierra Leone. Leveraging the influence and special capabilities of the United States will motivate others to do more and create lasting collaborations that could transform the lives of millions in Sierra Leone, throughout the region and around the world.

CARE believes that the U.S. cannot afford to cut the International Affairs budget at this time of historic global crises and need. U.S. foreign assistance programs save millions of lives every year, address the root causes of poverty, decrease dependency and build stronger, more resilient societies. All of this provides secondary outcomes that support our own national security and a safer world. CARE also advocates for greater accountability and transparency of these funds. Reducing funding for foreign assistance is against our national interest for a peaceful and more prosperous world.

–> POLICY RECOMMENDATIONS

When women and mothers are empowered and men and boys are engaged with the resources and knowledge necessary to stay healthy, more children will grow up properly nourished, women will be more likely to earn their own livelihoods and more families will thrive.

We are deeply grateful to the many people who generously gave of their time to make this visit to Sierra Leone a success. CARE specifically thanks the Bill and Melinda Gates Foundation for its generous financial support of the Learning Tours.

If you are interested in learning more about CARE’s Learning Tours program, please contact:

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