

**Support CBUs from Mano River Union
MPTF OFFICE GENERIC FINALPROGRAMME NARRATIVE REPORT
REPORTING PERIOD: FROM February 2015 TO December 2015**

<p align="center">Programme Title & Project Number</p> <p>Programme Title : # 29 Support to the confidence building units (CBU) from Mano River Union in the national response against Ebola</p> <ul style="list-style-type: none"> Programme Number : 00094442 	<p align="center">Country, Locality(s), Priority Area(s) / Strategic Results</p> <p><i>(if applicable)</i> Country/Region: Guinea</p> <p>14 districts: Lola, Nzerekore, Yomou, Macenta, Guekedou, Kissidougou, Faranahn Kindia, Forecariah, Dubreka, Coyah, the mining and transit regions of Siguiiri, Mandiana, Kudara</p> <p>Priority area/ strategic results : Social mobilization and community engagement</p>
<p align="center">Participating Organization(s)</p> <ul style="list-style-type: none"> UNFPA UNDP UNICEF 	<p align="center">Implementing Partners</p> <ul style="list-style-type: none"> Mano River Union, Direction Nationale de la Jeunesse et Activités Socio-éducatives, Direction Nationale du transport terrestre
<p align="center">Programme/Project Cost (US\$)</p> <p>Total approved budget as per project document:</p> <p>\$ 631,300 - UNFPA</p> <p>\$ 896,020 - UNICEF</p> <p>\$ 1,308,752 - UNDP</p> <ul style="list-style-type: none"> by Agency <i>(if applicable)</i> Agency Contribution by Agency <i>(if applicable)</i> <p>Government Contribution <i>(if applicable)</i></p> <p>Other Contributions (donors) <i>(if applicable)</i></p> <p>TOTAL: \$ 2,836,072</p>	<p align="center">Programme Duration</p> <p>Overall Duration 11 months</p> <p>Start Date: 01.02.2015</p> <p>Original End Date: 31.08.2015</p> <p>Actual End date:31.12.2015</p> <p>Have agency(ies) operationally closed the Programme in its(their) system? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Expected Financial Closure date:</p>
<p align="center">Programme Assessment/Review/Mid-Term Eval.</p> <p>Evaluation Completed <input type="checkbox"/> Yes <input type="checkbox"/> No Date: dd.mm.yyyy Evaluation Report - Attached <input type="checkbox"/> Yes <input type="checkbox"/> No Date: dd.mm.yyyy</p>	<p align="center">Report Submitted By</p> <ul style="list-style-type: none"> Name: Mohamed Ayoya Title: UNCEF Representative Participating Organization (Lead): UNICEF Email address: mayoya@unicef.org

FINAL PROGRAMME REPORT FORMAT

EXECUTIVE SUMMARY

MPTF funds were used to strengthen communication and community engagement at the borders areas with Sierra Leone and Liberia affected by the MVE. The program was implemented in partnership with Mano River Union (MRU) via the Ministry of International Cooperation. The project also enabled the MRU to strengthen the capacity of four grass root NGO on Ebola awareness. MRU supported the organization of communal, regional, prefectural and national workshops gathering leaders and resource personalities in the fight against the Ebola disease. UNICEF also scaled-up social mobilization activities working closely with traditional healers, religious leaders, teachers and health workers to raise awareness on Ebola. Public awareness campaigns took place in markets, border posts and bus terminals. Mass communication activities through radios and TV spots have been carried out and large numbers of communication materials (flyers and banners) were distributed. UNICEF was active in providing training and distributing protective equipment to improve infection prevention and control measures. Thanks to these activities 33 prefectures plus five communes of Conakry and 50,000 households were reached.

I. Purpose

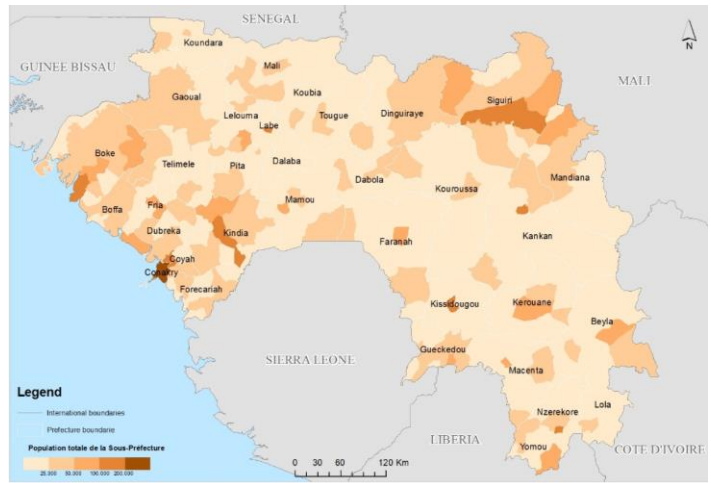
As the Ebola epidemic had no frontier and that the disease had intensely affected the three countries, the project aimed to support the Mano River Union (MRU) in coordinating initiatives in the Guinean frontier regions. At the same time the project addressed on the consequences of the Ebola virus disease (EVD) in the region: the disruption of relationships at community level. As the EVD created tensions and stops trading and relationships between borders populations. The project addressed also the discrimination and social rejections that Ebola survivors and families of deceased people suffered from. Community Watch Committees (CWC) were involved by UNICEF in responding to these issues.

II. Assessment of Programme Results

The Mano River Union (MRU) were supported in conducting advocacy and lobbying activities towards a regional integration in the fight against the Ebola epidemic. The MRU were also used as instrumental in gathering political and leadership support in promoting social cohesion, preventing political strife and coordinating efforts at parliament and cabinet levels. By promoting social cohesion the MRU were supported by UNICEF in conducting social and educational activities at community level, including sports events, social gathering and house to house visits. Thanks to the MPTF funds, UNICEF supported the MRU in organizing workshop across the country through four grass roots organizations (CENAFOD, ADIC, JCD¹ and REFMAP). Community Forums held in the 33 prefectures and the five communes of Conakry that prepare for four regional forums (Kindia, Labe, Kankan, N'Zérékoré) and one national forum in Conakry.

¹ Jeune Cellule Pour Le Développement

In August 2015 the MRU supported three grass roots organizations in organizing regional workshops on Ebola communication and awareness raising strategy across the country. All UNICEF's implementing partners received training on the content of Ebola messages as well as communication techniques. A cascade training approach was used. During the implementation of projects, UNICEF field staff conducts formative supervisions. ADIC² a national NGO partner of UNICEF were involved in order to organized one in Dabola (29 members: 17 men; 12 women) and another in Kankan (70 members: 42 men; 28 women).



CENAFOD³, a national NGO also partner of UNICEF, organized one workshop in Labé (107 participants: 73 men; 34 women). The Network of Women of the Mano River for Peace (REFMAP⁴) organized the workshop in Kindia (150 participants: 73 men; 77 women) and JDC in N'Zérékoré (90 participants: 70 men; 20 women). MRU organized itself two national workshops in Conakry on 21-23 August. One was for traditional communicators (105 participants: 75 men; 30 women) and another for traditional healers (68 participants: 48 men, 20 women).

In September and October MRU supported local NGOs (under the supervision of the four national NGOs) in organizing workshops in the 33 prefectures of Guinea and the five communes of Conakry. These mostly ran from 28 September to 11 October. These formations have allowed administrative and political leaders, religious leaders, youth and women's groups to enhance their knowledge on advocacy technics and on the EVD. At the end of these courses, the different participants engaged in communication activities in their respective communities. Post-workshop reports are being produced and will be shared when they become available.

Activities	Region	Location	Time	Supervisor
Regional workshop for sensitization on Ebola disease	Haute Guinée	Dabola	05-06/08/2015	ADIC
	Haute Guinée	Kankan	08-09/08/2015	ADIC
	Moyenne Guinée	Labé	12-13/08/2015	CENAFOD
	Basse Guinée	Kindia	12-13/08/2015	REFMAP
	Guinée Forestière	N'Zérékoré	12-13/08/2015	JCD
National workshop for traditional Communicator on Ebola protective measures	National	Conakry	21-23/08/2015	MRU
National workshop for traditional healers on Ebola protective measures	National	Conakry	21-23/08/2015	MRU
Prefectural and communal workshops on the EVD	National	33 prefectures	28-29/09/2015	Local NGOs supervised

² <http://adicguinee.org/presentation/>

³ <https://cenafodmguinee.wordpress.com/a-propos/>

⁴ <http://www.marwopnet.org/historique.htm>

		& 5 communes of Conakry		by the four NGOs
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To prevent the spread of Ebola, UNICEF also helped secure Guinea's borders through the installation of checkpoints. Along with other donors as World Bank, MPTF funding partly financed the equipping of checkpoints in the following 5 southern prefectures:

- Bordering with Sierra Leone: Guéckédou and Macenta;
- Bordering with Liberia: Macenta, Nzérékoré and Lola;
- Bordering with Ivory Coast: Lola and Beyla.

Equipment for each checkpoint included hand-washing kits, computer and printer. This activity was realized in close collaboration with GOHA, a national businessmen's organization.

In the prefecture of Fria, one of the remaining prefectures where Ebola continues to persist in late 2015, 680 religious and 100 traditional healers were trained on key Ebola messages in partnership with Health Regional Direction of Santé Boké. In Lower Guinea, a region where community resistance has been a major problem, UNICEF in partnership with the Ministry of Cooperation undertook door-to-door visits to about 50,000 households, informing them about key Ebola prevention measures.

For strengthening the monitoring contacts and alert notification at Community level, the CWV (committee watch village) were set up in all active prefectures by UNICEF through in partnership, with the National Council of Organizations of Civil Society Guinean (CNOSCG).

When the reluctance was at its highest level, UNICEF and its partners implemented 23 rural community radio reaching up to 8.9 million Guinean with key sensitization messages across 26 prefectures and 5 health districts in Conakry. It was observed that ownership of the population has been stronger, the participation of women and children has increased. The contact was more direct with people, programs were broadcast in local languages. The rural population was itself animator and listeners with games, contests, debates and testimony calls. People could then put a face to a voice, that of a sage or a known member of the community. Messages are key but messengers too: credible, well-known people spoke to their peers succinctly with community words. Thanks to MPTF funds, UNICEF could equip and supported 23 mobile community radios.



Mobile community radio

To overcome the mistrust and fear in the MVE, UNICEF setup, trained and monitored 2,487 Villages Watch Committees (VWC) in communities thanks to MPTF and other donors previews funding. With the current funding, UNICEF could provide stipends to VWC. The composition of these committees gave confidence to the community and facilitate their accession to the response. The idea came from the Forest Region that was facing violent resistances from population. In a part of the city of Macenta organized a self-defence units against the epidemic responders. This brigade was turned into the first local watch committee supporting response teams. VWC are composed of 5 to 10 persons locally chosen among and by the community with 1

Representative of Youth, 1 Representative of Women, 1 Representative of Religious leaders, 1 Representative of Traditional leader, 1 Representative of secret society group, 1 Community Health Worker, 1 Representative of “Survivors”, 1 Representative of influential leaders (e.g. teachers). The VWCs are working for their community upon the volunteering principle. UNICEF with funds of donors supported VWCs in meetings costs and management, communication costs and management, in providing monitoring methods training. VWCs today are able to inform partners and donors on their community needs and they are able to monitor mobilization for vaccination campaigns, birth registration, and school enrolment.

In Guinea UNICEF, as the co-chair of the National Social Mobilization Working Groups, supported the coordination of social mobilization and community engagement from central (national coordination and national level campaigns) and decentralized level (development of local micro plans, coordination and monitoring of social mobilization activities). UNICEF is grateful to MPTF for supporting the organization in this challenging period of time. Although there are still key challenges ahead: ongoing needs of EVD survivors; growing medical knowledge that survivors may continue to carry the virus for long periods of time; presenting balanced information about residual risk without stigmatizing EVD survivors; and responding rapidly to any recurrent cases in 2016.

III. Lessons learned

- The work of the social mobilization pillar served to increase the population's trust in health services, which was an important aim. This was confirmed by regularly small-scale surveys conducted to measure the impact of social mobilization efforts.
- A high number of social mobilization actors were taking initiatives which are sometimes ad hoc, not sufficiently coordinated and sometime of not appropriate quality. However, significant improvements are being made in coordinating partners by UNICEF through an improved monitoring system that informs on coverage and quality of the interventions in order to stop transmission as well as ensuring a minimal standard in the quality of the social mobilization activities.
- The risk of failing to improve the effectiveness of coordination for social mobilization activities is that national coverage will not be achieved and that implementing partners will not be able to decide their priorities on an evidence base nor to quickly adapt their strategies to the evolving situation. The risk of low quality social mobilization initiative is directly translated in low adoption of preventive behaviors, low collaboration and even violence towards the health providers.
- UNICEF has shown its comparative advantage (relationship with government at all levels, strong partnership with multilateral and non-governmental organizations, technical lead on social mobilization) and of the critical role that social mobilization pillars are supposed to play in terms of national strategic planning, coordination, monitoring and production of communication material, UNICEF considers that strengthening coordination and capacities of the social mobilization pillars is the best possible strategic focus in social mobilization.

IV. Proposed next steps:

The recovery strategy should be framed within the imperative of accelerating the development of remote border areas. This would reduce the vulnerabilities that expose the three countries to disasters that spiral out of control. Regarding border areas, the countries should take the following steps:

- Review the services and facilities in the border regions and enhance the provision of health and other basic services;
- Support the establishment of a regional integrated disease surveillance network in West Africa and the continent, building upon and linking with existing institutions and regional cooperation arrangements;
- Promote and modernize markets and private sector activities in shared border areas;
- Develop public policy knowledge-sharing, capacity development and cooperation across national institutions in the areas of employment, corporate social responsibility, child protection, social protection and other sectors;
- Examine current plans of the Mano River Union relating to borders in order to raise priority levels for implementation;
- Define and strengthen coordination mechanisms between national and regional institutions in order to strengthen synergies and complementarity in implementing recovery strategies. This also includes stronger coordination between the African Union, ECOWAS and the Mano River Union, all of which have played a strong role in the response and will be closely associated with recovery;
- Provide support in West Africa for the establishment and expansion of a regional disease surveillance network, including at the animal-human interface, in order to strengthen cooperation among neighboring countries for the control of cross-border disease outbreaks at their source. This is part of supporting Ebola-affected countries to strengthen their essential public health infrastructure and service delivery platforms.

ii) Indicator Based Performance Assessment:

Using the **Programme Results Framework from the Project Document / AWP**s - provide details of the achievement of indicators at both the output and outcome level in the table below. Where it has not been possible to collect data on indicators, clear explanation should be given explaining why.

Project Proposal Title: Support to the confidence building units (CBU) from Mano River Union in the national response against Ebola						
Strategic Objective to which the project contributed	SO4: Preserve stability					
MCA [11]	Social Mobilization and Community Engagement					
Output Indicators	Geographical Area	Target⁵	Budget	Final Achievements	Means of verification	Responsible Organization(s).
Result 1: Improved CBU (Confidence Building Units) are in place and functioning	14 districts including: Frontiers districts: Lola, Nzérékoré, Yomou, Macenta, Gueckedou, Kissidougou, Faranah, Kindia, Forecariah, Dubreka and Coyah Mining and transit regions of Siguiri, Mandiana and Koundara	30	461,200	33	MRU partner report	ADIC, CENAFOD, REFMAP, JDC under MRU supervision
Result 2: Improve Knowledge of Ebola prevention			775,502			
% of targeted reticence localities that accept Ebola prevention activities	Conakry, Kindia, Fria, Telemélé, Mamou, Dalaba, Pita, Lelouma, Dabola, Kouroussa, Siguiri	75%		100%	CNOSG implementation report	CNOSCG
Result 3: Improved social cohesion in EVD affected areas			405,343			
# of social activities (including sports, gatherings, village meetings) including EVD sensitization	Conakry, Kindia, Fria, Telemélé, Mamou, Dalaba, Pita, Lelouma, Dabola, Kouroussa, Siguiri, Coyah, Dubreka	60		60	CNOSG implementation report	CNOSCG
# of radio debates held at rural and prefectural radios including EVD sensitization	Nzérékoré, Yomou, Macenta, Gueckedou, Kissidougou, Faranah, Forecariah, Dubreka and Coyah,	200		158	MRU partner report	Radio Rurale
MCA [11]	Social Mobilization and Community Engagement					
Effect Indicators	Geographical Area (where the project directly operated)	Baseline⁶ In the exact area of operation	Target	Final Achievements	Means of verification	Responsible Organization(s)
Social cohesion and community engagement is improved in Guinea	Idem (see result 1)	3 reports of riots and reject of safe and dignified burials	0	0	Implementing partners reports	UNICEF, UNFPA, MRU and UNDP

⁵ Assuming a ZERO Baseline

⁶ If data is not available, please explain how it will be collected.

Report reviewed by (*MPTF M&E Officer to review and sign the final programme report*)

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Signature: