

ANNUAL REPORT

2014 – 2015

Medical Assistance
Sierra Leone supports
access to health care
and urgent medical
treatment for
communities and
individuals in
Sierra Leone.



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Sierra Leone

Action on maternal & child health and specialist care

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Medical Assistance Sierra Leone supports access to health care and urgent medical treatment for communities and individuals in Sierra Leone.

The organisation works with others to raise awareness of the key health and development issues facing communities in Sierra Leone – and to generate interest and support in meeting the health needs of the country.

Working with local partners in the government health service and with a range of local NGOs, Medical Assistance Sierra Leone supports training for health workers, awareness-raising around health issues, and provides a range of medication and equipment to under-resourced services.

1. INTRODUCTION

The year was dominated by the devastating Ebola crisis which affected Sierra Leone and the neighbouring countries of Liberia and Guinea. In Sierra Leone 14,122 people were diagnosed with Ebola and 3955 people lost their lives. For many months Sierra Leone came to a virtual standstill, with schools closed, many clinics and other health services suspended and a government ban on large public gatherings.

In total over 221 healthcare workers died from Ebola, including ten doctors. The health service is severely depleted by the loss of experienced and trained personnel, with over 10% of doctors lost to the disease. The outbreak highlighted the weak capacity of the nation's health systems and the intolerable conditions faced by health workers; many health workers have left the profession since the outbreak.

Ebola profoundly affected all areas of socio-economic activity and its impact will continue to be felt for a long time. As well as decimating

the number of medical doctors, the disease created thousands of orphans. Many of those who survived the disease are suffering from long term health complications. Economically the country remains isolated; many airlines suspended flights to Sierra Leone, and some have not returned.

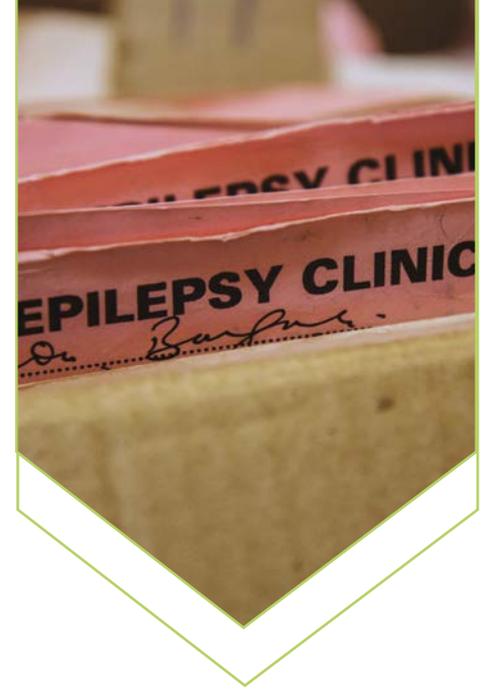
Project activities were directly affected by the Ebola outbreak, and partners worked hard and in very difficult conditions to keep as many activities going as possible. The report below details activities from October 2014 to September 2015.

2. KEY ACTIVITIES

2.1. Supporting People with Epilepsy in Sierra Leone

With funding from Comic Relief, this three year joint initiative with the Epilepsy Association of Sierra Leone is aimed at increasing understanding and support for people affected by epilepsy in order to:

- reduce the disabling stigma of the condition



- encourage more people to come forward for treatment
- enable those affected to fully participate in society.

Project delivery was affected by the Ebola crisis; with lock downs, schools closed and districts under quarantine, it was not possible to carry out all the proposed activities. We were fortunate to receive support from the Sierra Leonean community in Reading who generated funds for essential protective supplies. We rented a lock-up in Freetown for a containerload of supplies that MASL were donated by the Sierra Leonean community in Reading - protective clothing, gloves, hand gels, buckets and other necessary supplies. EASL worked to distribute these to clinics and to staff working across the districts in the latter part of 2014, as well as to local NGOs. The Sierra Leonean community in Reading raised funds to provide food for the holiday season for the families of 25 health workers who had died at Kenema Hospital, where one of our clinics is based. EASL led on this three day effort, meeting the families and ensuring that the food was distributed correctly



with the support of the Matron of Kenema Hospital.

The project was given a six month extension and the team worked hard to reach out to communities with awareness-raising and outreach sessions as soon as activities could be resumed. During the Ebola outbreak the health facilities became no-go areas for communities - particularly those health centres known or suspected to have Ebola cases (whether or not they are confirmed). Encouraging people (including lapsed patients) to attend their health centres for epilepsy treatment and medication was the key message that the Epilepsy Support Workers conveyed during the post-Ebola period. As always Epilepsy Day in March 2015 generated substantial awareness and enjoyed lots of media coverage. We again noticed the greater attendance at clinic and calls to our Helpline in the days and weeks after the March campaign.

As we approach the end of the three year project we now have over 5,000 patients on epilepsy medication. All partners are committed to working

to ensure that all those who require epilepsy treatment have access to the support and medication that they require and we are now exploring Phase Two of the programme which will be informed by an external evaluation.

2.2. Building Clinical Capacity through The National Epilepsy Hub

The National Epilepsy Hub under the leadership of Consultant Neurologist Dr Lisk, continues to progress its vital work. Training was interrupted during the Ebola crisis but resumed again in 2015. By the end of this year over 2500 health workers had participated in the Hub's epilepsy training programme. Capacity and knowledge about epilepsy has been significantly enhanced nationally and this is reflected in the number of patients who are being diagnosed and receiving treatment.

As part of the exchange visit programme between the UK and Lumley Hospital. Dr Virginia George visited for a varied programme of

observations and training. Dr Lisk with Dr George and MASL Chair, Sarah Snow, led a workshop on the epilepsy work at the Tropical Health & Education Trust Conference in Birmingham in September 2015.

Dr Lisk and the team are currently conducting the first epilepsy prevalence survey. This will give us a more accurate idea of how many people have epilepsy in Sierra Leone. The current figures that we have are between 60,000 to 120,000 and are based on global prevalence and studies in neighbouring West African countries. Whatever the total figure is found to be, there is no room for complacency; together we aim to develop further the model that we have used here to ensure that we can reach the tens of thousands of people with epilepsy who still require medication and support in Sierra Leone.

A small grant from the Epilepsy Foundation of Greater Los Angeles will enable us to continue with core support to the clinical provision whilst we look for funding to strengthen and expand the work of the Epilepsy Hub.

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‘One lesson learnt from the Ebola epidemic is that health worker protection is key to the capability of health systems to respond to health emergencies and meet routine healthcare needs. Health worker protection and support must be at the core of emergency response, preparedness and efforts to build a resilient health system. Cementing this lesson learnt into practice can be a lasting tribute to all those who lost their lives and all those who fought in the epidemic.’

World Health Organisation 2015.

Source: Health Worker Ebola Infections in Guinea, Liberia and Sierra Leone, WHO May 2015

2.3. Support to Rural Clinics and Urgent Surgeries

As part of our work with rural clinics, we continue to support selected Maternal Child Health aides (MCH) in rural posts with equipment and essential supplies. We responded to many requests for support for medical treatment over the year including hospital fees for post-delivery complications, and medication costs for TB, malaria and other diseases.

Medical Assistance Sierra Leone is committed to supporting patients with TB of the spine who require urgent surgery. We partner with Africa Surgery Inc and the Foundation of Orthopedic & Complex Spine Surgery (FOCOS) who provide urgent treatment to people suffering from severe scoliosis or Potts Disease, a debilitating TB of the spine. Operations are performed free of charge by the FOCOS surgeons but hospital costs for the long stay in Ghana, including intensive physiotherapy, need to be met. This amounts to \$10,000 (approx. £6,200) per person. There are hundreds of people (mostly children) on the list

awaiting urgent spinal surgery. In the past we have been able to support one or two patients a year and we would like to expand our support for this life-saving programme.

3. FUNDRAISING

We owe a huge thank you to those people and companies who have supported us during this year, as we have tried to respond to the many requests for assistance from partners in Sierra Leone, especially during the Ebola crisis. The Sierra Leone community in Reading - individually, as a group, through places of worship and through workplaces - generated substantial sums which enabled us to offer support when it was needed. This included helping three children with care and shelter who lost both parents and an older sibling to Ebola.

We were able to make excellent use of Ebay for Charities over this period, with over £1,000 generated from items sold on our behalf.

We continue to apply to Trusts and Foundations for ongoing support and will be having a programme of events

Our sincere thanks to everyone who has supported our work this year.

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Find us on



over the coming year to generate funds, especially for medication costs.

We hope to work again with Global Adventure Challenges to offer some exciting trips for 2015 and beyond. These are for different fitness levels, with Ben Nevis and the Sahara Desert Trek being the easiest. The website www.globaladventurechallenges.com provides additional information.

If anyone would like to run a marathon, hold a cake sale or organise a fundraising event for Medical Assistance Sierra Leone, we can help with publicity and materials.



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Tom Bradley Photography; Timur Bekir/THET 2013