Study on Public knowledge, attitudes, and Practices related to EVD prevention and medical care in Sierra Leone

Field Work Conducted: 20th - 25th August

Objectives

- Examine the public’s knowledge, attitudes, and practices related to Ebola Virus Disease (EVD) in Sierra Leone
- Identify barriers hindering the containment of EVD
- Use the study to inform evidence-based strategies in preventing the transmission of EVD and caring for those already infected and affected by the epidemic

Methodology

Administered a household survey to a random sample of 1413 people in Sierra Leone:

- West Area: Rural and Urban
- East: Kenema and Kailahun
- North: Kambia, Port Loko, and Koinadugu
- South: Moyama and Bo

Conducted in-depth interview and focus groups with traditional/religious leaders, health workers and teachers, local councils, law enforcement personnel

Key Findings

High level of awareness and low denial

- 100% aware of Ebola
- 97% believe it exists in SL
- 76% have heard of a survivor

Comprehensive knowledge on EVD is low

- 39% has comprehensive knowledge
- 50% rejects three misconceptions
- 79% accepts three main means of prevention

Positive attitudes towards EVD prevention

- 87% agree with statement that one should “avoid contact with blood and body fluids”
- 85% agree with statement that one can “protect oneself by avoiding funeral or burial rituals that require handling the body of someone who died of EVD”
- 91% agree with statement that a “person with Ebola has higher chance of survival if he/she goes immediately to a health facility”

There are serious misconceptions

- Almost a third of population thinks one can get Ebola from Mosquitoes (30%)
- 30% also believes Ebola is airborne
- 20% believe Ebola can be treated successfully by Spiritual Healers (in Western Area – urban & rural - this misconception is especially high).
- 42% believe that bathing with salt and hot water can prevent Ebola.
Nearly everyone is reporting some behavior change (95%)

- Wash hands with soap and water (66%)
- Clean hands with other disinfectants (37%)
- Avoid physical contact with people I suspect... (36%)

Risk perceptions are mixed and polarized

- Nearly everyone is reporting some behavior change (95%)

Radio by far the preferred means for receiving information about Ebola

- 85% Radio
- 28% House visits by health...
- 21% Television
- 18% Religious venues
- 13% Megaphone announcements
- 10% Mobile phone/Text messages
- 10% Community meetings
- 9% Newspaper/flyers/Brochures/...

Health professionals and Government/MOHS are the most trusted source of information

- 60% Health/medical...
- 48% Government/MoHS
- 36% The Media
- 8% Religious leaders...
- 8% Relatives and Friends
- 0.3% Traditional leaders

Very high level of stigma and discrimination towards Ebola victims

- 96% report some discriminatory attitude towards people with suspected or having (had) Ebola.
- 76% would not welcome someone back into their community after a neighbor recovered from Ebola.
- 32% believe that a school pupil fully recovered from Ebola will put other pupils in their class at risk of Ebola infection.
- 9% would keep the information secret if a family member contracts Ebola.

Recommendations

- Address misconceptions about the disease
- Clearly spell out modes of transmission in local lang.
- Develop clear messages on protective practices
- Develop special messages around community acceptance of Ebola affected persons and families
- Radio, Radio, Radio – must be maximally used
- Inter-personal engagement at grassroots level
- Effective use of television to tell Survivor Stories
- Strategic engagement with churches and mosques
- Information should come from health professionals and MoHS because they are the most trusted source