

NEERWAYÄ PROJECT AID AND SOCIAL COMMUNITY PROTECTION FACING COVID 19



★Women's right to sexual and reproductive health

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1. BACKGROUND AND JUSTIFICATION

As of January 29, 2020, a total of 7,818 confirmed cases have been recorded in China, including 170 deaths. Faced with this development, the WHO declared the epidemic a public health emergency of international scope on January 30, 2020. The latest data as of March 31, 2020 showed that more than 803,650 people were infected worldwide with 39,033 death.

In Burkina Faso, the first cases have been recorded since March 09, 2020. As of April 13, 2020, nine (09) regions out of 13, seventeen (17) health districts out of 70 have been affected with a total of 515 confirmed cases (SitRep 46). The pandemic affected 313 men and 202 women with 28 deaths still on this date.

Genit Care Africa (GCA) takes the global COVID-19 pandemic very seriously and is committed to ensuring the health and safety of its members, volunteers, staff and the public. We are also very concerned about the safety and well-being of health professionals in Burkina who are at the forefront of this global public health crisis.

GCA is an association working in priority areas:

- disease prevention;
- human rights;
- female leadership;
- community development.

GCA commends the measures to combat COVID 19 that the government of Burkina-Faso has put in place (Declaration of the state of health alert in Burkina Faso on March 26, 2020; Quarantine for a period of two Weeks starting March 27, 2020 in all cities affected by the COVID-19 epidemic in Burkina Faso (cities with at least one case). Land and air borders closed; Curfew from 7 p.m. to 5 a.m. (confinement partial to prevent the spread of the virus).

The COVID 19 resilience measures are also to be welcomed (Renewal of the flame of solidarity; stimulation of scientific research; stimulation of national production: masks, hydro-alcoholic solution / gel, chloroquine; measures to support the blow dealt with economy, particularly for vulnerable groups; attempt to develop telework).

In view of the epidemiological evolution of the pandemic, characterized by a growing trend in the number of infected persons and a spatial expansion of the affected areas, demonstrating community transmission with multiple clusters, vigorous interventions are essential. Also epidemiological studies have corroborated the probability of large-scale contamination of the population if effective interventions are not implemented.

Thus, it appeared appropriate for GCA to revise its action plan in the face of the new challenges created by COVID-19. We have considerably revised our action plan in order to devote the majority of our organizational resources to the collection / production and sharing of COVID-19 resources while continuing to provide sexual and reproductive health resources to our members and the populations of our intervention area (Cyties of Ouagadougou and Ziniaré).

2. SITUATION ANALYSIS

The situation analysis concerns the essential links for disease surveillance at community level. It highlights the capacities of the community in the following areas:

- prevention and control of COVID-19 infections;
- risk communication and community engagement;
- the consequences of the disease;
- the coordination

The strengths and any difficulties and / or shortcomings at each level are also analyzed.

2.1 Infection prevention and control (IPC)

Infections prevention and control are essential determinants to take into account in the fight against COVID-19. Thanks to the support of JHPIEGO and Expertise France, documents were produced and cascade training was carried out on infection prevention and control for the benefit of health workers working in Medical Centers with Surgical Antenna (CMA) and in the CHR / CHU.

An evaluation of the country's capacities in terms of Prevention and Control against Illness (PCI) reveals the following observations:

Strengths

- the existence of a functional national PCI program;
- the existence of a sorting system that can be applied to IRA in health facilities;
- training health workers on PCI measures applied to respiratory infections;
- the existence of a system for collecting and disposing of contaminated medical waste;
- ➤ the existence of a Prevention and Control Committee for Infections Associated with Care (PCIAS) in certain health facilities;
- at community level, raising awareness among the population (written messages and audio-visual press, including in national languages, has paid off (wearing masks to avoid spreading postillions, hand hygiene/hand washing with water and with soap or use of gel/hydro alcoholic solution and avoid greeting/Physical distancing: The Burkinabè population accepted the suppression of cults in mosques, churches, baptism ceremonies, funerals, weddings, school closings, closure big markets in big cities...

Weaknesses

- ➤ insufficient PCI inputs: masks, gowns, gloves (for biomedical waste management), products for hand hygiene, handwashing devices;
- > the insufficient application of standard precautions by the community;
- insufficient garbage cans for the waste produced by protective masks.

2.2 Risk communication and community engagement

Communication is essential in the implementation of the COVID-19 prevention and response plan. This communication must make it possible to reach all targets: administrative authorities, local elected officials, customary and religious leaders, associations and partners, the community and health actors.

In Burkina Faso, the media environment is developed at national, regional and community level with audio-visual, written and online press. In addition to the media channel, other channels such as institutional and socio-cultural channels are available.

Media and non-media communication activities have already been carried out thanks to the efforts of the Ministry of Health: radio and TV programs in French and in national languages, TV and radio firmware, information meeting for the hosts of the interactive programs.

However, the implementation of communication activities in the framework of disease control remains weak. Indeed, it appears from the inadequacies in the planning and the implementation of the communication actions with in particular:

- absence of a national risk communication plan;
- insufficient communication skills in crisis situations;
- unsuitability of messages for different targets;
- inadequacy in the use of message distribution channels;
- inadequacy in the implementation of risk communication strategies (social mobilization, advocacy and Communication for Behavior Change (CCC).

This situation contributes to a poor knowledge of populations on behavioral risk factors. Certain risk behaviors can promote the transmission of COVID-19 infection. We can cite among others:

- insufficient compliance with standards for the protection and control of infection among health workers;
- promiscuity, poor individual and collective hygiene practices;
- eating and cooking habits;
- the non-use of garbage cans (some people, after using their masks throw them anywhere and some children therefore do not hesitate to collect them to play with or to be also "in fashion").
- > cultural funeral practices.

The poor knowledge of populations on behavioral risk factors contributes to a poor knowledge of populations on measures to combat COVID-19.

2.3 The consequences of the disease

2 .3. 1 Psychosocial consequences: Psychic trauma

The general climate is permeated by the risk of losing one's life, with a propensity for the development of disorders linked to traumatic stress and its procession of anxious, depressive, dissociative symptoms (deteriorated interpersonal relationship, sadness, psychosis, anxiety, anxiety, obsession ...). The term "mental health and psychosocial support" (MHPSS) is used in the Inter-Agency Standing Committee (CPI) Guidelines for MHPSS in Emergencies to describe "any type of local or external support aimed at protecting or promoting psychosocial well-being and / or preventing or treating mental disorders". Global humanitarian action brings together under the expression SMSPS a wide range of actors who intervene in emergency situations such as the COVID-19 outbreak, in particular those who work from the biological and socio-cultural angles in a health, social, educational and community. This expression "underlines the need to put in place the appropriate support systems based on a wide variety of complementary approaches".

2 .3.2 Economic crisis: Worsening poverty

In Burkina Faso, we know that most of the deaths in Covid 19 are men. In most of the bereaved families, there are widows and orphans with deepening poverty. The informal sector is also hard hit. Markets closing and yards dealt a severe economy's blow, so much so that the sellers of condiments gathered to be able to support themselves with their pittance (continued exposure to the disease). According to OXFAM, in the countries of the South, 500,000,000 people risk falling into an average or even extreme poverty, which risks destroying development policies for 10 to 30 years.

2.4 The coordination

In addition to the National Committee for the Management of Epidemics (CNGE) for rapid operationalization in the face of this international emergency, coordination has been put in place bringing together public health experts, CORUS stakeholders, clinicians, technical partners and financial. This coordination has to its credit the activities and teams supervision. This coordination is responsible for:

- provide guidelines and strategies to combat this epidemic;
- coordinate the implementation of the action plan at national level, including public information, feedback and education activities;
- coordinate the support of the various partners in the fight against the epidemic;
- mobilize the human, material and financial resources essential to the fight against the epidemic;
- prepare and disseminate the end of epidemic report;
- assess the management of the epidemic.

It begins since the presidency of Faso through the Prime Minister, the central, intermediate and peripheral level.

There is a lack of community involvement in coordinating activities.

3. PRIORITY PROBLEMS

Problem 1: Infection prevention and control measures are not satisfactory. This is explained by an insufficiency of individual and collective protection measures against COVID-19 and a insufficiency in the management of biomedical wastes.

Problem 2: Communication capacities are below our expectations. This could be explained by the absence of a risk communication plan, the insufficient skills of actors in risk communication, supports and the use of communication channels.

Problem 3: The disease is responsible for a large and brutal fatality. The disease leads to a deep emotional injury (mental trauma) in people who have barely escaped death. This results in stress (a set of physiological and psychological reactions of the human organism when faced with a threat or an unforeseen situation). The disease also causes deepening poverty.

4. VISION OF THE NEERWAYA PROJECT

Ensure access to COVID19 resources for all, especially the most vulnerable.

5. OBJECTIVES OF THE NEERWAYA PROJECT

5.1. Main objective

Improve community capacities in preparedness and response to the COVID-19 epidemic.

5.2. Specific objectives

The objectives retained for implementation of the plan are:

- promote infection prevention and control measures in the community;
- ensure effective communication on risks;
- > ensuring the resilience of the community;
- deploy mental health activities and psychosocial support SMSPS
- strengthen coordination for the preparation and response to a COVID-19 epidemic.

6. STRATEGIES

Collection / production and sharing of COVID-19 resources while continuing to provide sexual and reproductive health resources to our members and to the populations in our area of intervention (Cyties of Ouagadougou and Ziniaré).

6.1 MOVEMENT "100% WEARING OF MASKS BY BURKINABE AND USE OF BINS, GENIT CARE AFRICA IS COMMITTED!"

It has been shown that wearing a mask is one of the best preventions against COVID19. According to the latest news, an American report hypothesizes that the virus could be transmitted simply by speaking or breathing (roughly in the air) and not only by droplets given the rapid spread ...

In Burkina Faso, we have almost succeeded in washing hands... However, many people still do not wear a mask.

6.2 "THE COMMUNITY RESILIENCE AT COVID 19, GENIT CARE AFRICA AND THE ORATORY DEBATES ARE INVOLVED!"



6 .2.1 Ensure effective communication on Covid's risks 19

- Communication through social networks: Innovative approach through oratorical debates on a simple platform (tele-debates given the context). Question / answers proposing solutions to this pandemic / analysis of the solutions proposed by a jury. In the form of a competition (3 categories: video, audio, writing / writing). 5 languages including 3 national languages (Moore, Dioula, Fulfulde). Video sharing for more likes.
- Strengthening the capacities of young people and women in advocacy on a webinar for the mobilization of resources to deal with the lack of health infrastructure, advocacy for an assistance plan for small and medium-sized enterprises on a simple platform. This webinar will allow us to connect young people and women who can come up with solutions quickly enough to save lives in the face of this uncontrollable external factor.

6.2.2 Provide support for post traumatic shock management

- Cov Covid 19 income-generating activities: above-ground cultivation (faced with the lack of a fridge to store vegetables, production of fresh vegetables at home, avoiding going to the market every day and exposing yourself to Covid 19;
- ➤ Taking into account the psychosocial and mental health aspects of the Covid-19 epidemic: Maintaining social contact with people likely to be confined by SMS or radio telephone; Relay essential factual messages in the community, especially to people who do not use social networks; Provide care and support to people who have been separated from their families and the people who help them

7. ACTIVITIES OPERATIONAL PLANNING

Target	Activity	Ap.	May	June	July	In Charge	Financial support	Technical partner	Cost (CFA)	Cheking
	Acquire chlorine solution for disinfection and decontamination					Génit Care			4 000 000	
	acquire personal protection kits								950 000	
Acquisition of medicotechnical equipment	Acquire bins for the safe disposal of emitted waste (used masks, gloves ect.)								3 625 000	
очания	Upgrade 50 community workers on infection prevention and control measures.								3 120 000	
	Acquire hydroalcoholic solutions								2 000 000	
	Acquire hand washing and disinfecting devices for public places								6 000 000	

	Acquire infection prevention posters for public places				850 000	
	Ensure the secure management of biomedical waste (inputs, collection, secure transport, incineration) in				3 900 000	
	Acquire 10,000 masks, gloves, pairs of boots				2 200 000	
	Total 1				26 645 000)
	Provide orientation to 30 community leaders on COVID-19 prevention measures				1 960 000	
Ensure effective risk communicati on	Raise awareness through the organization of an oratorical debate on the management of covid19 waste on an interactive platform				5 850 000	
	Carry out TV shows / interviews on COVID-19				1 200 000	

Organize 100 community sensitization on prevention measures against coronavirus				1 375 000	
Broadcast messages on the COVID-19 in the form of a moving strip on the site				7 500 000	
Equip IT and perinformatics equipment GCA and BOD (2 desktop computers, 2 laptops, 2 datashow, 2 printers, 1 high capacity photocopier,				5 500 000	
Acquire a broadband connection and sat channel subscription for GCA and BOD				1 440 000	
Spread awareness messages through megaphones at the community level				2 250 000	
Total 2				27 075 000	

CROWD FUNDING for access to financial products and their management				500 000	
Create pastoral activities for the benefit of 50 young girls and boys who are not in school				5 250 000	
Train 50 girls and women in eight sessions in accounting management of incomegenerating activities				2 230 000	
Train 50 girls and women in soilless cultivation				2 230 000	
Provide 200 women with food				4 000 000	
Total 3				14 210 000	
Grand Total				67 930 000	

8. DETAILED BUDGET

Promote infection prevention and control measures in the community.

Activity 1	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)		
Acquire chlorine solution for disinfection and decontamination						
purchase of chlorine tablets	2000	1	2 000	4 000 000		
Sub total				4 000 000		
Activity 2	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)		
Acquire personal protection kits						
protective gloves	2000	1	25	50 000		
awareness blouse	100	1	3 000	300 000		
protective boots	100	1	6 000	600 000		
Sub total				950 000		

Activity 3	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Acquire garbage cans for the safe dis	sposal of er	mitted waste	(used masks, gl	oves ect.)
garbage cans	15	1	15 000	225 000
protective gloves	1000	1	2 500	2 500 000
awareness blouse	100	1	3 000	300 000
protective boots	100	1	6 000	600 000
Sub total				3 625 000

Activity 4	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Upgrade 50 community workers on in	nfection pre	evention and	control measure	es.
agent fuels	50	3	10 000	1 500 000
facilitators	6	4	25 000	600 000
meal	60	3	3 500	630 000
administrators	1	3	10 000	30 000
secretary	1	3	10 000	30 000
waitress	2	3	5 000	30 000
room rental	1	6	50 000	300 000
Sub total				3 120 000

Activity 5	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)			
Acquire hydroalcoholic solutions	Acquire hydroalcoholic solutions						
Hydroalcoholic solutions	1000	1	2 000	2 000 000			
Sub total				2 000 000			

Activity 6	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)			
Acquire hand washing and disinfection	Acquire hand washing and disinfecting devices for public places						
Devices 200 1 30 000 6 000 000							
Sub total				6 000 000			

Activity 7	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Acquire infection prevention posters	for public	olaces		
poster request to the ministry	1	1	-	-
multiplication of posters	1000	1	200	200 000
distribution in markets and streets	5	10	10 000	500 000
supervisors	2	5	15 000	150 000
Sub total				850 000

Activity 8	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Ensure the secure management o incineration)	f biomedic	al waste (ir	nputs, collection	n, secure transport,
collection	10	30	5 000	1 500 000
fuel for collectors	10	30	2 500	750 000
bag for collections	40	30	1 000	1 200 000
supervisors	2	15	15 000	450 000
Sub total				3 900 000

Activity 9	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Acquire 10,000 masks, gloves, pairs of boots					
masks	10000	1	200	2 000 000	
distribution	2	15	2 500	75 000	
fuel for distribution	2	15	2 500	75 000	
supervisors	2	5	5 000	50 000	
Sub total				2 200 000	

Total promotion of preventive measures

26 645 000

Ensure effective risk communication

Activity 10	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)		
Provide orientation to 30 community	Provide orientation to 30 community leaders on COVID-19 prevention measures					
agent fuels	30	3	10 000	900 000		
facilitators	4	4	25 000	400 000		
meal	40	3	3 500	420 000		
administrators	1	3	10 000	30 000		
secretary	1	3	10 000	30 000		
agents	2	3	5 000	30 000		
Room rental	1	3	50 000	150 000		
Sub total				1 960 000		

Activity 11	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Raise awareness through the organization of an oratorical debate on the management of covid19 waste on an interactive platform					
platform communicators	10	3	10 000	300 000	
first price	1	1	100 000	100 000	
second prize	1	1	75 000	75 000	
third prize	1	1	50 000	50 000	
fourth prize	1	1	25 000	25 000	
room rental	1	1	50 000	50 000	
lunch break	150	1	35 000	5 250 000	
Sub total				5 850 000	

Activity 12	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Carry out TV shows / interviews on COVID-19					
radio charges	5	1	200 000	1 000 000	
interviews	2	1	100 000	200 000	
Sub total				1 200 000	

Activity 13	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Organize 100 community sensitizations on prevention measures against coronavirus					
volunteers	100	2	5 000	1 000 000	
supervision	25	2	7 500	375 000	
Sub total				1 375 000	

Activity 14	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Broadcast messages on the COVID-19 in the form of a moving strip on the site					
site rental	5	30	50 000	7 500 000	
Sub total				7 500 000	

Activity 15	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Equip with computer equipment an datashow, 2 printers, 1 high capacity			and DBO (2 de	sktops, 2 laptops, 2
full desktop computers	2	1	800 000	1 600 000
laptop	2	1	350 000	700 000
data show	2	1	400 000	800 000
printer / scanner / photocopy	2	1	500 000	1 000 000
giant photocopier	1	1	1 400 000	1 400 000
Sub total				5 500 000

Activity 16	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Acquire a broadband connection and CanalSat subscription for GCA and BOD					
broadband connection	1	12	100 000	1 200 000	
CanalSat subscription	1	12	20 000	240 000	
Sub total				1 440 000	
Activity 17	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Spread awareness messages through	Spread awareness messages through megaphones at the community level				
buying megaphones	5	1	50 000	250 000	
support for communicators	10	20	10 000	2 000 000	
Sub total				2 250 000	

Total communication 27 075 000

AGR and community support (psycho-traumatic shock management)

Activity 18	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
CROWD FUNDING : access to financial products and management of these products					
Crowd Funding	500	1	1 000	500 000	
Sub total				500 000	

Activity 19	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Create pastoral activities for the benefit of 50 young girls and boys who are not in school					
Purchase of goats (three per person)	50	3	35 000	5 250 000	
Sub total				5 250 000	

Activity 20	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Train 50 girls and women in eight sessions in accounting management of income-generating activities					
participants	25	3	5 000	375 000	
trainers	4	4	25 000	400 000	
meal	30	3	3 500	315 000	
teaching materials	25	1	1 000	25 000	
Sub total				1 115 000	
Sub total 2 sessions				2 230 000	

Activity 21	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)	
Train 50 girls and women in soilless cultivation					
participants	25	3	5 000	375 000	
trainers	4	4	25 000	400 000	
meal	30	3	3 500	315 000	
teaching materials	25	1	1 000	25 000	
Sub total				1 115 000	
Sub total 2 sessions				2 230 000	

Activity 22	Quantity	Numbers of days	Unit Cost (CFA)	Total Cost (CFA)
Provide 200 women with food				

Sub total				4 000 000
rice	200	1	20 000	4 000 000

Total AGR 14 210 000

PLAN GRAND TOTAL

67 930 000

CONCLUSION

The NEERWAYA project is a social assistance and protection program for the community facing the covid 19. We will identify the main sources of support (families, social groups, religious leaders, and traditional healers) with whom we will collaborate and move forward.

Local actors, especially community leaders who have community's confidence and respect, sometimes already act as front-line providers by providing psychosocial support to communities on the issues of death, end of life, grief and loss related to the epidemic. This program will support these actors by providing them with protective equipment, knowledge of COVID-19, developing their SMSPS (psychological first aid) skills and explaining to them how (and where) to refer people who might need help. more specialized help.

This project will allow us to connect young people and women who will be able to propose solutions quickly enough to save lives in the face of this uncontrollable external factor.

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ACRONYMS AND ABBREVIATIONS

GCA : Genit Care Africa

> DBO : Oratory Debates

SMSPS : Mental health and psychosocial support

CPI : Inter-Agency Standing Committee