

**CDC Ebola Response Oral History Project**

The Reminiscences of

Pewee S. Flomoku

David J. Sencer CDC Museum

Centers for Disease Control and Prevention

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Pewee S. Flomoku

Interviewed by Samuel Robson  
March 9<sup>th</sup>, 2017  
Monrovia, Liberia  
Interview 1 of 1

CDC Ebola Response Oral History Project

Q: This is Sam Robson. It is March 9<sup>th</sup>, 2017, and I'm here at the Carter Center offices with Mr. Pewee Flomoku. Thank you so much for joining me.

Flomoku: Thank you, Sam, and welcome to Liberia.

Q: Thank you so much. We're here to talk about the CDC [United States Centers for Disease Control and Prevention]—well, it's part of the CDC Ebola Response Oral History Project, but not here to talk about the CDC, but to talk about Mr. Flomoku's own personal experiences with part of the Ebola epidemic. Would you mind first just saying, "my name is," and then pronouncing your full name for me?

Flomoku: Okay, thank you again. My name is Pewee S. Flomoku. I'm a Liberian and I have been here all through the war. Originally, I'm a photojournalist by profession. My background is in journalism. I covered the Liberian Civil War and I stayed here and worked along with the United Nations Mission in Liberia in the section that had to do with disarmament. I was part of the outreach program, we were the ones going out and talking to the fighters, preparing them to let them know that they would be disarming in a few months' time. That was part of my work, to design the program that we would reach

out to them, we would let them know that the arms that they'd been carrying for up to thirteen to fourteen years would be taken away from them, and they would be transformed; their lives would be transformed, there would be a program to help transform their lives. They would be integrated into the community, there would be a truth and reconciliation process, people would go and talk about what happened during the crisis, and there would be the issue of truth-telling and forgiveness. That was part of my work, and then I worked up to 2004 when I formally joined the Carter Center election team in Liberia.

Q: Thank you. If you were to give someone just a short summary, just a few sentences long, about your role in the Ebola response, what would you tell them?

Flomoku: My role was to mobilize our partners. The partners who I work with are the women, the youth, and the traditional leaders. Our main focus was with traditional leaders. My role as head of the Carter Center team was to help work along with other partners to design specific interventions, and what we were focused on from our side, as the Carter Center team, was to use our platform. Over the years, we've been able to work with traditional leaders to build confidence, trust and confidence, and that's what we used during Ebola because if you see from the start of the outbreak, there were issues of trust. Citizens did not trust the government and so they refused to listen to messages from the government, even though they knew that people from their community were infected, people were dying, but they refused to accept the message from the government that something was wrong. That's because over the years there's been a big gap of trust

between the governed and those that had authority. We over the years have worked with the chiefs. We've worked with them by telling them the truth—we've been able to bring information to them. We've been able to live up to when we made promises to them. So that trust helped us to engage. I brought that to the table at the level of decision makers when we went to these many sessions that took many, many days to decide what to do, why people were dying. We were simply just trying to tell them, this is the target group; these are the people we should work with. Instead of coming and spending one week to develop messages, go and tell the messages—before you can release the message, people are dying. Let's reach out to the people, because then it was easier to know that all of the don'ts about what helps to spread Ebola were targeted at actual traditional practices. We were working with traditional people, so we said, the easier thing to do is to bring these people on board—they can help us if they understand what is happening. At first they were resistant because people wanted to bring in experts. It was good to bring the experts to talk about how you can manage, because this is strange to this region, it's strange to this country. Experts were needed, but you also needed the local expertise. That's what we were providing, that's what we were bringing.

Q: Thank you so much for that summary. I very much appreciate it. Would you, just backing up a little bit, would you tell me when and where you were born?

Flomoku: I was born in the northern part of Liberia, it's called Lofa County, it's L-O-F-A, in a town called Zorzor, Z-O-R-Z-O-R, at the Curran Lutheran Hospital. That's where I was born in 1967, April 26<sup>th</sup>. I went to school in LAMCO [the Liberian-American-

Swedish Mining Company] Yekepa, that's also on the other side in another county, to live with my aunt, where I went to primary school. Then I came to Monrovia in the late eighties, and then I was caught up here during the outbreak of the war.

During the war, I went into—when I was in school, I loved photography. That helped to carry me through high school because I was taking pictures in my school. I was part of my school press club, and I used to take pictures. Then I went on further, taking pictures at programs, going to talent shows, doing different programs. Then I joined a magazine called *People and Places*. At that magazine, I got further exposure, because then I was attending programs with musicians, with actors, doing a lot of photos. Then I started taking commercial pictures because I was then doing weddings and parties and funerals just to keep myself going. Then when the war came, I still had my camera with me, and that's how I got involved with taking pictures during the war, capturing some of the scenes during the war. So yes, that's where I come from.

Q: Wow. So when—can I—okay. I have a couple questions actually. Who raised you?

Flomoku: My aunt.

Q: Your aunt.

Flomoku: Yeah, because in our tradition, my aunt didn't have a child, so when I was born, my [aunt]—it's about the tradition—took me. I mean my aunt took me. Because

she didn't have a child, she became my mother. That's how they work, because when I was born my mom said oh, my aunt was there and she knew that she didn't have a child. She immediately took me, and so from when I was born and I think up to like three, four years, and then my aunt took me away. I grew up knowing my aunt to be my mom until she passed, and then I came back to my own mother. In our tradition—and I'm from the Loma Tribe in Lofa. Besides Montserrado County, Lofa has one of the largest tribal groups in the country, about seven to eight different tribal groups. That's why it's also unique that you have different tribal groups living in a particular province. They are living together, they live in peace, they've got different cultural activities, but they still understand each other. Different religion, but they still understand each other. They still manage to coexist. So I come from that region.

Q: How did your aunt make a living?

Flomoku: Well, she was married to somebody who worked on the mines, but then there was this Swedish company called LAMCO, LAMCO J.V. Operating-something, they were mining the iron ore at the Nimba Mount. My aunt was married to this man, and they were living there, and so that's where they took me. She was an ordinary housewife, but she was a trader, she was involved in business. She used to do small, small business just to keep us going while he was working. Then we also made farm because originally, where we come from, agriculture is our main line of survival. People make farms, they make rice, and you know rice is our staple food. Even while she was away from her county, she was still making farm. We had a luxury. I call it a luxury because then, not

many of my friends had farms to go to, but we had a farm, so we looked forward to going to the farm on weekends. Friday after school, we were all marching up to the farm. We would go and stay there the whole weekend and then come back to the camp.

Q: What county was it after Lofa that you moved to?

Flomoku: Nimba.

Q: Oh, you went to Nimba.

Flomoku: It was Nimba, yeah.

Q: Sorry, I know you probably mentioned this—did you pursue further education after high school?

Flomoku: Yeah, yeah. I went to the University of Liberia doing mass communication.

Q: Is that here in Monrovia?

Flomoku: Yes, it's the state university. That's where I got my undergrad [undergraduate degree]. Then I had opportunity to go for seminars, to go for summer school. In 2009, 2010, I was really lucky, working with Humanity United, and they nominated me to go to Stanford [University] for a summer program. I went to Stanford, and then I also went to

[the University of Hawaii] for leadership and team building. This was a summer program and extra seminars that I've been going to. Currently, I'm enrolled at the Kofi Annan Institute for Conflict Transformation, I'm working on my master's [degree]. That's how far I've gone.<sup>1</sup>

Q: Gotcha. After living in Lofa and Nimba, what did you think of Monrovia?

Flomoku: It was difficult because coming to Monrovia was totally different. Yekepa was like heaven for us. People who lived in Yekepa, they didn't consider Monrovia as anything because we had every and anything. We didn't know that electricity could be a difficult thing or hot, boiled water, people who go out of running water, because we had everything. It was a concession a company area [unclear] and it was well, well, well taken care of during those days. I grew up there knowing that everything was good, even though my uncle was not a senior staff member, but I mean we were better off. We went to school, I attended the T School<sup>2</sup> that was put up just before the 1979 crisis, and then for lower staff, that's where the kids went. That's where we went to school. We had buses picking us up and going to school. When I came to Monrovia, it was a totally different story because here, you had to fend for yourself. I mean, you were doing everything for yourself. When I came to Monrovia, I didn't have anybody here. I knew I had an uncle here that I wanted to come to, but he was not ready to take me in because of some situation. I almost [didn't come], but I was already [determined to come to

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<sup>1</sup> Note from P. Flomoku, June 2018: I have actually completed my master's degree now.

<sup>2</sup> Note from P. Flomoku, June 2018: Schools were named after the camps and areas like Area T, Area M, etcetera. So Area T was called T School.



Monrovia], I was determined to come to the city. My mom was devastated because my uncle had sent a message for me not to come and I decided to come. She knew I was coming and moving to some trouble because there was no place that I was going to be staying. It's not like my life in Yekepa where I was living a good life and staying in a good home. I was coming to Monrovia with this message from my uncle that he would not be able to host me, and I said I was coming.<sup>3</sup> That was difficult coming into a tough terrain where you don't know anybody, but yes, I made it because I met some friends, and then we started living together, and I sold newspapers to survive. That's how I got myself into media activities, I used to go and sell newspapers. We used to go to Sabanah Printing Press. In the morning, we would get papers on commission, so we would go and sell the papers, come back and pay, and then we would take the profit. This was very small, but at least I was doing something. I stayed in this so long and I got a lot of customers in government and private places, so instead of me being a regular seller in the streets, I became a supplier. Then I had people working for me because I used to come then and get the papers, give it to people to sell for me on commission, and I'd go and supply the big ministries, the big agencies, and I collected my money on weekly basis. That's how I started life in Monrovia.

Q: And at that time, you're still taking photographs for your own recreational purposes?

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<sup>3</sup> Note from P. Flomoku, June 2018: I wanted to explore a new life and what it meant coming to the nation's capital. Every young person wanted to come to Monrovia. Even right now.

Flomoku: Yeah, in school, in school. Yeah, because of my photography in school, I got my first—I had a small camera and then second time came, they were exchanging the Polaroid, they were replacing them, and so I was lucky I got one of those. That was quick service. When they exchanged that, then I got a new camera. I was really happy because—and back then we were using film, it's not like now, there was no digital anywhere in sight. I was taking pictures of my guys in school, students. Every day we went to school in new uniforms and new activities, I was the guy. I became a big press thing in my school because I was taking pictures of the girls, of the boys, and everybody. I was making money there, I was still selling newspapers, and I was still getting some money from that, so I paid my own school fees. I was able to get a place with my friend. We were renting a place, the two of us, and we maintained ourselves that way.

Q: Can you tell me what happens when the political turmoil starts, when things start to get very heated down here?

Flomoku: In 1989, I was then in the senior class, and the reason why I remember this is because it was the year for my graduation from high school, and we were the last class. Then this thing started, with the war. They said oh, there's some fighting somewhere. As young kids, we were all excited. We all wanted to see the rebels. Nobody knew what a rebel was, we thought it was some kind of creature, or some people like you watch a movie, you think that it's a James Bond thing. People were excited for different reasons. The older folks knew, some of them knew what was coming, so they were not like us, who were wanting to see what a rebel was. It was kind of mixed, there was mixed

reaction from the people. I later got to know this when deep into the war I started to see the effect of what was happening. But when they started, we were all like jubilating, oh, there's a change, or this is happening. We didn't really understand. It became difficult because schools got interrupted and the war started in the county that I came from, in Nimba. Many of my friends fled what I used to call my home. When they fled Yekepa, they came down to Monrovia. Some people fled to a foreign land. We were in contact, but by then it was difficult because there were no cell phones, so sometimes you only get information through somebody who travelled and said oh yeah, I saw this person or this is what happened. We were all just living on hearsay, not having real facts. We were basing our decision on those kinds of things and sometimes it was not the right decision that we made because there was no fact in the rumors. We were hearing rumors and acting on them. But it became a disrupted life, it disrupted families. A lot of things happened after the war, and it changed the lives of people. It changed this country. That one-time insurrection changed a lot of things for almost everybody in this country.

Q: You mentioned that you started to take photographs of some of the activities, some of the goings-on during the war. How did that begin with you?

Flomoku: Again, like I said, during those years, in the late eighties, because I was taking pictures in school, I got connected to an editor, Mr. Blidi Ellier. He took me on, he said look, I see you love photography, so I think I can work with you. He was an editor for *The Daily Observer* newspaper. He took me on and I used to go with him. Back then we had Ducor Palace Intercontinental Hotel. Liberia used to be a booming place where you'd

find a lot of people from across the continent coming. They had this five-star hotel, and they used to have stars there. Every weekend there used to be some kind of activities. This guy was running a magazine called *People and Places*, and so he took me as his photographer. I used to go there and take pictures and I was so happy because I was getting exposed to stars. I was getting exposed to government ministers, people ordinarily I would not see or even imagine being in the same space with—

Q: Anybody I might know?

Flomoku: Well, not really because those days a lot of people, many of them have gone now, I'm not sure if you would know any of them. But yeah, that space, that change that I had to mingle and to be able to prove that I can do something. The first time I saw my byline on the news story I was thrilled, I thought it was like a birthday for me because they put my byline, Pewee Flomoku, in the photo caption. I was really, really happy then, and that gave me the zeal to continue. At least people, even though nobody knew me, but people would read and then they would see this picture and they would know I took the picture. Every day I went to work and I would say in my mind, I have to take a picture that people will look at, and I have to take a picture that would make the magazine because we are producing entertainment. So I used to take some picture, and whenever we took pictures and published, sometimes people would come back and ask for the picture, they wanted it personally. I would do some personal pictures for people, that would give me extra cash. That took me, during the war, I still had my camera, so when the war hit and then when the war hit Monrovia and we all fled our home, I took my

camera with me. It was one of those things I took with me. It was just, out of curiosity, taking some shots I didn't know would make any sense or anything. I went through all of that, and then by the end of the war—not really the end, in 2002, when we had [a break in fighting] after, there was a ceasefire, and then the interim government came into place.

I also got another attraction from another editor, this time a photojournalist—Tana Wolokillie was a very tough Liberian journalist. He was a renowned photojournalist in Liberia. He took me on to work along with him. He covered the Mansion, the Executive Mansion, and the Legislature. Every day I would go along with him, he would say, take this person's picture, take this person's picture, and then he would go and do a story and it would come up and my byline would be there. At this stage, I was not on salary. What I was getting was my byline being in the news report. Then people started to know this young photographer being molded by this senior and aggressive photojournalist going through, he took me through the darkroom, I knew how to develop my own pictures. I would go and do pictures and I would develop it and I would take it to the newsroom, the editor would qualify, and it goes in the paper. We did that and he kept me on through the Legislature, by then, it was the interim period. I was shuffling between the Legislature and the Executive Mansion taking pictures of different occasions. Somewhere down the line he passed, but I stayed on [continuing my photography]. Then when the interim session came in with the late Professor [David D.] Kpormakpor, I was still on taking pictures. And then Professor Wilton [G. S.] Sankawulo, and these are all interim presidents during the interim period, the interim period became from [1994, '95, '96,] all the way to 1997. I stayed on through, I served Wilton Sankawulo; I served the late Ruth

[S. F.] Perry, who just passed, the first female interim head of state of Liberia. I worked with her and she was the head, like the head of state. I was her photographer, so I went with her. Then I started going outside of the country because I was assigned to the first head of state, interim head of state, the second interim head of state, so I got further international exposure because I went to a lot of international conferences. I began to make friends, and then I began to go into more sophistication with the kind of camera I was using—I changed my camera. Then in 1997, we transitioned again, there was an election. And then Charles [M.G.] Taylor came to power, but I was still on at the Mansion taking pictures. While he was in power, I was still there taking pictures. After that, then we had a second—two sets of wars—no, in fact, three sets, that's why you always hear Liberians talk about World War I, World War II and World War III. In a space of a year or two years there were different periods when there was war, and those wars were fought mostly in Monrovia. By then I got a recommendation, one day I came from school and somebody called me, and they said, "There was a lady in town looking for you." I said, "Okay," and she was staying at the Mamba Point Hotel, so I went to the Mamba Point Hotel and found this lady and she was from the Associated Press. She said she was looking for me because somebody had recommended me to her—I guess she wanted a good picture, I could be the person she could talk to. I said oh yeah. I was so excited, I didn't know what to do. She came in with a digital camera. I don't know how to use digital, and she said don't worry, and she took me through a whole week of training sessions with specific focus on AP [Associated Press] format, taking pictures, putting captions, the kind of angle that they would want when we tell the story. I went through all of that and then I became the correspondent, the photo stringer for AP in

Liberia. That went up to the half part of 2003, even while I was with the UN [United Nations], I was still taking pictures for the Associated Press because then the war was subsiding. I took a lot of pictures for the Associated Press, so if you go Google my name, you will see them, including the picture of the women sit-in throughout Monrovia; at the US Embassy, the pile of bodies you find. Those are my shots, at the Legislature. I have since then received almost every month a request for people to use those photographs. They went into the [Abigail E.] Disney film, *Pray the Devil Back to Hell*. They have my pictures of the women in the sit-in and the march. That kind of further elevated me to a different level with exposure and all of that. Then, when I was with the army too in the outreach era, I still had my camera, so I was still taking pictures of rebel fighters, of government fighters, disarmament. I was firsthand because I was going there when they stayed in their different territories and we were telling them that you will be disarming and this is what will happen. I have firsthand photographs that I took of all of these people.

Q: Can you tell me about some of the photographs from this period that—not necessarily the ones that were most popular or most widespread, but a couple of them that meant the most to you and still do when you look back?

Flomoku: Yeah. I remember there were two—many instances. But I still remember there was a bomb—a bomb, I don't know how to like—the rebels sent in a missile in the former US Embassy where you had civilians taking refuge. On this day, there was also a protest going on, it was like a daily routine. Liberians would come out, they would march

in front of the embassy asking the US government to intervene, to stop the war. This was one of those days when people were marching. Then the rebels started shelling Monrovia, and the shots landed in what we used to call the Greystone—it's [now the] US Embassy compound. There you had thousands and thousands of displaced people there. But I was right on the scene because I was following the crowd taking pictures, and as we entered the gate, these shells were falling and the particles, it was just devastating, they just killed people. I saw the terror and I saw—it was like everybody went helter-skelter, they didn't know what to do, and I got those shots. But, as if that was not enough, afterward the crowd became really angry and started bringing up bodies and piling them up in front of the US Embassy, and I was there. It was devastating. It was difficult. I took those pictures. Then a lady asked me, "Why are you taking these pictures? Don't you know people have died? Are you happy that people have died to be taking pictures?" And I said to her, "No. I'm just trying to let people know that people have died." And that was the one question that when—it stuck with me because every time we went out and you saw displaced people, when a particular part of the country was hit, people would move. As they were moving, we were taking pictures of them moving. Then they would ask you, "Why are you taking my picture, do you want to make money?" "Yes, technically yes, I'm going to make money because when I file the picture, they pay me, but what I'm trying to do is to tell a story." I was trying to get a soft side, a humanitarian side to let the outside world know what was happening. There was one point when the rebels and the government forces fought for almost three weeks in Monrovia, it was nonstop, and that was when the former President [George W.] Bush asked former President Taylor to leave. He said he was not leaving his people in the hands of rebels. That one week, the



people who died during that one week, you could just tell that they were more than the other side of the war because everybody was fighting for position. Who would be in this position when the peacekeepers came? That was it. Then we had the US Marines sitting on the seashore. There were days that Liberians would go and line up just to look at them with the hope that they would come. It also began a routine that every evening between six thirty, seven to eight, somebody would just run down the street and say, “The Marines are here,” and then you see the jubilation. You could see the anxiety that people wanted the Americans to come, but they did not come.

The ECOWAS [Economic Community of West African States] came through, the Nigerian [soldiers came through from serving the United Nations in Sierra Leone]. I was also on the scene when the first troops landed, and I drove in their convoy, and you could see the jubilation from the Roberts International Airport to the Freeport of Monrovia, you could see the jubilation. We knew that the two factions, the two warring sides were tired, but they needed somebody to tell them to stop. It’s the typical Liberian idea. We’re having conflict, and we know that this is not necessary, but somebody needs to come and tell us to stop. That’s what was happening. I was there. I was also there and I remember also when there was a mass grave, right now in the present, the military barracks. A group of people—bodies were taken from the John F. Kennedy Medical Center, and I followed the guys, they didn’t want anybody to follow. By this time, I had a car, a small Nissan, so I followed through. I followed through because during my year of coverage of the war, I managed to make friends with security people. I had an insider who could tell me what was happening, who could protect me and then say, look, when you go in here,

this is the road you can take, this is where you can be to get a shot. They would tell me these things because they too were tired, but they were under command. They were taking instruction, but they were tired and I know, one of them said, “We just want the outside world to know what we’re going through. We are not happy doing what we’re doing.” So I followed through, and when there was this mass grave, I know I took a picture of that grave and then one of them made *The New York Times*. That was also my first time when my editor called me to say, “Have you seen *The New York Times*?” I have no way of seeing *The New York Times*. He said, “Go on the internet, your picture is there.”

Just that, moments I remember. I also remember when people were fleeing one of the wars at the Freeport of Monrovia, and a lady was trying to get her baby on the ship and she practically threw her baby up, not knowing who’s going to grab this baby or what’s going to happen. Unfortunately, there was a guy who was trying to catch the baby and he was trying to get the baby and he fell along with the baby into the water. They rescued him, but the child didn’t make it. I was there and I got a picture of all of this. There were many, many, many, many moments you could look at and reflect on what was happening and how you could translate that into people who were not here into seeing them to say look, this is crucial, we need to come in, we need to help. There are a lot of things that go through my head, and I know a lot of friends have said I need to write a book because I have a lot of collections of photos and everything. But back then, my whole focus was to be able to [capture it] while it was happening.

This is where I took my whole passion for trying to work with communities. When I transitioned to the Carter Center, it became really, really good for me because all along I was like, what can I give back to Liberia? Liberia has given so much to all of us. What can I, as a person, give back? That's why when people call to ask to use my photo on charity, on promotion, I just say go ahead. I don't make a cent from people using my picture because the more they tell the story of Liberia, the more I feel fulfilled that this is good, they are talking about the women of Liberia, they are talking about the suffering the children went through. Somebody is trying to elevate that. I'm so happy that they use my work, I don't care if I get a cent or not, I don't care. I feel fulfilled when they can use my work to tell a particular story about this country. This country has gone through a lot. The people have suffered. And that's why when Ebola came here it was so hurtful because that was like adding another set of trauma to already traumatized people.

Q: Thank you so much for that. Your friends are right, a book from you would be— maybe even do a lot of good, who knows. So you came to the Carter Center in 2005, is that right?

Flomoku: Yes.

Q: Or 2004?

Flomoku: Well, late 2004, I was just an expeditor trying to set up things. I met Ambassador Gordon [L.] Streeb and Tom [Thomas] Crick in one of my rapporteur duties

at the Mamba Point Hotel. We made friends, and then he started to ask my interests, just having conversation, and he took an interest in me. Every time, he would call me when there was a meeting he wanted me to organize or when there were people coming from the Carter Center. He was just shuttling, and I would go and set up these meetings or I would go to the airport to pick up guests coming in. So I began that relationship with the Carter Center, and then formally in 2005, I joined the election team headed by Alex [Alexander] Bick, who was just recently a national security advisor on Syria. We had a great team, we started off small, we had a great team. I came from that level as an expeditor. I went to logistics, then went in to programs, and then became deputy, and now I am the head. So I came a long way. This program that we have today, Access to Justice, started with me. I know from whence it came—I was there when we sat in the room to plan, I was there when we had meetings with government agencies to talk about what they wanted Carter Center to do, the kind of support they wanted from Carter Center. I was there when we went for the assessment to see what would be the need from the community, what communities are looking for, what are their issues, and then how we come and design a program that would fit community needs. So I have been there all along.

Q: Thank you so much. What were you doing immediately before Ebola started heating up?

Flomoku: Before Ebola came, we were doing our regular work. The Carter Center currently runs three programs in Liberia. We have a mental health program that is

training physician assistants and clinicians to specialize in mental illnesses. We also have an Access to Information program that deals mostly with civil society actors also. We meet groups to talk about a freedom of information law that has been passed by the government of Liberia. Then the project that I work on is called Access to Justice. Our program has three components: one is a paralegal program where we train civil society groups in particular communities—currently we have four hundred forty-seven communities in eight counties working along with fifty-four community justice advisors. This community justice advisor could be described as a paralegal, but we cannot call it “paralegal” here because there are some legal technicalities, but the [Liberia National] Bar Association agreed for us to negotiate the name “community justice advisor” because these guys are not lawyers, and if you are not a lawyer in Liberia, you should not be practicing law. They agreed for us to use that name. We train these people to give free legal information to the community, and as a result of giving that information, people who have issues will now come to the community justice advisor to see how they can go about resolving their issues. The community justice advisor will provide options. Liberia has a dual justice system—it’s customary law, and you have a statutory law. They were drilling through the processes. If you want to go to court, where does the court process start? We talked about that. If you want to go to the customary side, how do you approach a chief, how do you bring your dispute or whatever problem you have to the traditional leader or the elders, and how to go about mediating all of that. If you choose to mediate, they are also trained as community mediators. All of these options are provided to the person with the issue and they can choose one of them. Depending on what they choose, the community justice advisor will now follow through. If they decide to go to

the court, the person—because they already monitor courts, they follow through the case and they will tell them what to expect because part of the issue of the access to justice is perception. You've got to deal with understanding the process, you've got to deal with costs, you've got to deal with availability of court officials, of physical structures, you've got to deal with these things, and a whole lot of things that have to do with the formal system that people don't understand. We are trying to provide information to all of these people.

Then the second part is working with traditional people to be able to mediate a community dispute or land dispute, traditional matters, providing best practices, because there have been studies to prove that most Liberians want to access justice through the informal system. That's because it's cheap and it's available. For that to happen, we need to work with people at that level so that the true sense of justice can be adhered to, because you will realize that normally in a traditional system, women and youth don't have a lot of voice. They are most times told to say sorry because that's the custom. Even though they are hurt, but they are told to say sorry. We wanted to work through that to say if an elderly person is having a confusion with a youth and this elder is wrong, how do you tell the elder you are wrong without disrespecting him or her? That's the problem, so that's where we are working. We take what we get from the two recommendations, from the two, and bring it to the chair, which is informing policy decisions. For example, talking about having an ADR [alternative dispute resolution] policy, talking about reforming our judicial system or the criminal justice system, you know, so that different components that we bring to the partisan level—right now we're talking about law

reform. You know, if somebody's lost on a boat, I just [unclear] meet up with present-day realities. All of these issues, those are issues that we are working on.

What we do every year is we conduct training for traditional leaders at the community level. When we go to conduct these trainings, what we do is to bring chiefs from that particular community, women and youth in separate groups, and then we have discussions and talk about our laws. We take a particular issue that is affecting our community—remember, the first set of the program is providing information. Because we provide information, people ask questions, so we know the issue at that level. We take one of the issues from there and come and train on it. Say, for example, if the issue is persistent non-support, which is parents not supporting their kids, it's criminal, but it can also be looked into from a different perspective. When we have this kind of issue, we could bring the women together, we talk about what's the problem they are faced with and how together we can find a solution. Those trainings are going on, we are having cases, we're going through monitoring, we are doing an evaluation of the work as they go along.

That's what we were working on when Ebola struck. That's an ongoing thing, we've been doing it for almost eight to nine years with these people, and that's how we've been able to build trust with the community. Then you talk about, later on maybe when we talk, you will see when you talk about community resilience, where it comes from. Because it's from that background of knowing the community, knowing the people, knowing their issues and being able to tailor activities that will meet their expectations.

Then, the issue of local ownership is very important in the development world right now, very, very important. The issue of local ownership helps a lot. So, those are the issues that we were working on when Ebola struck.

Q: And how did you get involved in Ebola?

Flomoku: Well, again I say, because we are not originally a health program, when Ebola struck, it was difficult. Our office decided that they would close. The Carter Center should close because we are not a health program. Then, because the risk factor was very high, we had two expats [expatriates] that we had to evacuate. They didn't want to go, they wanted to stay here because by that time, it was difficult to take away from Liberia—Liberia needed everything. To take away any resource, either in material or a person, was just a challenge, but because there were risks associated with Ebola. The Atlanta office finally decided that we would maintain a skeleton staff, meaning small staff that would be able to oversee what was happening. Two, we didn't want to disappoint our partners. We've been working with these people so long and to pack up and leave during a crisis was going to tell a different story. It was going to send a different picture about the Carter Center, and the Carter Center has been here with these people forever. As you know, the Carter Center is waging peace, fighting disease and building hope. So how could we leave in the midst of a health crisis? The Center decided that we would remain. Even though we are not a health program, we would remain and we would take precautions, but we would remain engaged with our partners. We would remain engaged with the people of Liberia during this difficult period to give them hope.



By Carter Center staying, brought a lot of hope to the hopeless, to a lot of people who felt that all was gone. We stayed on, working along with our chiefs, the traditional people, the women and the youth. When all of the experts were coming in, we were there, we were our small little advisors and saying well, we can do this, we can do the other one, and yes, at some point, they listened.

But it was difficult because it was a crisis not just for the Liberian people, but also a crisis for the international community and partners because this caught everybody pants down. We were not prepared for it. To mobilize resources, to bring in experts, to start to first think in your mind how to approach it, was difficult. It took weeks for partners to agree on their approach. We were there, developing messages, going and doing testing, coming back, and in that process, people were dying and people were in denial. You see the first message that came up on Ebola was, if you get Ebola, you will die. Because nobody wanted to die, people fled, so nobody was reporting. Then we went back and said oh no, no, no, this is wrong. Don't tell the people they will die, but tell them it can be cured, it can be prevented. It can't be cured, but it can be prevented. That's the prevention side that we took because if somebody knows they can prevent it from happening, then we just prevent that from happening to them instead of saying you will die, you will die, you will die, you will die. Nobody wants to die. We were then working along with the health promotion team with Reverend Sumo, John Sumo, at the Ministry of Health [and Social Welfare] that we worked with very closely, he's got a very strong personality. We worked with Liberia Crusaders for Peace and the different, different, different actors.

Our main role was to bring to that platform what we had with our partners, the trust we had with traditional people. It was the main thing that we were providing because they listened to us, they trusted us, they knew that we would not tell them anything that's not true. When government actors were announcing on a daily basis the number of persons that were dying, the difficulties, and how people should not move, people were not listening and that was a challenge. They were not listening because they didn't trust the government from the beginning. They always thought it was one of those things like, there were rumors that the government wanted to use this to make some money, to get some money. People were dying every day. People were walking in the street, dropping and dying, but yet they didn't believe. What was the cause of people not believing? There was something wrong. It's something fundamental because the issue of trust and respect comes in, even though it's the [unclear]. But if I trust you from today, tomorrow if you tell me something, oh yes, Sam is telling me something, I have to listen. If I don't trust you today, tomorrow you can tell me there's fire [unclear]. You go away, I'm not taking you serious for anything. But later on, people began to realize that the government was telling them the truth, but they were not listening. So we had to find a way for communities to agree to work with government, communities to agree to support health care providers, our first responders, burial teams. There were different things, there were burial teams that were going into communities, and they were driving them away, they were stoning them. They were accusing them of bringing Ebola to their community. No, these guys were just trained to help you to do proper burial so that you don't come down, you don't come in contact with this deadly disease. But that needed a particular voice, voices from their leader, from their own leader.

We went to Cape Mount, in Sinje, and we had a big session, a whole week session with the imam. He had a very good strategy, because we were emphasizing that people should not move, and if you had any idea—we are two in this room, if Pewee gets sick, send people to report it to the chief that Pewee is not well, I don't see him in good condition. That way, we would take action that would help the whole town because people are concealing information. People who were sick, they were moving from one place to another and not telling their relatives the truth. We had a whole session, and then the imam said look, one thing we can do is to do a roll call. Every morning they knew—because the good thing is in the interior in the villages there were structures. Every morning everybody knows who is in which hut. So you pass and call names, “Sam? Pewee?” “Yeah, we are here, we are okay.” “Can we see you?” We go outside and they see us, we are okay. But tomorrow, “Sam? Pewee?” And then Pewee doesn't answer and they ask you, “What's happening?” “Well, he didn't sleep good last night, but then he got some headache.” That's a signal for concern. Immediately you alert the health person in that community to say Pewee is having a headache. It could be a normal headache because people were traumatized, there was a lot of tension, so some people just got sick if they were frightened. We took that because then they come out every morning, they call roll and they mark, do a check, and that helped because that town was infected, there were a lot of people that were dying in this town and people were moving. That was one idea we took around.

Then, somewhere around September or October, we engaged with CDC. CDC deployed people, and as they were coming, they were coming and talking to us about—I mean just getting updates on what was happening. We built a special relationship with the CDC team that was coming on ground. They were getting information from us, they were updating us also on the health side because they were in surveillance, they were doing a whole lot of things. But we had a platform, we had this chief who had traditional people that we could connect them to. So it went on, and then we decided the Council, the National Traditional Council [of Liberia], wanted to know what was happening, so they asked us to sponsor the meeting. Again, it was difficult because at that time, we didn't want people to gather in any numbers because gathering was one of those things that were helping the spread of Ebola. But we decided to do it anyhow, and then CDC got on board, UNFPA [United Nations Population Fund], WHO [World Health Organization], the Ministry of Health, we got all the different partners in government and outside to come and explain to the traditional people what was happening. After the explanation, they asked the chiefs, what can you do to help? So the traditional people pledged their support to work with government to help stop the spread of Ebola. The reason that was important was because everything that was talked about on how Ebola can spread from one person to another, from one community to another by people moving, by people touching, by people bathing bodies, all of those things were traditional practices. When the chiefs came and they pledged their support and said, we will not do these things that will spread Ebola, they went back and they now became the messengers. We bought cell phones for every paramount chief in this country, every district. Carter Center conducted a session, we went there, we got a megaphone, that thing [points at megaphone], for them

to go around, and they were the ones giving the messages. They were giving messages, they were giving phones. We formed this, how do I call it, there was this channel of communication. From the very bottom, where you have the gCHV [general community health volunteer], these are people trained by the health ministry to go and give information about health issues. There were surveillance teams, there were body teams. They formed from the lower chiefs. If there was anything in his or her town, he would immediately call an upper chief who would call the district health official and the district health official would pass it on to the county health official and that would come to the big center where it was like, from the military side what you would call the “war room,” where they make decisions. This center was where the big decisions were made from the Ministry of Health, and they would go down and actions would be taken. We built this communication line from the bottom up and then that any information would come from up down. This way you had the people involved, so the surge began to change. There was a curve in December and true to the words of the chief, they said by December, Ebola would reduce. There was a curve.

But before that happened, somewhere back in September it became really, really deadly when bodies were out all over in Monrovia. You could walk out this morning and just see bodies flowing all over. Clinics were rejecting patients because they didn’t have the trained personnel, they didn’t have—doctors and nurses were dying. There was fear, there was fear everywhere, ambulance drivers were dying, burial team members were dying. There were just bodies everywhere, and it became so bad to the extent that the president [of Liberia] announced cremation. That happened after a news report reported

that there was a mass burial in one of the communities in Monrovia, in a swamp, it was not done properly and then the next morning the bodies were floating. Some journalists went and took pictures, and then they were all up in the media everywhere. That became a big concern for the government partners, so the president then authorized cremation.

Then they put up the crematorium and that became a problem because they were resisting from the beginning because it's not the custom of Liberians to burn bodies. They are not accustomed to that. But that was done to save the community, to save more lives you know, but it became a problem. At this meeting in October or November with the chiefs, that was one of the issues that they talked about and wanted to change. They wanted the government to stop burning people. Because also, in the interior, what that was doing— why that was only happening in Monrovia: in the interior, they were taking people away, people were running away instead of reporting their loved ones who were sick, they were taking them away to bushes and places. They were taking them there because the fear was when you got sick and you're taken to the hospital, the next thing, you'll be cremated. They didn't want that, so they were running away. In order to stop that, was to say look, let's find another way around it, so the chiefs asked the government and the government said we're looking for land, if you can give us the land space to bury people, we will stop. They provided the land space, so today you have Disco Hill where you have the mass burial of the Ebola victims. Today it's being used as the national cemetery. We were part of that process. We brought the chiefs and the practitioners together to talk about how that mass grave, how it would be structured, who would be there, security, long-term effects of what was going to happen there. We were part of all of that process.

We went through all of that and finally, finally it was announced that we had our first clearance of Ebola going away. It was a long process. There were different processes, there were different actors who were involved in helping it to go out, but we all found a path. We don't know what particular thing that made the curve go down, but we know that it went down, which is good and positive for the country. But the community resilience that you hear about came as a result of individuals taking action. We, from the Carter Center endpoint, our mission was to change the resistant into assistants. Change community where they were chasing burial teams away to helping burial teams to find proper burial sites. Change the denial into acceptance. You deal with any epidemic or even any illness, if you accept that you are ill, you find solutions to get well. If you deny that you are ill, you don't care and so you don't do treatment. We wanted to change the resistant into assistants. We worked across of all our partners to be able to make that change help. We were on the radio, we were designing programs, we were bringing the chiefs to talk about this, we were bringing prominent voices to be able to talk about how we could stop the spread of Ebola and to prevent it from happening in the future. As you see, after that there were two other outbreaks, but those outbreaks did not go any further because of the structure that the government partners had put in place that has been supported by the community resilience.

[break]

Q: Mr. Flomoku, I have one question, and that's—I'm interested in this long-term project that the Carter Center has made to make these connections with leadership that already exists in the area, traditional leaders. Of course, CDC did not have country offices in these countries beforehand, and many of the other organizations barely had a presence in Liberia, Sierra Leone, Guinea before Ebola. When the international community came in, including CDC, but including all these others, how would you evaluate their understanding of the need to create these ties with existing leadership with traditional leaders?

Flomoku: It was difficult from the beginning because there were some institutions that came with a mindset—they came as the super expert on Ebola, on other epidemics everywhere, so they brought that mindset here. That's where the problem was in trying to understand the local dynamics. I can't say that for CDC because what I know, like the first set of teams that came from CDC, they came straight to us and asked, what's going on? What can we do? What's your advice? To me, they have big experience in working with epidemics, they have great experience in trying to understand the local dynamics, and because Carter Center and other partners were here, they had access to us, so they were reaching out. I mean, other groups did that, but some other groups, no, they came straight with the expertise and wanted to implement. It was difficult because the expertise could not fit in, in the local setting. They had to do certain things—there were teams that went out and a few that were chased away because people were told not to accept strangers. If the chief said there should be no strangers and if anybody enters this room, we are getting up, no matter whether they are coming to help us or not. Teams were



chased away. Because they did not observe what we call community entry, simple community entry—going, meeting with the head chief, explaining your mission, asking them how you could be of support to them and not taking things to them because they can reject. Sometimes the things you're taking to them would not fit in their setting, it would not work, there are cultural issues. Then people coming to this setting and don't understand the cultural dynamics, they don't understand the customary concerns for the community. You could lose everything because people believe in certain things and they don't care whether they die or not. They believe in that as a way of life. That's why change is possible when it comes from within. You cannot force change just as you cannot bring peace or reconciliation in a lorry to somebody. You have to work with them, it has to come from within. You cannot force anybody to change. They could do it for a few minutes but it will not be lasting. In order to have sustained peace or anything to sustain that in a particular community, you need to work with that community. The community needs to buy into your idea. That way, they can sustain it. But if you enforce it, they will take it maybe because of a certain condition, they will accept it for some time. Afterward, they will go back to their normal way of doing things.

One of the things that changed in this country was it was difficult for Liberians because the typical thing a Liberian would do would be to shake hands. That was not allowed during Ebola. But people still found ways to touch each other, they started to do elbow instead of—so you see, it's entrenched within the system, within the people, it's their upbringing. A Liberian man would feel very bad if you don't shake his hand as compared to if you didn't give him your cake or something, he wouldn't care because if he meets

you for the first time, the way he welcomes you is to shake your hand. He stretches his hand to you and you, like, no. They feel bad. How would you tell a traditional chief, an expert coming into the place, he doesn't want to shake the hand of the chief? He feels that you are downgrading him. He doesn't understand it's a health matter, you're trying to prevent yourself. There came a time when people were wearing gloves in the city, in the banks and everywhere and they said no, no, no, no, don't do that because you spread more. Because you have gloves, you have the false sense of protection, should you go touching every and anything and then spreading it around. No, it was not good, but people thought that was the best thing to do. There were different, different things that work around it and yeah, experts came, some [unclear], but some came with their ideas and some were actually doing experiments. They wanted to test their idea that they had been working on for years. They wanted to use—so you go into a community, when you hear ordinary people saying they were using them as guinea pigs. There were rumors that oh, the US was using Liberia as a testing ground, you find this thing was imported from the US.

Q: Can you give an example of an organization that came in and kind of wanted to experiment with the population in a way?

Flomoku: Well, I wouldn't want to speak to that right now. I know that it happened, I know we heard it a lot. We saw attitudes in our meetings, the way they were carrying about. I wouldn't want to speak to any specifics on that.

Q: Sure, I understand that. I think I had a follow-up for that. I did! [laughter] Did some of these organizations come to you, come to the Carter Center because of your expertise in this area, in your long-term work? Or did you really have to go out and advocate?

Flomoku: We did both. There were organizations that came to us because we had a close link with the traditional leaders, so they wanted to tap into that. And too, we had to advocate to let them know that look, this is the best thing to do, we have developed the messages for the traditional people, it's good for us to engage the traditional people. The messages will go faster once they are a part of us, they will understand what to do. Let us not lead them to say they are not experts, they have no idea. It's their community. We had to do both, we had to do advocacy and we had to listen to experts because, again, we are not health people. The platform we were providing is for the health people, the health experts to have easy access to the community. That's our role, that's where we work. When we went with—it was the head of CDC that came with some delegation, we took them to Cape Mount and the chief was so happy that this big man from CDC—and again, it was difficult for us to explain “CDC.” There's a political CDC in Liberia and not the Centers for Disease Control. We had to find a way to explain all of that to them to say, this is not CDC, so when you go to the community you want to introduce yourself as CDC, please explain, otherwise you could be chased out of that community. Or you could be welcomed, who knows? Those things happen, yes. But there were a lot of institutions that came to us to ask us what we were doing and what was our understanding of what role we were playing, and there were others that we had to go to, to advocate to say please allow this, this will be important, and they listen up.

Q: You'll have to excuse my kind of CDC-centric focus on this, but it's just because of where I work. Was there anyone from CDC who you worked with quite a bit who you remember?

Flomoku: Yeah, now this is my problem, I think I'm losing my—

Q: Oh, we can put names—we can add names to the transcript afterwards.

Flomoku: Yes, because—oh, it's so bad. This is the one person that I had worked with so, so well. He was the one who presented in Gbarnga to the chief, who worked on planning the district testing. Because there were these centers that they were put in so that in case a family member had a problem, that person would be taken to a particular center while they wait for care. Then you will have one family member catering to them. We tested all of this. I'll get you the name. I've been talking too much, but I will get you the name.

Q: Is it by any chance Frank Mahoney or Kevin De Cock?

Flomoku: No.

Q: Okay, it was worth a shot. [laughs] And they were effective, you think?

Flomoku: Very effective. They were very, very effective. I mean there were a lot of people that came from CDC that we met, a lot of people. They were rotating. They had people who worked closely with us, they had other people, how do you call them—the epidemiologists?

Q: Yes, yes.

Flomoku: They came a lot. They were in the field, but they got briefings from us I can assure you. They all came to talk to us before they deployed and most times, for some of them before they left, they also came back to debrief and talk to us about some of their experiences and to warn us about—well, not really warning, but just to let us know that there were other colleagues coming in. So we really had a very good relationship with CDC. CDC was one of the institutions that we really worked with closely during the Ebola crisis because they came with the expertise and matched that with the local content here and I think it worked well. That's why today you have a local office here planted in Monrovia, and people are so, so, super happy. Just the mention that CDC is present here, people think that from now on there will be no more epidemics, [laughter] nothing is going to happen. It's that kind of sense that people have and that kind of thinking.

Q: CDC as well as so many other organizations has done their own internal analysis of actions they took and lessons they learned from their Ebola response and the epidemic. From your vantage point on CDC, did you ever notice anything that now that you think

about it, you could say, well here's something that maybe CDC could keep in mind for if this happens again?

Flomoku: Well, yes, I think it's the one thing that they've done, to have a presence here, to keep monitoring. Because this is something I'm told can come back anytime. The way they've structured it to keep monitoring happening. If you see the second and third outbreaks, the responses that came in also answer that question. They're now preparing, they have been training a lot of people, a lot of health care workers, a lot of people to specialize, training also the community in rapid response. I think they have answered that question long, long, long before it is asked about preparing for future outbreaks and if it came again, what could we do differently? What is it that we didn't do before that carried this price so high? They are working at that level, and because they are here they are continuing to engage. I think one of them told me, people here are to conduct their activity every day as if tomorrow there will be an outbreak. If you conduct yourself that way, that's why you still find Liberians still washing hands, you still have the hand wash. One of the things that we did in the counties, in the villages with the chiefs, because they could not afford to buy the chlorine in the bucket, we developed a traditional method they used. The [bamboo] reef. The reef is simple. You go behind your house, you cut a reef, you put it there, you put water inside, you wash your hands. They began in some counties, they were mandatory. There were traditional orders from the chiefs that each hut had to have this thing planted in front of them with water inside, twenty-four hours. Any stranger coming, anybody, you just go, you wash your hands before you go about

your business. Yes, I think what they could do differently is just what they've done, and they should continue to reinforce that. Yeah, CDC should continue to reinforce that.

What was the downside to me was not in Liberia, it was the situation outside Liberia. When Ebola hit the US, the actions that were taken, and I don't know if these things were recommended by CDC or it was just the US government, I don't have any authority, I don't understand this. But that sent a wrong signal to the rest of us who are in the trouble. You're supposed to be very sophisticated, to have this thing, but we were treated so badly. I traveled to the [United] States and I know that I came here, I stayed here, true. I didn't have Ebola or anything, but I had to go through so much rigorous process. At one point, on one of my visits, I stayed for I think fifteen or twenty days, each day somebody had to come to me physically to stand over me to do my tests. I was like okay, I have my own tester. When I was in Atlanta, they told me I could report my test results, so they trust that I could report online, which was easier for me. When I went to Jacksonville, Florida, this guy had to come physically to my residence every day, every morning, every evening, and he stands outside the door and asks me to do my tests. To me, it was no use because he was not seeing what I'm doing, right? I thought that this guy was just making some extra hours by reporting that he was checking on me. I stayed there. The way the immigration officers or whoever treated people coming from Africa or Liberia, Guinea and Sierra Leone, to me, they didn't show a lot of respect to them. It was not their fault that they were coming from these countries. Nobody wanted Ebola in their country. I also agree that Americans were afraid. They didn't want any carry-over effect to them. But to

me, the way to treat it, you should have some respect for the person. That's my only downside I saw.

Q: Sure, sure. Thank you so much for describing that. How has your work changed since Ebola?

Flomoku: Well, we've gone back to doing our normal work, but with the added information of Ebola. Sometimes, just a month ago we were still training and still talking about Ebola, getting people to keep the Ebola messages up, keep washing your hands, report strangers when they come to you. You know, someday there was a guy, who is that? Look! Ebola has been gone long since, yes, but we don't know when it will come back. We want to keep people on the alarm every day, every hour, every minute; we want to keep people on the alarm so that in case it happens, people know what to do. Because there were a lot of misconceptions, there were a lot of rumors going around: it's coming from dogs, coming from bats, coming from bush meat, and the thing is, this Ebola crisis brought a lot of pain and sorrow, it divided families. What is added to our work right now is trying to reunite families that were divided as a result of Ebola. It was not the fault of a family who denied another family member because they didn't know the status of that family member and they were just trying to keep they and their own families safe to say look, please stay where you are. People take that seriously here, in Liberia, culturally they don't do those kinds of things. You don't deny a family member from visiting you, but it happened because we were in crisis. People were denied from eating bush meat, they took offense to that. We have to go back to say sorry, but this was a health emergency,



the health ministry and the partners had to take precautions because we didn't know where it was coming from, we don't know how it got here and spread. We are right now working with communities to mend fences. We are working with communities to see how they can rebuild, forgiving each other for what happened during Ebola. Yesterday [note: Decoration Day] was also a very sad moment for those who have lost their family to Ebola—some of them went to the graves not knowing where their family members were. All those that were cremated, their bodies were put into a big container and they were taken there, they were put in a mass grave. You just go there and think that your loved one is in that place. But it's a sad thing. You need to bring back the communities, they need to come back, you know, they went to memorialize the mass grave in Duport Road yesterday. You stand there, you feel how people are going through pain because they lost their loved ones. Some blamed the government, but the government itself was hit, people died in government. Doctors died, nurses died, PAs [physician assistants] died. We already don't have enough and the country is at a loss with Ebola. With the partners like CDC, the World Health Organization, UNICEF and all these other different groups here trying to help to put this together is good. That resilience, that community resilience, the resilience for the ordinary citizen to say, we will stand up against Ebola, should be upheld. It's something that everybody should keep focused on, and we all have to keep doing what we do best so that we keep Ebola outside of—and we've used the platform for Ebola to do other things. We've used the chiefs to do a polio campaign, deworming, everything, we use the platform and we work along with UNICEF to do that, and there were good results and they are using it today. The Ministry of Health provided radios to our community women to listen to health programs so when they have specific issues and

concerns, they know how to report it. You have district health officers, you have county health officers, you have county teams, so you just need to report it as soon as [you can] and then actions will be taken. There are a lot of changes. Our work has gone back, but we have added responsibilities to make sure that we keep the community at peace, working along with our partners.

Q: Thank you. Mr. Flomoku, is there any other memory that you'd like to share before we end the interview?

Flomoku: Well, I mean, there are a lot of memories. Every time I look back at Ebola and what it did to us, it's a sad thing. Today when you go to a restaurant and you can go eat. In those days, nobody wanted to go to the restaurant because people were afraid. You offer somebody food if they're hungry, but they couldn't eat it, people in the taxis were afraid of each other. We were working in a country where you didn't want to come close to the next person to speak to them because you didn't know their status. All of those things happening, but Liberia is a great country, the people are strong in spirit, they are putting that behind them. I remember when there was a declaration about—the Ebola Declaration they called it, when Liberia was declared Ebola free. I could see people hugging, there was a big program with the president and all of the government officials coming together in the city, but what didn't happen was, at a level of the community, people would stay hidden at a level of the community. That kind of reunion, that kind of reassurance, that didn't happen at that level, it happened at the top. But yeah, in any case, it has happened, people died, people lost, the country lost. Some people also benefitted

from Ebola, people exploited people, there were price hikes, people used the situation to exploit the ordinary person. There were accusations that I cannot prove, I cannot speak too much here of corruption of Ebola funds and other things, but I know that the government has taken a stand and there were audits done with some other institution. But all in all, the government at the end of the day was able to fight [unclear] to make sure that this thing was taken care of, and the support that Liberia had from the international community actually was overwhelming and it became the use of that kind of goodwill, maybe in the future we'll have a similar situation, we'll be able to look at it because Sierra Leone had the worst cases. Same with Guinea. The thing is, we need to have a uniform resilience because what affects Guinea, Ivory Coast, and Sierra Leone affects Liberia. People move in every day, every day.

I still remember in one of the villages in Lofa County where the female chief had to assign youth who would sleep in the bushes to serve as guards because there were unofficial crossing points and people who crossed from Guinea to Liberia or from Liberia go. And then there was this thing passed that people who had Ebola were not allowed, and then by crossing into their towns and villages, they should report it. This chief was one of those that had been coming to our training, so when she went back, she enforced that. I went to her and we were talking and she said, "Pewee, you know that my kids will tell me to go to Monrovia." She had big people, children that are in the private sector or in government. They sent for her to come to be here. She said no. They wanted to go visit her, she said no. And the reason, I asked her, she said, "Because I made a law, so I have to set the example." A very strong female paramount chief from the Salayea District. She

said, “I have to set an example. Every night I put other people’s children out to go and serve as guards so that nobody will cross into our district so that we are not affected by Ebola. I cannot allow my children to come from the city to come and visit me, I don’t know their status. We will see after Ebola.” And she stuck with that. I thought that was very, very important. Many, many other chiefs took action—many, many other people took action so that together in their own small ways they added their power, their voices, to what happened in the war to fight Ebola.

Q: Thank you so much for your participation in this project. This is going to be a great resource. I appreciate you.

Flomoku: Thank you so much, and I appreciate this, and I want to thank you for the opportunity that I can be able to share some of the experiences, some of the moments I’ve had in my life as a person. I also want to thank the colleagues that I work with at the Carter Center and with the CDC, the many, many, many that came in and out, and we had exchanges, it’s a great memory. I hope that in the future, those that will be coming to Liberia know that Liberia is a good country, we are friendly people, and please try to help our people so that we stay out of trouble, so that we continue to maintain resilience against Ebola and other diseases that will come to our country and countries around the world. Peace.

Q: Perfect. Thank you so much.

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