When the first case of COVID-19 was discovered in Sierra Leone, NMDHR team realized that Sierra Leone had not set up contingencies for containment and management in Rural Communities, especially in Kailahun District which has 52 border crossing points with 15 legal and 37 illegal crossing points with the Republic of Guinea and Liberia. During the Ebola epidemic, the first case that spilled over to Sierra Leone was from the illegal crossing points. From April 1st – 19, NMDHR deployed 7 trained community paralegals to monitor and educate communities on WHO and government measures at illegal border crossing communities including kundowahun, Sambalu Damballa, Thailu, kormalu, Gondama, yeibema gbanyawalu, sakpeh, sepedu, sanga, and keledu Foidu in Kailahun border crossing points with the main vision to engage young, elderly people to act responsibly and spread correct information, and to help people follow the preventive measures, which had become prohibitively expensive and to assess the security mechanism put in place at the illegal border crossing points. Paralegals employ strategy such as: Communicating critical risk information to the boarder communities, sharing WHO guidelines in local dialects to counter misinformation and engaging local authorities to institute by-laws that enforce compliance.

Paralegals continue to advice communities to refrain from large public gatherings, avoid visitation to traditional herbalists when they feel unwell and to practice general hand washing with soap under running water. While many of these communities are practicing these guidelines, some of the key variables undermining their responses in terms of a major community case would be lack of water facility, unavailability of locally produced face marks, hunger and long held traditional activities. More importantly, the capacity of the DHMT to identify, isolate and care for patients early including providing optimized care for infected patients remains a serious challenge. There are no security presences at the nine (9) illegal border crossing points. The few security personnel available are village vigilantes who during the day they are at their farms and doing the night they are only at the border posts from 7-10 p.m and go to bed.
Therefore, we are pleased to share key findings from our interventions and provide recommendations to the government of Sierra Leone, donor communities and the District Health Management Team in Kailahun for action oriented programming in the district.

### Communities Response

- Community aware of the disease: 54%
- Security presence: 24%
- Bye law developed for illegal crossing and hosting of strangers: 30%
- Practicing of social distancing, handwashing, mask usage: 29%

The chart above shows the percentage of community awareness around COVID-19, effectiveness of security presence at illegal border crossing communities, community compliance and respond mechanisms in place. Our paralegals visited 9 communities, they moved from village to village raising awareness as well as identifying key challenges which communities face.
KEY FINDINGS

➢ Little or no security presence at the border crossing points especially at night. Only village vigilantes are working at the points and they are only available from 7-10 p.m during the day they go to their farms
➢ While the community is aware of the pandemic disease, their response and compliance to social distancing, regular hand washing with soap under running water and face masking are very low
➢ There are low levels of clinic attendance which we observed that people are afraid to visit the health post with fear of being tested positive.
➢ Most communities visited have instituted by-laws that discourage hosting of visitors
➢ Unavailability veronica buckets water/ borehole well. Most villages get their water source from the stream/river which is very far from the towns.
➢ Community centers/health posts/units are not prepared to respond to potential outbreak in rural communities due to lack of personal protection equipment (PPE), soap, veronica buckets etc

RECOMMENDATIONS

About 90% of rural communities based their daily livelihood on subsistence farming which requires a family to leave the house every day to fend food. We recommend that government of Sierra Leone through the Commission for Social Action provide stimulus packages to rural households especially to the poorest of poor within the illegal border crossing communities.

About 80% of households in rural communities we visited get fresh water from the river/stream, just imagine what happens when all of them drink, take bath and launder from the same source. We recommend government through its development partners to support with veronica buckets and borehole water well to be in the towns.

There are marginally no security presence at the nine (9) illegal border crossing points only village vigilantes are there during the day. We recommend that government boost their operations and provide motivation to keep them coordinated during the night.

There is now increased community awareness about the virus, but what is challenging is the low capacity of health officials to effectively respond, isolate and treat suspected patients. We recommend for a structural support to health officials working at border crossing points.

While there are 37 borders crossing points, our intervention are only able to cover 9 of the communities. Therefore, we are calling on government and donor partners to support our ongoing intervention where we would be able to reach more communities at risk of the corona virus pandemic.