



The International Soroptimist – Article for September 2008 edition

The latest UNDP Human Development Report (2007-08) "Fighting climate change: human solidarity in a divided world" is sobering reading. Climate change is likely to have major implications for human health in the 21st century. You probably won't be surprised to hear that it is poor people in poor countries – those who are least equipped to respond – who will bear the brunt of setbacks as health threats change.

This struck a chord as I remembered the women and children in Project SIerra's programmes, and turned to thinking of how climate and the seasons impact so directly on their access to good health, economic well-being and education.

As you read this, the rainy season in Sierra Leone will have been underway for some three months. As the dry season progresses (November to May) every surface becomes covered with dust that clouds up when disturbed, water for crops and domestic use diminishes – these present challenges to health. The coming of rain at the right time in the farming cycle is a vital lifeline for crop growth and food security for the coming year. Poor harvests will reduce income and financial security, which in turn reduces access to education and healthcare.

However, weeks of rain brings other challenges, especially for the poorest communities and the poorest people within them. Female (particularly grandmother) headed households are most vulnerable to inadequate housing to provide even basic protection against the elements. Travelling, difficult at the best of times in rural areas with little or no regular vehicle access, becomes much harder as roads turn to mud. This further reduces access to health facilities.

How are you as Soroptimists making a positive difference to the lives and life chances of people in these situations? Though Project SIerra you certainly are – by helping to build supportive family and community units, as the corner-stone of care for their most vulnerable children.

Project SIerra's Integrated Child and Family programme is tailor-made to the needs of each family and child. For some, this has included house repairs, such as rebuilding the roof and walls of a family's mud and thatch house to protect against the worst effects of the rains; a first line of defence against some illnesses of the rainy season. Neighbours have helped, by providing labour or helping to source sticks and mud bricks.

Experience has shown that communities do want to become involved in supporting their vulnerable families.

Groundnut, oil palm and cassava seedlings are provided to families from farm resource centres in Makeni, Kamakwie and Mattru. Over 2000 oil palm seedlings will be distributed for planting during August in Kamakwie, giving the prospect of income generation and greater economic self-reliance.

Progress towards reducing the incidence and impact of major causes of chronic ill-health and child mortality (malnutrition, acute respiratory infections, diarrhoea, malaria) requires action on many levels. Project SIerra focuses on some: basic healthcare provision for women and children on the programmes, together with personal and environmental health education for direct beneficiaries and the wider community are key elements of the project. This can include helping communities within Project SIerra's reach to access targeted campaigns led by UN or other bodies (such as for birth registration, immunisation, or bed-net distribution). The on-going close cooperation with families and communities enables our local partners to reinforce messages on the benefits such services.

By helping the most vulnerable children to grow up within sustainable, supportive families, Project SIerra is giving them greater opportunity to reach their individual potential. It is also helping to build the cohesion and resilience of communities to meet major challenges that they face.

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