

# Mobile Cinema in Sierra Leone

Mid-term review of the mobile cinema used in the cholera  
response

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## Introduction

The Sierra Leone Red Cross Society, with the support of the British Red Cross beneficiary communications delegate, has launched a mobile cinema in Sierra Leone as part of the cholera response. The cinema event includes a short animated film about the impact of cholera on a village and how the community tackle it, supported by hygiene promotion activities and education on cholera prevention and treatment.

The cinema is delivered by a core team of two volunteers who travel to a new district each week. In each district the Branch Health Officer, Health Coaches and local volunteers support the cinema, gradually taking over delivery of the event. At the end of the week, the cinema team provide the branch with their own mini-cinema kit so they can continue the mobile cinema after the central team moves on to a new district.

Volunteers conduct a pre-test before the film asking four key questions:

- 1 What causes cholera?
- 2 How do you make water safe to drink?
- 3 What are the issues in your community that increase the risk of cholera?
- 4 Where do you go to the toilet if there are no latrines?

This is followed by a hand washing demonstration and a song giving the recipe for home-made oral rehydration solution (SSS). The film is then shown and the presenters ask participants what they have learnt from the film. A post test revisits the above four questions, asking people if they can suggest solutions to the issues in their community. Finally the film is shown for a second time and the community is given the chance to ask questions (see annexe 1 for cinema programme).

## Highlights

The cinema has now visited 12 schools and 24 communities and more than 13,000 people have attended across five districts (see annexe 2 for full list and breakdown of attendance).

- > 20% increase in the number of people who could name 2 or more correct causes of cholera following the cinema event
- > 22% increase in the number of people who could list two methods of preventing cholera – from 49% to 71%
- > 21% increase in the number of people who could name two or more times they should wash their hands

- > All 36 communities say the bush, river, plastic bag or open is a safe place to go to the toilet if there is no latrine – this drops to just 2 communities after the cinema event
- > 70% of people can list filtering and boiling as a way to make water safe to drink post cinema
- > The most common cholera threats raised by communities are lack of latrines, no clean water and a dirty environment – but almost all communities gave proactive solutions to these problems post cinema
- > 77% of people gave a correct recipe for SSS after the cinema

## Monitoring

The cinema team has been monitoring the impact of the cinema in 2 key ways:

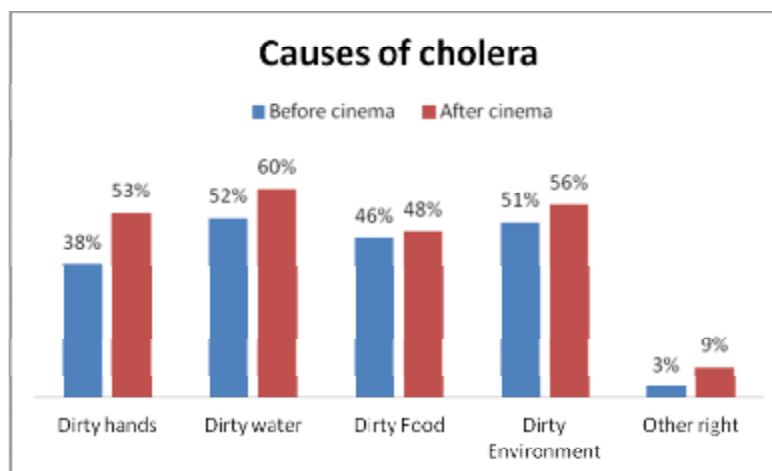
- 5 A volunteer fills in a review sheet at each cinema event, which records the communities' questions and responses to the film
- 6 Volunteers undertake formal monitoring each week in one community. They ask six open questions to 30 randomly selected people before and a different 30 people after the event. Respondents must answer the questions unprompted. Based on an average crowd of 300 people, this gives a 70% confidence rating in the results. 91 pre-surveys were completed and 90 post-surveys. (see annexe 3 for the monitoring form)

Unfortunately the monitoring for Kambia cannot be included in the overall results as the pre and post questionnaires were carried out in two different communities with a different level of base knowledge.

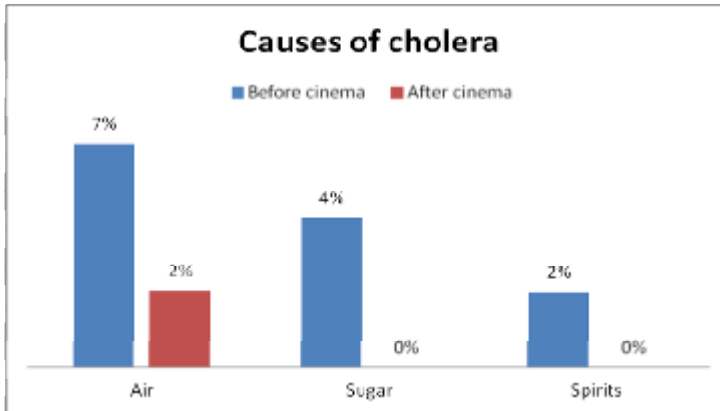
## Results

### What causes cholera?

- > Overall, knowledge of the causes of cholera is relatively high, with 49% of people able to name 2 or more correct answers. This increased by 20% to 69% after the cinema event



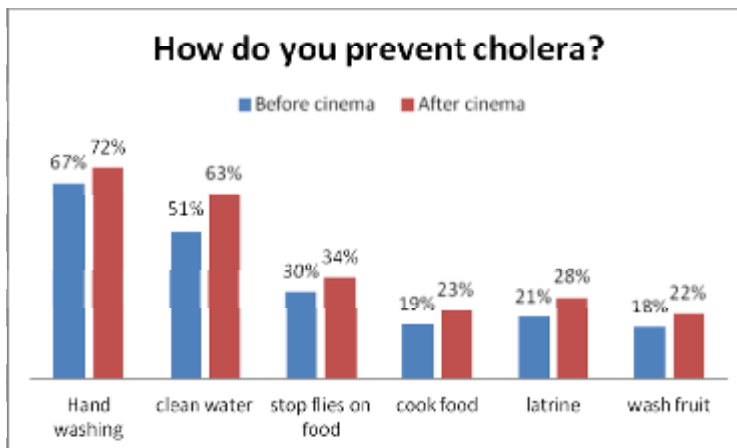
- > Only 32% were able to name three or more correct causes of cholera, this increased to 37% after the cinema



- > The biggest change is in the number of people who list 'dirty hands' as a cause of cholera, which increased by 15% - from 38% to 53%
- > Another positive step is a reduction in the number of incorrect answers given, which reduced from 3% to 1%

In the pre-test section of the show, the most common answer to the question 'what causes cholera?' was 'dirt', with many able to specify 'dirty hands', 'dirty food' or 'dirty water'. Post event the answers become much more specific and showed a much deeper understanding of how food, water or the environment becomes dirty. For example, answers evolved to 'going to the toilet in the rivers', 'not washing your hands with soap and water' or 'not cooking your food properly'. The level of knowledge in schools was higher than in communities.

### How do you prevent cholera?

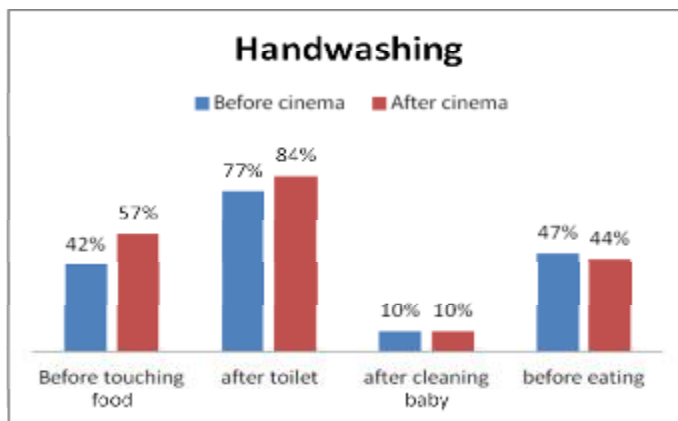


- > Nearly half of people were able to list two or more correct ways to prevent cholera. This increased to 71% of people post event
- > Only 24% of people could name 3 or more correct ways to prevent cholera – this increased by 9% post cinema

- > The biggest change in knowledge was on drinking clean water which showed a 13% increase.

### When do you wash your hands?

- > The number of people who could name two or more times they should wash their hands increased by more than a fifth from 49 – 71%

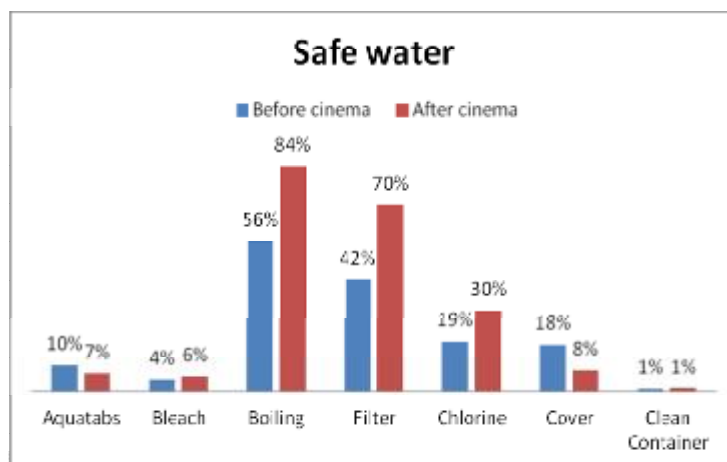


- > Only 10% of people answered 'after cleaning a baby's bottom – but this could be because it is only relevant to mothers
- > Only 5% of people could name all four key times to wash your hands

The results from the nightly review sheets mirror the above, many people also answered 'when they are dirty or after playing with dirt'.

### How can you make water safe to drink?

- > The most common answer was boiling and filtering and this is also the biggest area of improvement, with a 28% increase in the number of people giving one of these answers.
- > Chlorine was the third most popular answer and rose by more than a fifth after the film
- > The film highlights filtering & boiling and chlorine as the main ways to make water safe so it makes sense that this is represented in the monitoring

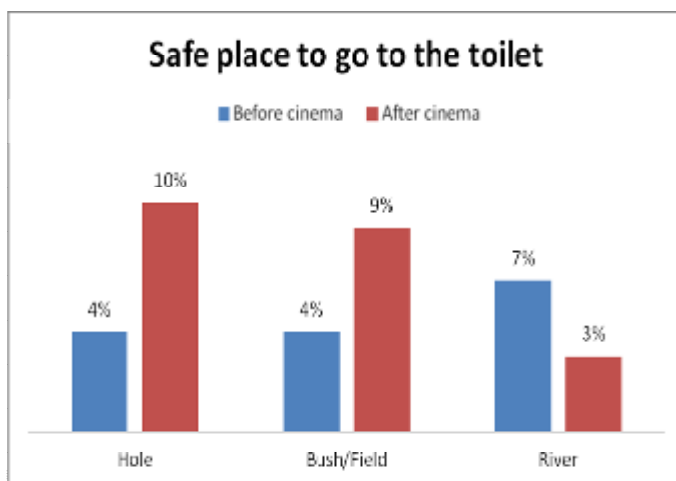


This is consistent with results from the show reviews, although using a clean container and covering the water were much more commonly mentioned during the show. After the film, answers become more detailed with people able to say how long water needs to be boiled for or the exact instructions for using chlorine – e.g. waiting for 30 minutes before drinking. In Kambia, participants mentioned camphor as a method for treating water, and they also mentioned chlorine more frequently here than elsewhere.

### Where is a safe place to go to the toilet?

- > The most common answer was latrine at 88% both pre and post event
- > The next closest answer was river and plastic bag, both low at 7%

- > The biggest change post event was the percentage who said dig a hole and bury it (up 6%) and use the river (down 4%)



There is a much greater change pre and post event for this topic in the cinema review sheets. The most common answers to this question pre cinema were bush, river, in the open – e.g. the gutters or back garden, and plastic bag. Less than a quarter of schools or communities suggested digging a hole and burying faeces as a safe option. Post cinema, the answer to this question changes dramatically – only 2 communities still gave the river as an option and all other schools and communities said they should either build latrines or dig a hole and bury it. Additionally answers became much more detailed with people stating that latrines should be 30m from the waterside.

There are several explanations for this sea change in views:

- 1 The majority of people don't have access to latrines in Sierra Leone and cholera is a water-borne disease, so the cinema team focussed especially on educating people about safe places to defecate. This approach is clearly working.
- 2 The question asked of the audience differs from the monitoring form - it asks 'if you don't have a latrine, where is a safe place to go to the toilet?' removing latrine as an answer
- 3 During the show the audience are encouraged to give more than one answer, whereas during the 1:1 monitoring survey respondents are not pushed to give alternative answers.

### How do you make home-made ORS?

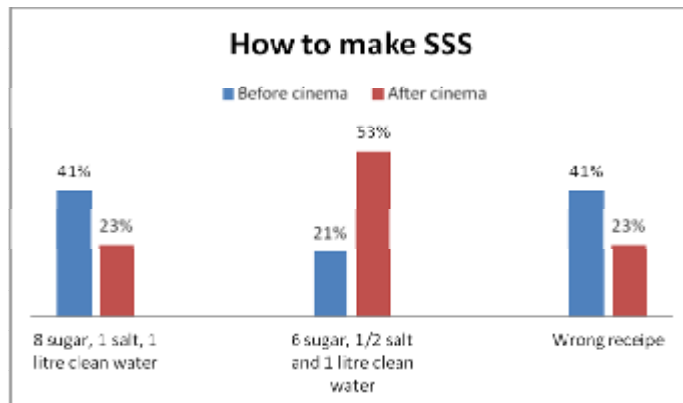
There are currently two home-made ORS or SSS recipes in Sierra Leone. The traditional recipe is 8 level teaspoons of sugar and 1 level teaspoon of salt with 3 pints of clean water. The new WHO guidelines, and the film shown at the cinema, recommend 6 teaspoons of sugar and ½ teaspoon of salt with 3 pints of clean water. Following the showing of the film the cinema presenters address this issue and explain that while both recipes work, the new recipe is better – however, both recipes are deemed correct for the

purpose of monitoring. A song is also used to help people remember the correct measurements.

> Encouragingly, 62% of people could give at least one correct recipe for SSS before the cinema, however 41% got the recipe wrong or didn't know it at all

> Post cinema this improves with just 23% getting it wrong and more than three quarters able to give either of the two correct recipes

> However there was a major shift to the new recipe post cinema with 53% able to give it correctly – an increase of 32%



## What are the issues in your community that cause cholera?

The most common issues raised by schools and communities were lack of latrines, no access to safe drinking water and a dirty environment. Other issues raised included market women not covering the food they sell, cholera not being taken seriously, a lack of medical facilities, and lack of education and information on cholera.

In general all schools and communities suggested community-led solutions to these problems, such as working together to build latrines, keep the environment clean by digging pits or providing bins for rubbish and educating each other about safe practices such as not going to the toilet in the river. Only a small number of communities looked to the Government or Red Cross to help them.

## What did you learn from the film?

People were clearly able to repeat back the messages they heard in the film, for example when to wash their hands or how to make water safe for drinking. Around a quarter of communities and schools also reported back that the film taught them they must share information with others – the film features a young boy who takes on the role of educating his village.

## Questions from the community

Questions from the communities and schools were very varied, but in general showed an increased knowledge and desire for a deeper understanding of cholera. Questions centred on what is cholera and how is it transmitted, for example; 'where does cholera really come from?', 'how do water and flies transmit it?' or 'who can get it?' Also common were questions about treatment, such as 'what are the signs and symptoms of cholera?',

'how long does it last for?' and 'what is the impact on a baby?' Several communities also asked about how to care for someone with cholera without catching it yourself.

## Conclusions & recommendations

There is a good base knowledge of the most common messages relating to cholera and 60% of people knew the recipe for SSS. However if you push beyond the basic key messages, such as hand washing and latrine use, the level of knowledge drops considerably. While 48% of people could give dirty food as a cause of cholera, only 23% and 22% of people respectively could list cooking food fully or peeling fruits and vegetables as a means of preventing cholera.

Additionally, although 88% of people knew a latrine was a safe place to defecate, hardly any could offer digging a hole and burying it as a safe alternative. The majority suggested the river, bush or in a plastic bag indicating that they don't comprehend the reasons behind safe practices like latrine use – e.g. keeping faeces out of people's way.

This view is supported by the questions asked by communities and schools at the end of the show, which show a clear desire for an increased understanding of what cholera is, how it transmits or where it comes from.

Based on this, the key recommendations for the next four weeks of cinema are:

- > Continue to cover the key prevention measures, but give more prioritisation to less well known methods particularly around the safe management of food and hand washing after cleaning a baby's bottom
- > Spend more time explaining the 'why' behind the key messages, making sure cinema presenters take time to clearly explain what cholera is and how the bacteria is spread by different means. Through explaining why dirty hands can spread cholera, people will instinctively understand when they need to wash them. The first two questions in the pre-test will change to 'What is cholera?' and 'How do you stop cholera?'
- > Include more information on the signs, symptoms and treatment of cholera in the health section of the show
- > The post test should ask people 'How is cholera spread?' to test people's knowledge of transmission routes
- > Include a question in the post test on food safety
- > Ensure that each cinema event review is shared with the Branch Health Office and Programme Administrator the following day to allow for follow-up on key issues.

The cinema will now continue for another four weeks visiting areas not part of the IFRC cholera response. Monitoring and review will continue and another report prepared in November.