

# Building capacity in Sierra Leone

by Lina Abirafeh

**Capacity building is a catchy phrase, suggesting ideals of national ownership and strengthened local institutions. But how can we avoid it being a North-driven, patronising and unidirectional transfer of knowledge?**

Proponents of capacity building often assume there is no capacity to start with and that only after a North-South transfer of know-how can locals stand on their own feet. Few development agencies understand the level of effort and commitment it takes to effectively build capacity and the contextualised understanding that must underlie any effort to add to pre-existing capacity. Agencies are often tempted by the prospect of donor dollars for capacity building, yet ignore the real work that has to be done once funding has been secured.

Given the vogue for capacity building, the International Rescue Committee's decision to employ a consultant to advise on building local capacity to address gender-based violence (GBV) was hardly surprising. What was a pleasant surprise, however, when I was offered the job was their decision to start by undertaking an extensive capacity assessment. This may seem commonsense but, sadly, is all too often overlooked.

## The Rainbo Initiative

During Sierra Leone's 11-year civil war – which ended in 2001 – there

was a high incidence of sexual assault against women and young girls. Return of peace has not meant that women and girls are safe from sexual assault. GBV remains a major public health and social problem. In support of efforts to sustainably address GBV and to bolster the recovering state's ability to do so, the International Rescue Committee (IRC) has partnered with the Sierra Leonean government to support sexual assault referral centres – locally referred to as 'Rainbo' Centres – and to holistically address GBV issues in the country. This includes not only prevention and response to sexual violence but also advocacy, legal reform, data collection and – of course – capacity building to provide full support to survivors of GBV.

The Rainbo initiative has sought to:

- respond to the multiple needs of survivors of sexual assault through direct service delivery
- raise awareness and educate the community and all partners about sexual assault and other forms of gender-based violence

- encourage structural reforms in the health and legal systems to improve survivors' access to the existing justice system
- advocate for and support longer-term efforts for legislative reform aiming to enhance and protect women's rights.

Centres in the capital, Freetown, and the cities of Kenema and Kono provide free medical and psychosocial and legal support to around a thousand survivors of sexual violence. Most recent new clients have sought support because they have been raped. The majority are six- to fifteen-year-old girls. The youngest was a two-month-old girl raped by a neighbour.

The Rainbo Initiative is an innovation in the field of sexual assault response services. More innovative still is the plan to embed the Rainbo Initiative in national structures, allowing the government to take ownership of the initiative.

Given the success of this initiative and the scale of ongoing needs throughout Sierra Leone, IRC has been determined to help build the capacity of national institutions to assume leadership. Scaling up Rainbo will require strengthened government institutions, a national sexual assault network, joint advocacy and shared learning. IRC has sought to create a multi-stakeholder body

comprised of government and civil society. In November 2006 a multi-agency National GBV Programme Coordination Committee (N-GBV-C) was set up, bringing together five ministries (health, social welfare, gender and children's affairs, justice and education), human rights organisations and several

and community development. Respondents rank their abilities on a sliding scale from 'expert' to 'in clear need of capacity building'. We then proceed to carry out long interviews using open-ended questions. Participants can use this opportunity to speak freely about the issues, strengths and challenges of forging

"The Rainbo Centre is ours. We are Sierra Leonean. So we are concerned about the existence of the Centre. We want it to continue."

Ministry of Social Welfare staff in Kenema



international NGOs. The N-GBV-C is seeking to develop new sustainable methods of integrating sexual assault referral services and activities into the public health care system and other national structures. The N-GBV-C ensures that the complex needs of sexual assault survivors are adequately addressed by promoting long-term ownership of project activities and gradually assuming managerial responsibility for the Rainbo Initiative.

### Assessing national capacity

Assessments began with a capacity-building questionnaire offering respondents – government and civil society partners – the chance to speak freely about their strengths and weaknesses. Respondents assess themselves as well as the organisations they represent. We have used an observational checklist to examine both technical and organisational capacity – including motivation, environment, training, monitoring and evaluation, strategic planning, understanding of GBV, case management, referral protocols, vicarious trauma, formal and traditional legal systems

a national approach. The fifth and final phase of assessment tests actual organisational and technical skills in order to provide evidence of their actual skill and on which to design capacity-building programmes.

IRC realises that capacity building is a major commitment requiring long-term investment. The programme is expected to last for five years, at which point the N-GBV-C will have assumed leadership not only of the Rainbo Initiative but also of a larger GBV programme serving all of Sierra Leone. IRC is pioneering a GBV certification programme which could lead to a nationally recognised qualification in Sexual Assault Prevention and Response. The programme will include core competencies required to meet survivors' many needs with compassion, respect and relevant medical, legal or psychosocial help. This includes training in case management, HIV/AIDS, referral pathways, psychosocial support, basic medical needs and much more. The training required is rigorous and detailed – and needs to be extremely well administered. This will also serve as a model for other West African states.

### Beyond a buzzword?

Capacity building is not a box to be ticked in order to satisfy a donor but a long-term process that requires significant resources. Most of all, it entails a willingness to let go, trusting that those whose capacity is being strengthened have the ability to be flexible and to continue to make a difference long after international agencies and their funds have moved elsewhere. GBV is a crucial arena for capacity building, and IRC and its dedicated local staff are well placed to ensure that survivors receive the highest standard of service. The Rainbo Initiative is complemented by other aspects of IRC's Sierra Leone GBV programme dealing with domestic violence, forced marriage and other forms of violence against both women and men.

In Sierra Leone, as elsewhere, capacity building for GBV support must combine organisational and technical skills and address the attitudes and beliefs that could help or hinder service provision. I have worked to help build capacity of local actors in Afghanistan, Morocco and Bangladesh. The approach taken by IRC in Sierra Leone is the most robust and well-planned I have come across. To use a Krio saying: *Plenti Wok Fo Do* (There is a lot of work to do) – and we stand to learn just as much as we have to offer.

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*For further information about Rainbo, see Amie-Tejan Kellah, 'Establishing services in post-conflict Sierra Leone', FMR27 [www.fmreview.org/FMRpdfs/FMR27/35.pdf](http://www.fmreview.org/FMRpdfs/FMR27/35.pdf)*