Background
More than 1.4 million people live in Montserrado County, home of the Liberian capital, Monrovia. When the rampant outbreak started in March of 2014, the response struggled to bring down to zero the number of cases. As a result, in January 2015, as the number of EVD cases across Liberia were declining, they were stagnating in Montserrado County. Over the course of 12 months, 5,396 cases of Ebola were detected and a total of 2,300 people died in Montserrat County alone. The danger of letting the disease spread to the poorest parts of Montserrat without addressing community resistance, misconceptions and secret burial practices, led to very well-orchestrated interventions involving multiple actors at all levels of the County to stem the epidemic.

In December 2014, UNICEF engaged the mayors of the two major municipalities: Paynesville and Monrovia. The partnership between UNICEF and the mayors was the first of its kind in the EVD response and has proven extremely successful in raising awareness among different segments of the population not previously involved, which contributed to eventually getting down to zero cases in Montserrat county.

The Strategy
In December 2014, the Ministry of Health and Social Welfare (MOH) launched a community engagement strategy specific to Montserrat response. UNICEF’s role was to facilitate the coordination of the community engagement interventions bringing in the mayors of Paynesville and Monrovia to work directly with the MOH’s structure in the communities. The three month “Operation Stop Ebola” was launched before Christmas 2014. The UNICEF team coordinated among the two structures (the MOH and the Ministry of Internal Affairs) to tackle the last EVD cases, and to maximize the use of different networks engaging them and building on the partnerships already existing.

Leadership in an urban setting
The overall strategy was to focus social mobilization efforts on intensifying community engagement to:
- Improve EVD prevention practices including early care seeking behaviour;
- Detect suspected EVD cases for early referral;
- Identify families and orphans in need of support services (i.e. psychological, food supplies for quarantined households).

The Challenges
When designing the interventions for “Operation Stop Ebola”, the C4D team faced numerous challenges:
- Montserrat’s urban context “offered” higher risks (population density…) than other counties.
- Cultural and religious practices around dead body handling and washing were a constant source of new infections.
- Fearing stigmatisation, few families reported their dead relatives and few funeral homes fully cooperated with the authorities.
- Exposed to months of Ebola interventions, communities felt complacent toward EVD messages and displayed signs of “fatigue”.
- There was little to no coordination among partners working in Montserrat and this led to duplication of efforts and resources.
- Most resources were channelled through the MOH under the auspices of the M-IMS (Montserrat Incident Management System).

Activities

"Leaving the Politics aside"
- Clara Doe Mvogo, Mayor of Monrovia

During the entire campaign, UNICEF acted as a liaison, coordinating efforts, providing technical assistance in the form of human resources, building the capacity of partners when necessary and also providing needed supplies and financial support when appropriate.
Activities revolved around 4 components:

**Mapping of partners**

The number of actors involved in the EVD response and the confusion this brought to the affected communities required a complete mapping of local and international organizations in Montserrado County. With UNICEF’s support, this process held organizations present in the county accountable for their interventions and resulted in a stocktaking of more than 2600 mobilizers and communicators.

**Community outreach**

UNICEF supported, activated and incentivized the GCHV (General Community Health Volunteer) network to conduct social mobilization and community engagement. UNICEF brought up the number of GCHVs to 569 in January 2015 to cover the entire county.

“Not a stone left unturned”  
- Clara Doe Mvogo, Mayor of Monrovia

UNICEF involved the mayors in the response ensuring that elected and appointed community officials at the sector, zone, ward and block levels were also fully engaged with the MOH county health structure. Community leaders, led by doing and went house to house engaging the communities in Ebola prevention; holding community forum with their constituents; identifying needs for support. Traditional and mass media reinforced community-led interventions addressing rumors and misconceptions around EVD, through radio shows and broadcasts, traditional dancing and theatre.

**Monitoring**

To establish accountability lines, the community engagement pillar co-chaired by UNICEF along side the MOH set up a daily monitoring system involving all layers of the community leadership and focusing on identifying pockets of resistance, suspected cases and targeted interventions in communities at risk. The weekly M-IMS meetings were a venue to monitor progress and address gaps in the response. The mayors became co-chairs of the M-IMS which facilitated coordination down to the community level.

**Capacity Building**

The UNICEF team provided financial and technical support to the city corporations of Paynesville and Monrovia and trained a total of 990 commissioners and community leaders on prevention practices such as washing, safe burials, identifying sick cases and isolation, calling for help.

**Lessons Learned**

- Empowering and training local leadership at all levels, without bringing outsiders to the communities to build trust and find the best suited local solution.
- Tailoring messages based on the context ensure that information is relevant to the community when identify actions to prevent transmission.
- Decentralizing the response: working with every level of the community leadership, involving elected and non-elected leaders.
- Collaborating and coordinating interventions with local, international, governmental and non-governmental partners working on the ground.
- Reducing stigma through the support provided by the local leaders and community groups to quarantined families.
- Building community surveillance and resilience by imparting knowledge to empowering communities.

---

**“Three Month Operation Stop Ebola” - Results**

<table>
<thead>
<tr>
<th>Process Indicators - Montserrado</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of District Mobiliser Coordinators (DMCs) deployed</td>
<td>8</td>
</tr>
<tr>
<td>Number of County Mobiliser Coordinators (CMCs) deployed</td>
<td>6</td>
</tr>
<tr>
<td>Number of gCHVs deployed</td>
<td>579</td>
</tr>
<tr>
<td>Number of community leaders trained</td>
<td>990</td>
</tr>
<tr>
<td>Number of national/local radio stations in the county</td>
<td>23</td>
</tr>
<tr>
<td>Number of radio stations broadcasting Ebola messages</td>
<td>23</td>
</tr>
<tr>
<td>Number of households reached</td>
<td>227,116</td>
</tr>
<tr>
<td>Number of people (men, women, children) reached through community discussions/meetings</td>
<td>510,290</td>
</tr>
</tbody>
</table>

---

To learn more, contact:

C4DHQ@unicef.org

UNICEF Liberia: Monrovia@unicef.org

**COMMUNICATION FOR DEVELOPMENT**

Summarizing the impact of communication in responding to the Ebola epidemic