Urban burial practices

1. Funeral practices in Freetown are varied with differences between typical Muslim and Christian practices. Muslims typically bury the body the same day, or the day after, the death, whereas Christians might wait for up to several weeks while arrangements are made. Muslims normally bury bodies in a shroud, whereas Christians use a coffin. The bodies are typically prepared for burial (washed) by family members.

2. Funerals typically consist of a vigil (for Christians) the night before the burial, followed by a religious service in a Church or Mosque during the day, then a parade through the streets to a public cemetery. There are often gatherings in the subsequent days, where food is cooked and eaten communally. After 40 days there is another significant ceremony. Some residents of Freetown are also buried in their family villages upcountry (most residents of Freetown identify a village as their ‘home’ village).

3. The physical burying work in many cemeteries in Freetown is performed by undertakers who are informally attached to cemeteries. Payment is made through a collection after the ceremony.

4. Funerals are important social occasions, which people value attending highly and travel long distances for at significant personal expense. They facilitate acute expressions of grief during the ceremony surrounded by more celebratory elements.

5. Since the Ebola outbreak many in Freetown have been cautious about attending funerals because of the health risk. While some are resistant to the authorities performing burials, others have abandoned bodies in the street, in part to avoid their households being quarantined or infected.

Care seeking behaviour and Ebola

1. During times of illness people often stay with close family who care for them. Sometimes this involves medium and long distance travel, such as when those living upcountry come to the city for better access to medication and healthcare, or city dwellers travel across town to family compounds. Routine illnesses, such as Malaria, have similar symptoms as Ebola, so they do not necessarily cause as much alarm as might be expected.

2. When people get sick they often inform their friends, family and neighbours, who show sympathy, provide financial support, medicine, food, and prayer.
People are now wary about publicizing their illness as they might be considered to have Ebola, and reported to the authorities. This also intensifies the desire to be with close family who can provide protection. Those who are more socially distant, or have strained relations, are more likely to report someone to the authorities than close family.

3. Although medical doctors are generally highly respected, and people in Freetown are normally keen to seek medical attention (at pharmacies and hospitals) if resources permit (people often borrow money from friends/family), there is now a widespread distrust of hospitals and Ebola treatment facilities. People fear being wrongly diagnosed with Ebola, and either harmed by the treatment process or worry that they will catch Ebola in hospital. In part this attitude stems from a distrust of the motivations and the capabilities of the government during the crisis, who many feel willingly benefit at the expense of ordinary people.

4. Many continue to buy medication from local pharmacies, but are forced to in underhand ways now that they many are officially banned from operating.

5. There is a general willingness for individuals to adopt multiple methods in regard to care and wellbeing. Medical assistance often goes hand in hand with prayer and religious practices, and consultations with herbalists (traditional healers).

**How can practices be influenced by external organisations?**

1. Monetary (and other) compensation could play a major role in influencing care and burial practices. During the crisis many people’s income and welfare has been severely affected. Many feel aggrieved that they do not see evidence of the aid money that they hear about. Compensation (even if relatively small) could allow people to live in a more dignified way, and help people support their families and neighbours, which might encourage and rationalise in locally meaningful ways adjustments to practices and attitudes.

2. If burials are performed by the government (or other authorities), families could still be consulted and included. For example, the bodies could be buried in local cemeteries (alongside other family members). This could allow for future gatherings and ceremonies at the gravesite. The authorities could also provide some funds/food for the family to cook and eat communally, which is an important ceremonial feature of funerals.

3. Religious channels can be effective avenues to influence care and burial practices. Prayer has played a major role in people’s response to the Ebola outbreak. Many conceive of Ebola in religious terms, such as ‘God’s punishment for corruption’, which requires a religious response. However, there is some flexibility about what this can entail. Religious leaders are highly respected members of society, including between Muslims and Christians, who have a broadly harmonious relationship in Sierra Leone. Weekly sermons at Mosques
(Friday) and Church (Sunday) are well attended, and preachers are often well educated and open-minded, and regularly deal with contemporary issues and wellbeing in their teaching and sermons. Additionally, people regularly make major lifestyle adjustments for religious reasons, such as weeks/months of fasting (for both Christians and Muslims) and abstinence from sexual activity.

4. Trust of authorities is an important factor. While many people are proud of being law-abiding and respectful to authorities, there is a widespread mistrust of the motivations of the police and army, who are often badly paid and gain an income through bribes and fines. Some are worried and puzzled at the arrival of the UK military. However, people generally conceive of the motivations of international organisations and NGOs as being benevolent, even if they acknowledge that things become messy and political on the ground. Doctors and nurses are also respected.