

LIBERIA

PROGRESS REPORT MAY 2015

Elizabeth's Legacy of Hope

Charity Number 1141287

“My mama carries me to school on her back everyday. I can’t walk that far without a leg. I want to be able to go by myself again.”

Geronimo, twelve years old, about his daily routine

This report was written by Isabelle Trick, charity manager at Elizabeth’s Legacy of Hope. The information was provided by Rebecca Newsom and Isabelle Trick, from Elizabeth’s Legacy of Hope, Chloe Brett, from Street Child UK, and John Michael Bull and his team, from Street Child Liberia.

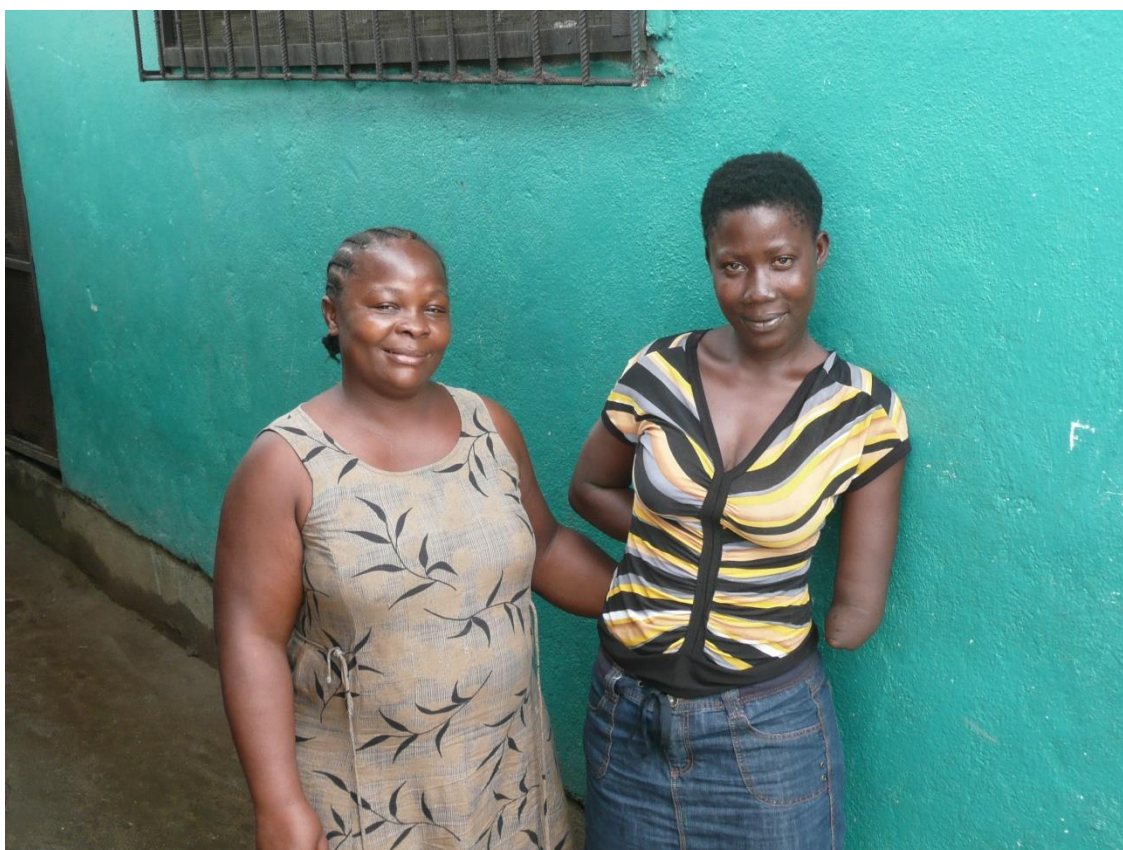
Front cover: Geronimo, age twelve, with his best friend outside Our Lady Fatima School in Liberia’s capital Monrovia.

Just over two years ago, Geronimo was injured by a falling block from an abandoned house while playing. After seeking traditional treatment, his wound became infected and his right leg had to be amputated. The amputation saved his life, but also changed it forever: his parents weren’t able to afford the prosthetic leg he needs. In order for Geronimo to stay in school, his mother carried him several miles to school and back everyday, as the way was too long and the terrain too rocky for a boy on crutches. Some Days, she couldn’t do it.

Geronimo, his parents and his best friend are very happy that he will be part of this programme and the prospect of Geronimo receiving a prosthetic leg got everyone very excited!

Holistic Support to Child Amputees and their Families in Liberia

Following the success of our work in Sierra Leone, Elizabeth's Legacy of Hope decided to replicate the same project model in Sierra Leone's neighbouring country Liberia, where great need for support exists as well. The project has been fully underway since April 2014. The following report highlights the progress made since the last progress report in September 2014.



Background

Child amputees are common in Liberia and rarely receive the medical attention or education necessary to endow them with hope and the chance to get a job and support themselves in the future. For this purpose, the project aims to:

1) Provide access to prosthetic devices and appropriate aftercare for 40 child amputees

2) Increase access to educational opportunities and support independence

3) Respond to the psychosocial needs of our beneficiaries through counselling

4) Support our beneficiaries' integration into schools and communities

Progress to Date - Overview

Elizabeth's Legacy of Hope's project work is divided into three main phases:

Phase 1: full assessment of medical, educational and social needs, and counseling and outreach to reduce stigma;

Phase 2: treatment of beneficiaries, including any operations required, measuring and fitting of prosthetics, and enrolment of beneficiaries in school;

Phase 3: ongoing physical support, monitoring of educational progress, and provision of business grants to beneficiaries' families.

Phase 1 has been completed, and important aspects of Phase 2 and Phase 3 are now successfully underway.

The project has great momentum, both in terms of strong demand from those we are supporting, and in terms of enthusiasm from staff, who are highly committed to delivering this project.

However, project implementation has inevitably been delayed in certain significant respects as a result of the deadly Ebola virus. Although Liberia has now been declared Ebola free on 9th May after 42 days without a new infection, over 4,700 people have died of the disease and the country will take a long time to recover from the social and economic impacts of the outbreak.

This has not prevented us from delivering the project however - but has, and will continue to cause various delays and changes, as schools, hospitals and other major public infrastructure have been closed or seriously restricted as part of the fight to curb the disease spreading.

Elizabeth's Legacy of Hope has provided additional [emergency funding](#) to help protect our beneficiaries and their families from this deadly illness. This was hugely successful and we are overjoyed that our beneficiaries in Liberia are safe.

To date, we have achieved the following:

School status and enrolment

90% of our beneficiaries were not enrolled in school when they joined our project. Now, as schools re-opened on 26th February, all but two of our beneficiaries are attending school.

Prosthetics and medical support

All 40 of our beneficiaries have had their medical needs assessed at the Monrovia Rehabilitation Centre – four have been identified as requiring surgery to correct the shapes of their stumps. Limb fittings will begin imminently. Due to the stress the Ebola outbreak has put on Liberia's health infrastructure, this has been the area where we have faced the greatest delays.

Counselling

Our beneficiaries are visited weekly by social workers, workshops are taking place to support the families, and significant progress has been made in helping our beneficiaries open up about the trauma they have faced.

Family Business Scheme

All our beneficiaries' families have received small business grants, alongside individual advice and training sessions. Their small businesses are now picking up as restrictions on economic activity are lifted. Due to the economic strain Ebola has put on livelihoods, the distribution of grants has been moved forward despite Phase 2 not being fully completed.

ELoH Beneficiaries

All 40 beneficiaries have been identified successfully and enrolled in the programme. They come from two main locations in Liberia and were selected as suitable for the project based on their status as amputees and their level of vulnerability.

Children were identified through a series of approaches in recognition of the cultural stigma that often leaves children with amputations hidden from view. Social workers made addresses on radio in Liberia, as well as working with community leaders to find those in most need of help.

Whilst doing outreach, the team identified a large number of amputee children in Buchanan. As a result this was picked as a strategic second location in addition to Monrovia.

Today, the project has dedicated social workers in both Monrovia and Buchanan. Further, the project also re-

ceives support from the wider team of our partner organisation Street Child's social workers and volunteers.

All social workers have received a special sensitivity training about working with children with disabilities, and they are being monitored and supported in the field by the Director of Street Child of Liberia, Michael John Bull.

All 40 beneficiaries have received a full medical assessment by the Monrovia Rehabilitation Centre (MRC) at the John F Kennedy Hospital. Four of them have been identified as needing surgery on their stumps before they can be fitted with prosthetics. This will take place as soon as possible.

With Liberia now declared Ebola free, we are hopeful that the challenges created by the outbreak can be overcome and progress made on the necessary surgeries and the fitting of prosthetics imminently.



Liberia is a country on the west coast of Africa, bordered by Sierra Leone, Guinea and Ivory Coast. It is home to just over 4 million people.

Our main locations are:

Monrovia

The capital of Liberia and home to almost 30% of the country's population

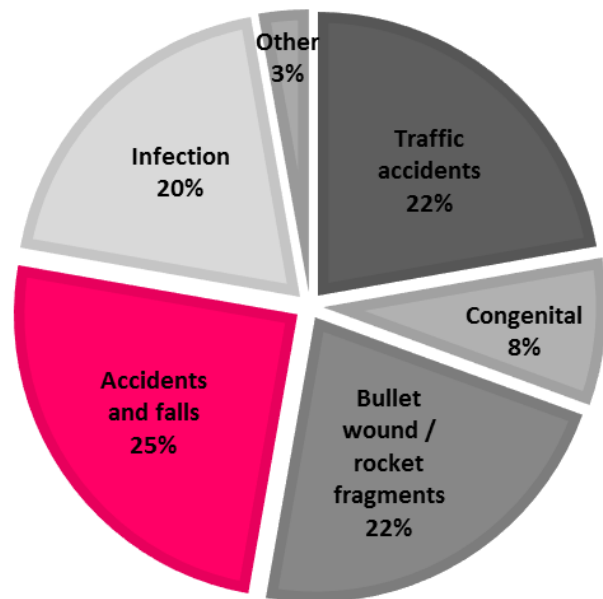
Buchanan

The third largest city in Liberia with a population of 34,000

ELOH Beneficiaries



Our beneficiaries have received their amputations for a variety of reasons ranging from violence during Liberia's civil conflict, which ended over ten years ago, to simple wounds that did not receive proper medical attention at the time they were sustained.



Moses Nuah

Moses lost his leg in 2003 after he was hit by a stray bullet following the civil war. Moses was immediately taken to a native doctor, but the delay in getting him to a hospital meant that, unfortunately, his leg could not be saved and it was amputated.

Moses was identified by our social workers whilst he was playing football with his friends in Monrovia. Although he was enrolled in school when he was little, he dropped out four years ago having only completed first grade.

Moses' family was distressed by the first visit from a social worker, as they feared

feared the attention might bring stigmatisation from their community. Through counselling they have now become increasingly accepting and supportive of the assistance. With the support from his social worker, Moses has returned to second grade now that schools have reopened

Due to the complicated nature of Moses' amputation, he is one of the four beneficiaries that will require surgery before being fitted for his prosthetic leg.

The ELOH project team is currently in discussions with the MRC team and JFK hospital as to when this will happen.

School Enrolment

UNICEF estimates that there are over half a million out of school children in Liberia. There are another 500,000 who are considered to be at a risk of dropping out.

Therefore, education for our beneficiaries is a high priority. When the programme began, only four out of 40 beneficiaries were attending school. Accordingly, one of the most significant challenges faced by social workers was to ensure that all beneficiaries were enrolled in, and attending, school at an appropriate level.

However, this task has been made all the more difficult due to the national closure of schools as a result of the Ebola virus.

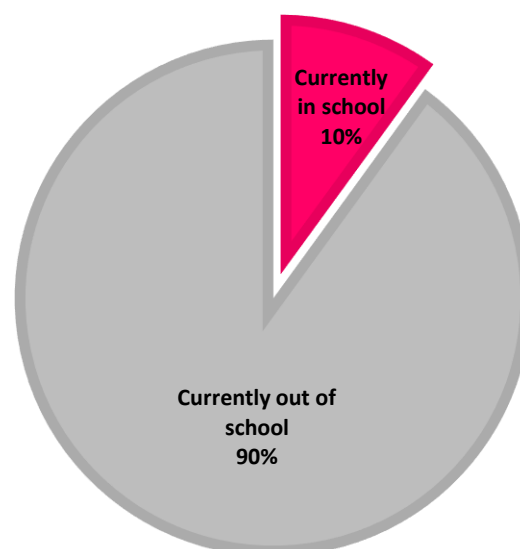
Because child amputees are already at greater risk of dropping out of school than their peers, social workers have had to work closely with families throughout the closure to ensure that, once schools reopen, all beneficiaries are ready and able to return.

Most schools have now re-opened on 16th February and all our beneficiaries' schools have been prepared and disinfected according to the protocol prescribed by the ministry of Education. They are judged safe to attend.

All of our school-aged beneficiaries are going to school with the exception of

SCHOOL STATUS

■ Currently in school ■ Currently out of school



two. Those two beneficiaries began supporting their families' livelihoods during the Ebola crisis and have gotten used to being out of school – this is something observed across Liberia and Sierra Leone in the wake of Ebola.

Our social workers are engaging specifically with those two beneficiaries and provide the extra support that is needed to get them re-engaged in school. We are confident that the combination of counselling and the business scheme to support their families will soon enable those two beneficiaries to return to school, too.

EDUCATION LEVEL

	Monrovia	Buchanan	Grand Cape Mount	Total
Day Care	2	-	-	2
Primary	16	6	-	22
Secondary	12	1	-	13
Tertiary	2	-	1	3
Total	32	7	1	40

Counselling and Emotional Support

A key element for the success of the project is the counselling and emotional support provided by social workers.

Individual Counselling

Each child meets individually with a social worker as often as needed, but at least once a week.

Group Counselling

All of the beneficiaries are invited to attend group sessions which may be bro-



ken down into age and gender specific smaller groups.

Family Counselling

The social worker may determine it is necessary to spend some time with the family, on a case-by-case basis.

After the success of the introductory counselling sessions for all beneficiaries and their parents described in our last report, three more have taken place, each with a different focus, such as trauma or disability rights. More are planned, too: in addition to trauma counselling, there will also be an emphasis on potential careers, with individuals from various professions coming in to talk to beneficiaries and their families about their future options.

Yattah Kromah

Yattah lost both of her legs after falling ill with an un-diagnosable illness several years ago. Whilst playing with her friends, Yattah began to feel unwell. She was taken to the community clinic before being transferred to the John F Kennedy Hospital. Staff at JFK were unable to identify the illness, but it became clear that both of her legs would have to be amputated.

The ordeal created a significant strain within the Kromah family, with suggestions of black magic (which is often rumoured to be the cause of anything unexplainable in Liberian culture) causing friction between members.

As a result of the trauma of losing both legs, Yattah had previously refused to speak in counselling sessions.

However, she has begun to open up after our social workers spent time working with her individually and with her family to provide a supportive and safe environment.



Family Business Scheme



Poverty is frequently identified as a barrier to a child accessing education.

After a family has worked with our social workers for a while and trust has been established, they refer the families to our family business officers. The family business officers assist families to establish a small business that can adequately support their child. They offer support to each family through training and business advice, before making grants available.

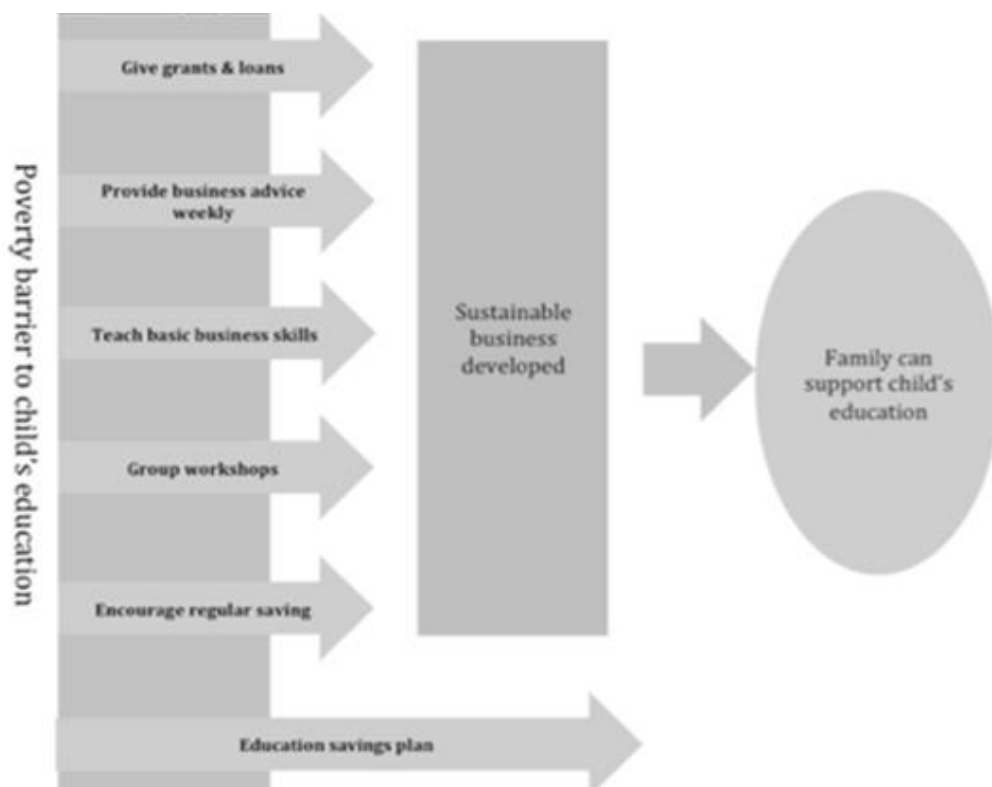
Businesses supported through the

scheme are diverse, and can be comprised of anything from tailoring, to running small local restaurants or market stalls.

A key element of the scheme is that families are encouraged to save regularly, increasing the chances that the businesses will grow and be able to provide for the entire family in the long run.

Our partner organisation Street Child has worked with hundreds of successful businesses since 2008 - years on, families previously too poor to send their children to school are now the owners of small but vibrant businesses.

All 40 beneficiary families have been enrolled in the FBS and have received their grants. In addition to individual assessments and advice, families attended a workshop to prepare them for their grants. Grants were distributed in Monrovia on 10th December and in Buchanan two days later.



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