

STUDY ON PUBLIC KNOWLEDGE, ATTITUDES, AND PRACTICES RELATED TO EVD PREVENTION AND MEDICAL CARE IN SIERRA LEONE

Field Work Conducted: August 20th – 25th 2014



Objectives

- Examine the public's knowledge, attitudes, and practices related to Ebola Virus Disease (EVD) in Sierra Leone
- Identify barriers hindering the containment of the EVD epidemic
- 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 707 HH 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

Selection of Clusters/ EAs

Sampling frame: EAs List 2004 Census

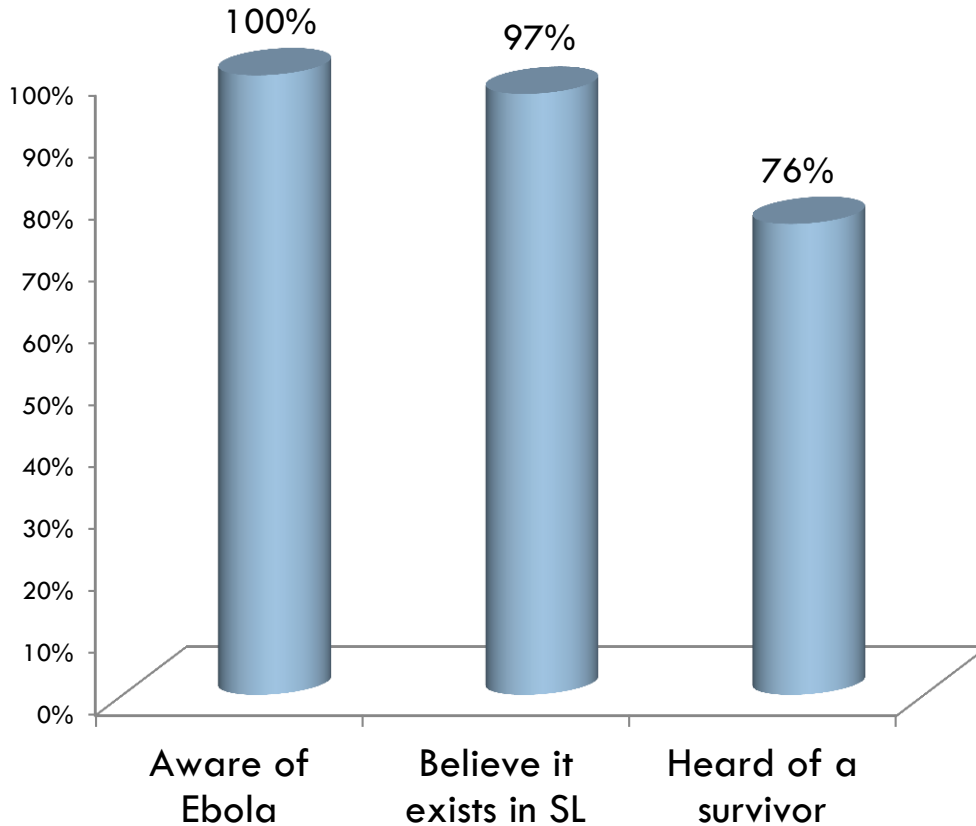
- An enumeration area within the district headquarter town was randomly selected

- Randomly selected second chiefdom from a list of chiefdoms 35 miles from Dist HQ.
 - ▣ The chiefdom HQ town then served as EA

- Randomly selected 2 wards in WR & 5 in WU
 - ▣ Randomly selected 3 EAs from WR
 - ▣ Randomly selected 7 EAs from WU

In each selected EA, households were selected using systematic random sampling

High awareness, low denial



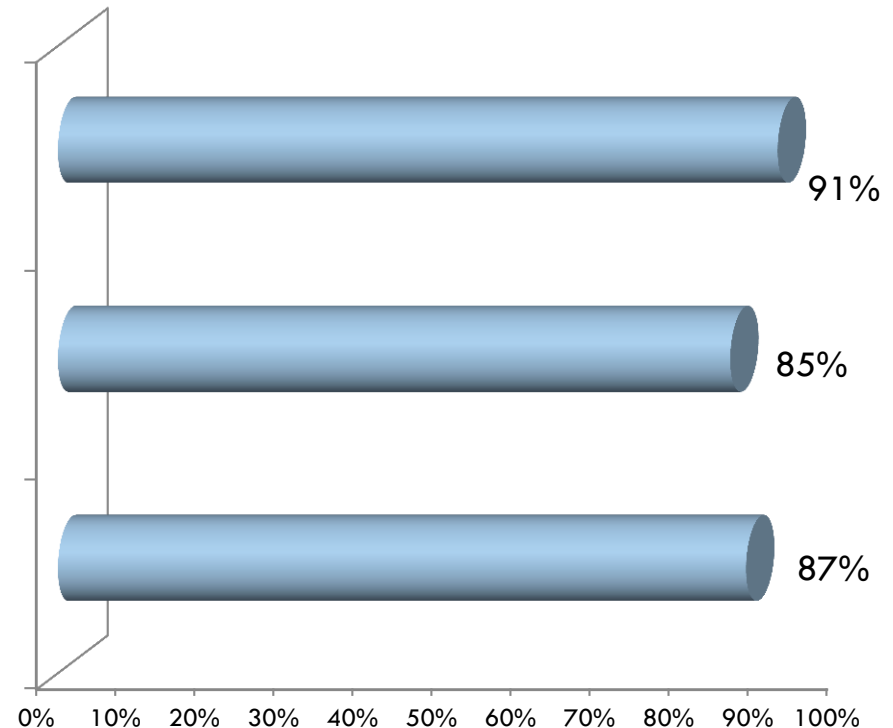
- “Ebola is Real” has resonated with the public
- Need to go beyond awareness raising

Positive perceptions/attitudes on means of EVD prevention and care

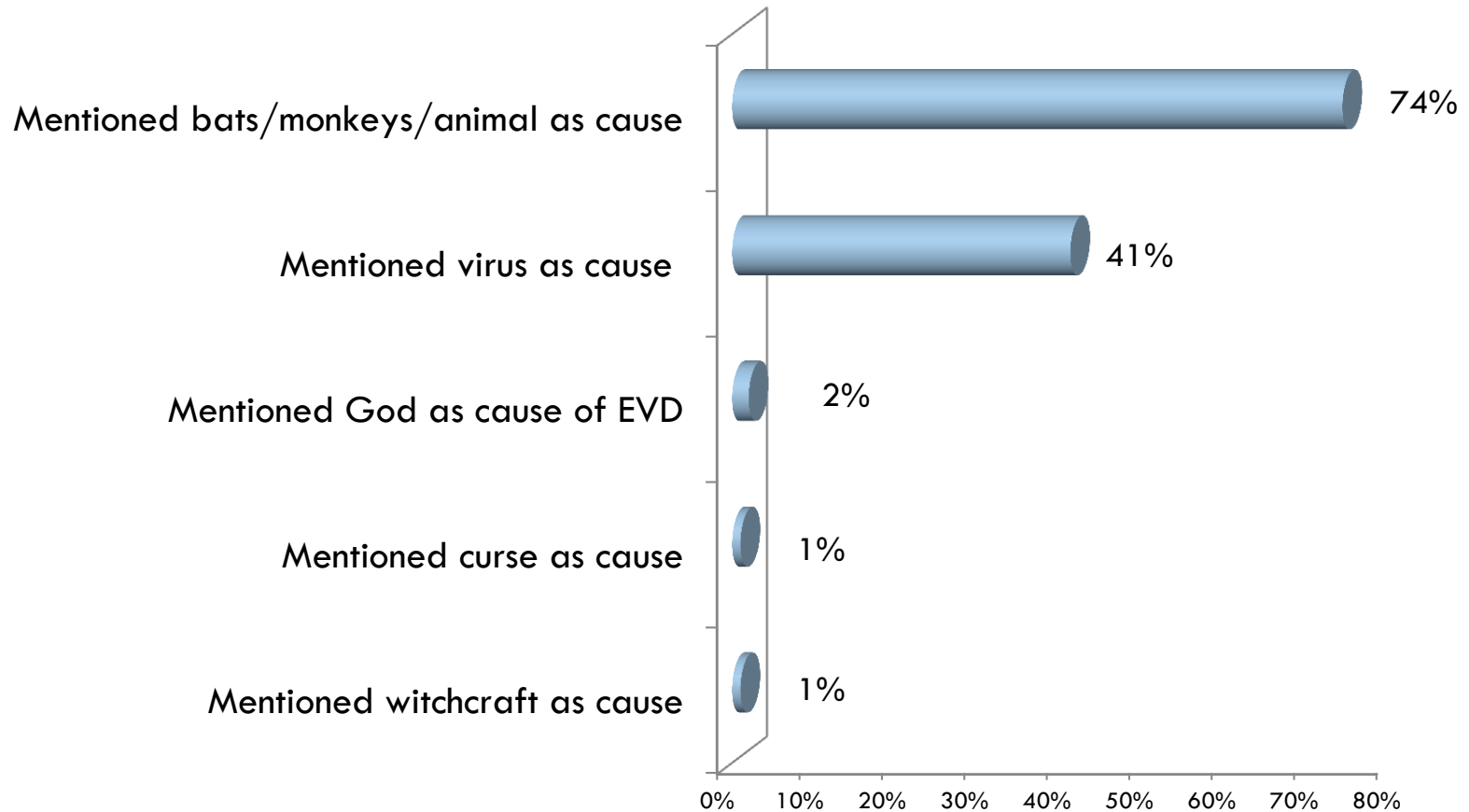
AGREE - person with Ebola has higher chance of survival if s/he immediately goes to a health facility

AGREE- avoid funeral or burial rituals that require handling the body of someone who died of Ebola

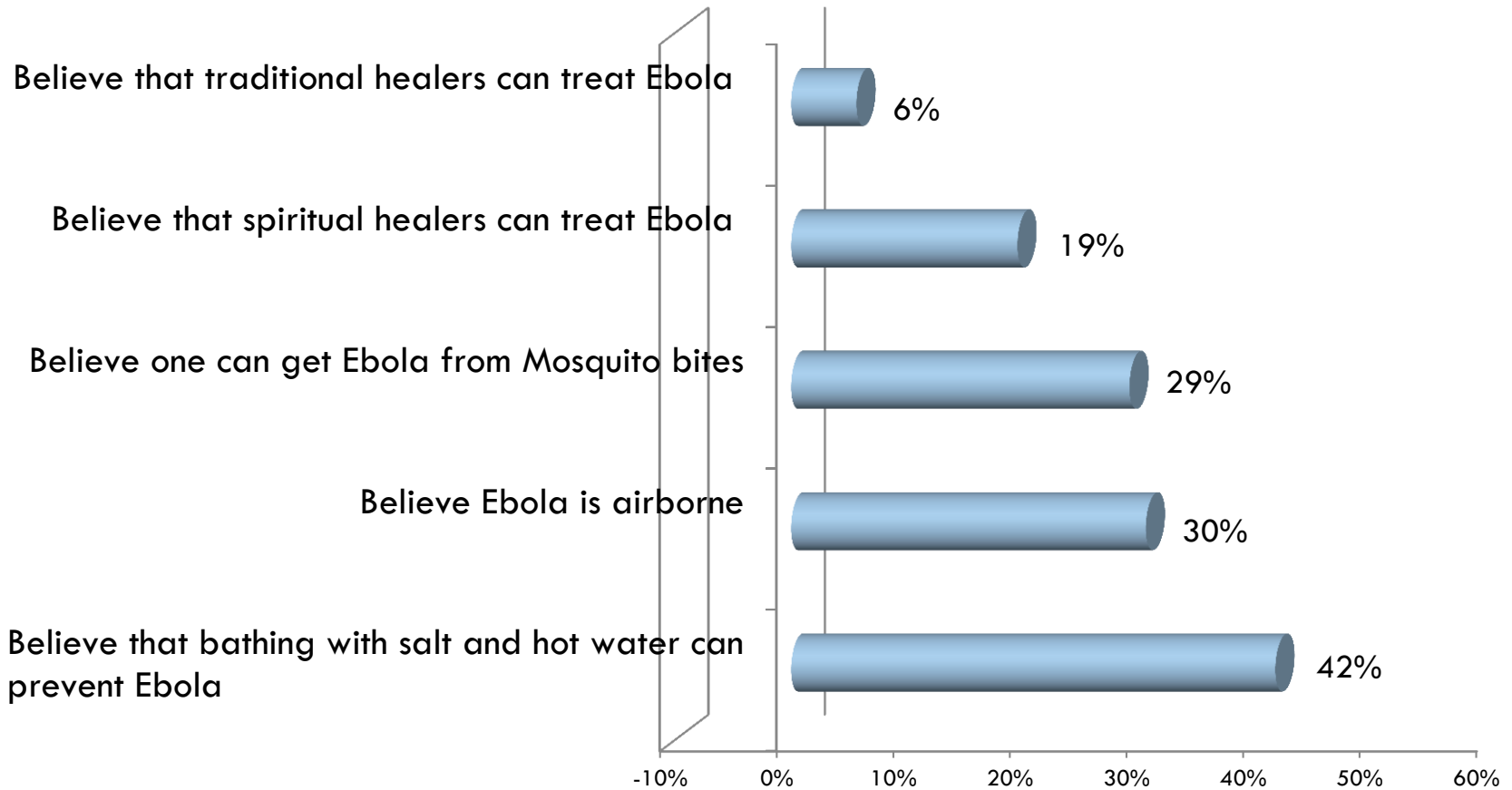
AGREE - avoid contact with blood and body fluids



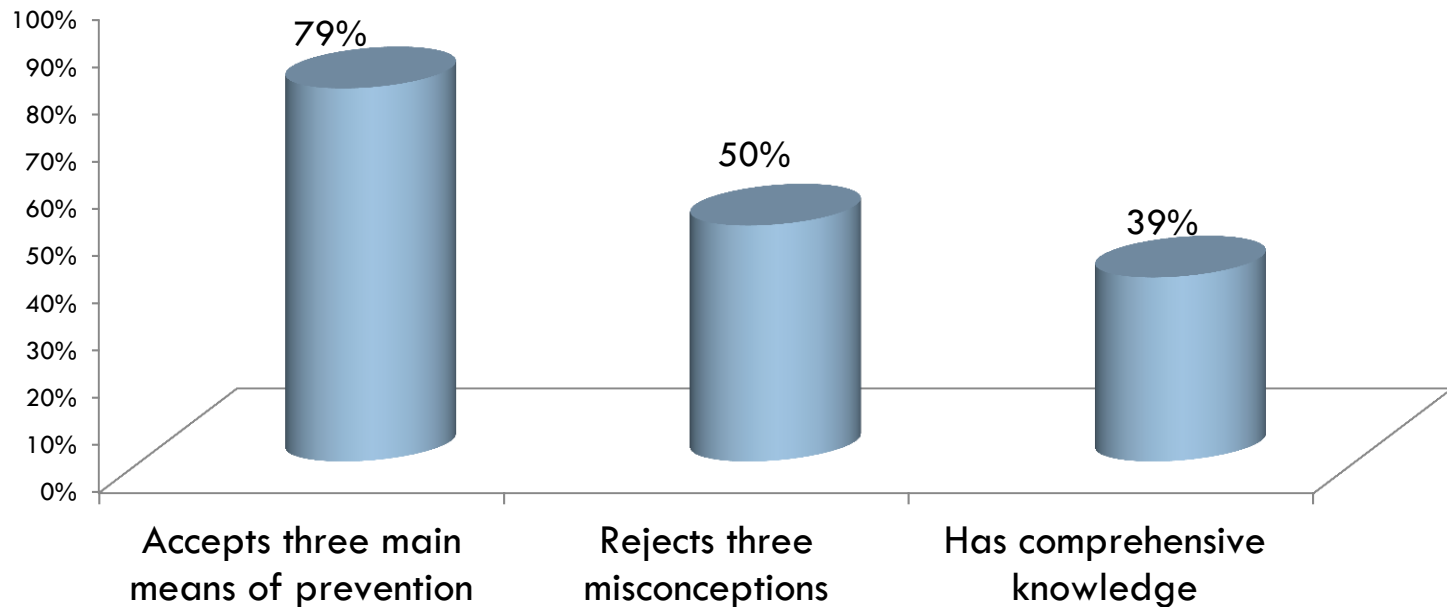
“Virus” less frequently mentioned/ perceived as cause of Ebola



Serious misconceptions



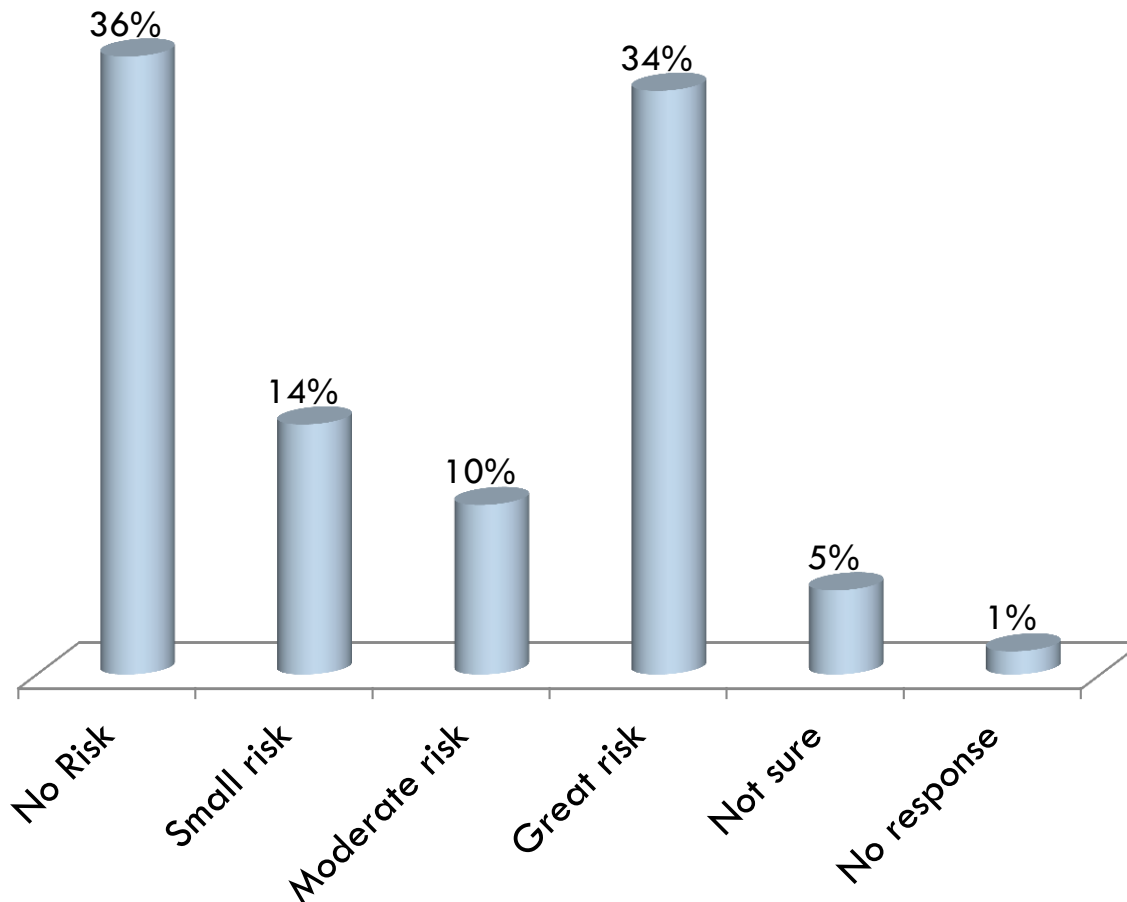
Low comprehensive knowledge on EVD



Accepts that EVD can be prevented by: avoiding contact with blood and body fluids; avoiding funeral or burial rituals that require handling the body of someone who has died from Ebola; immediately going to a health facility if suspected of having Ebola

Rejects that: traditional healers can treat Ebola successfully; spiritual healers can treat Ebola successfully; and bathing with salt and hot water can prevent Ebola

Risk perceptions are mixed



No Risk

“I do not get in contact with people who have Ebola”

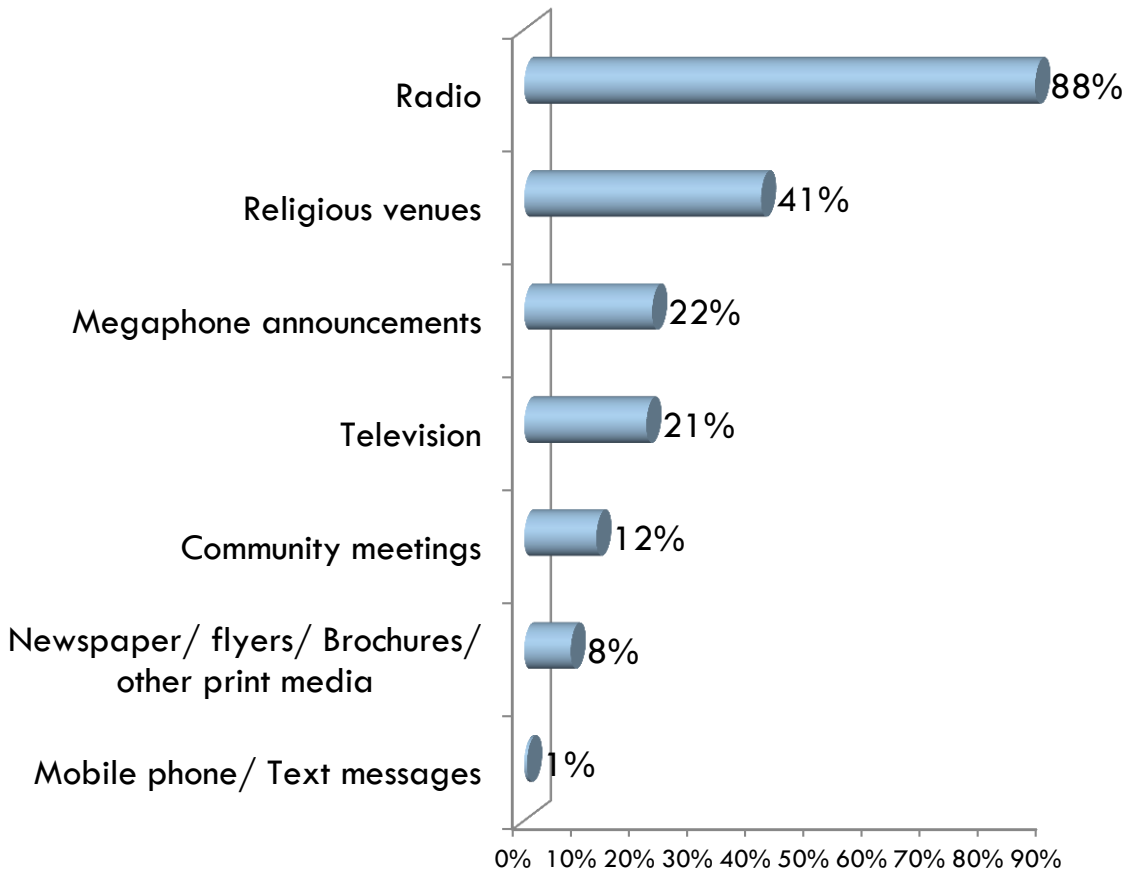
“God is protecting me”

“I don’t eat bush meat”

Great Risk

“Ebola is everywhere”

Current channels for receiving EVD information

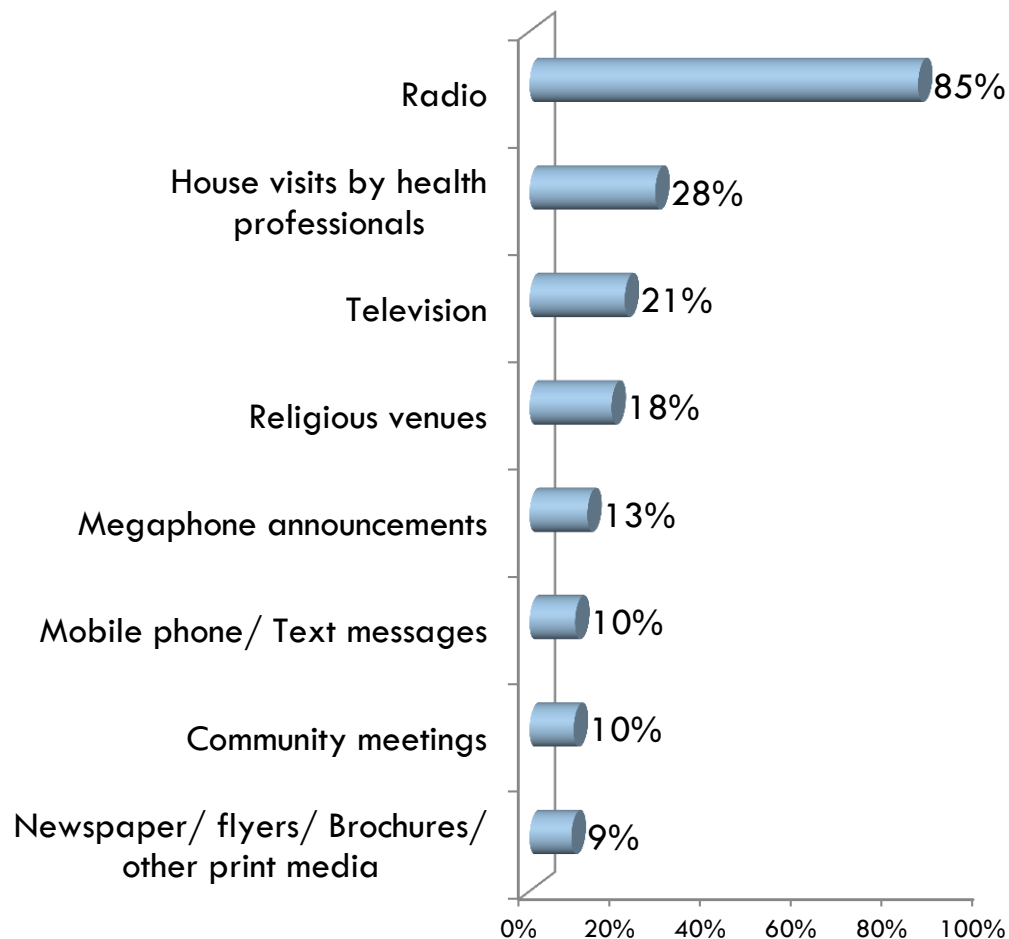


- **RADIO, RADIO, RADIO**

- **Churches and Mosques** have an even wider reach in the Epicenters – Kailahun, Kenema, P. Loko (65-75%)

- **Television** is also a wide-reaching channel in **urban** parts of the country such as Western Area and Bo

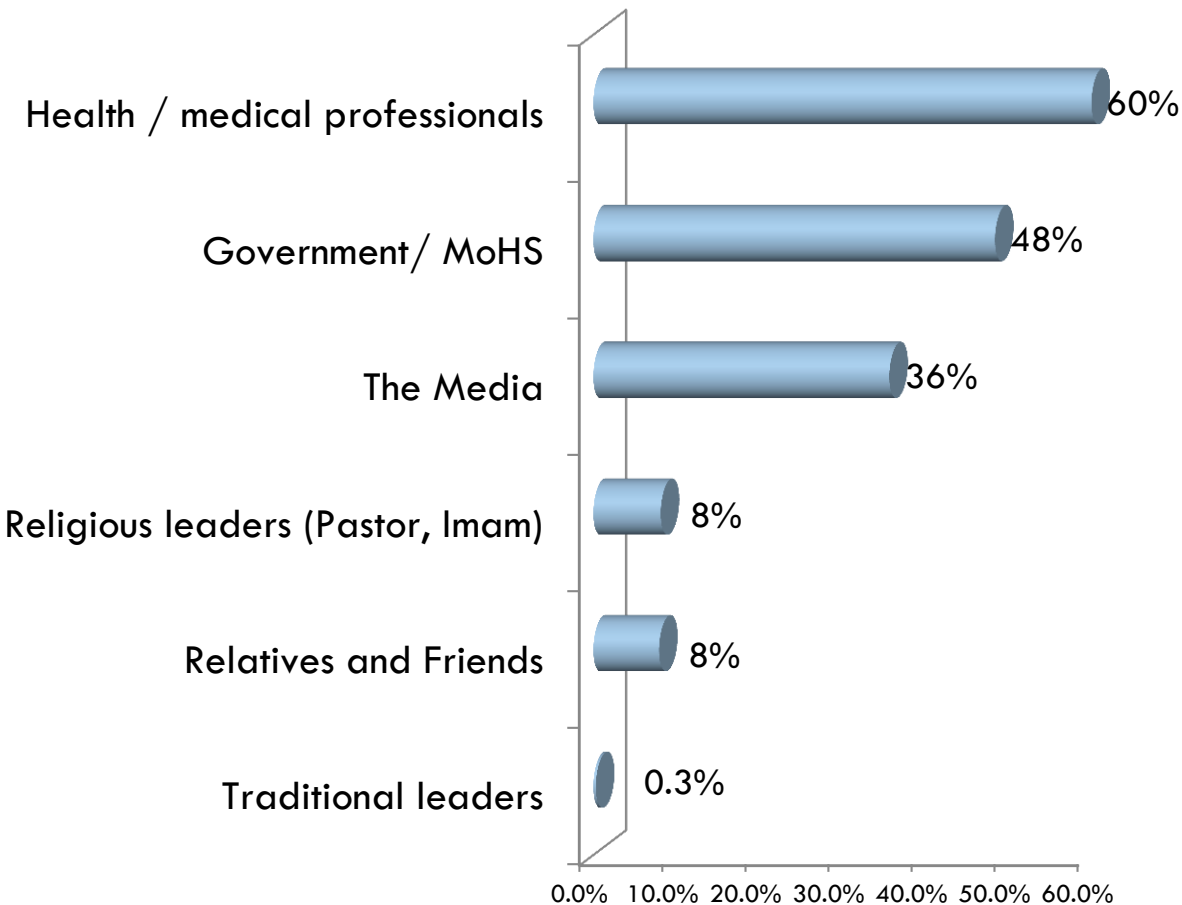
Preferred channels for receiving EVD info



- **Again: RADIO, RADIO, RADIO**

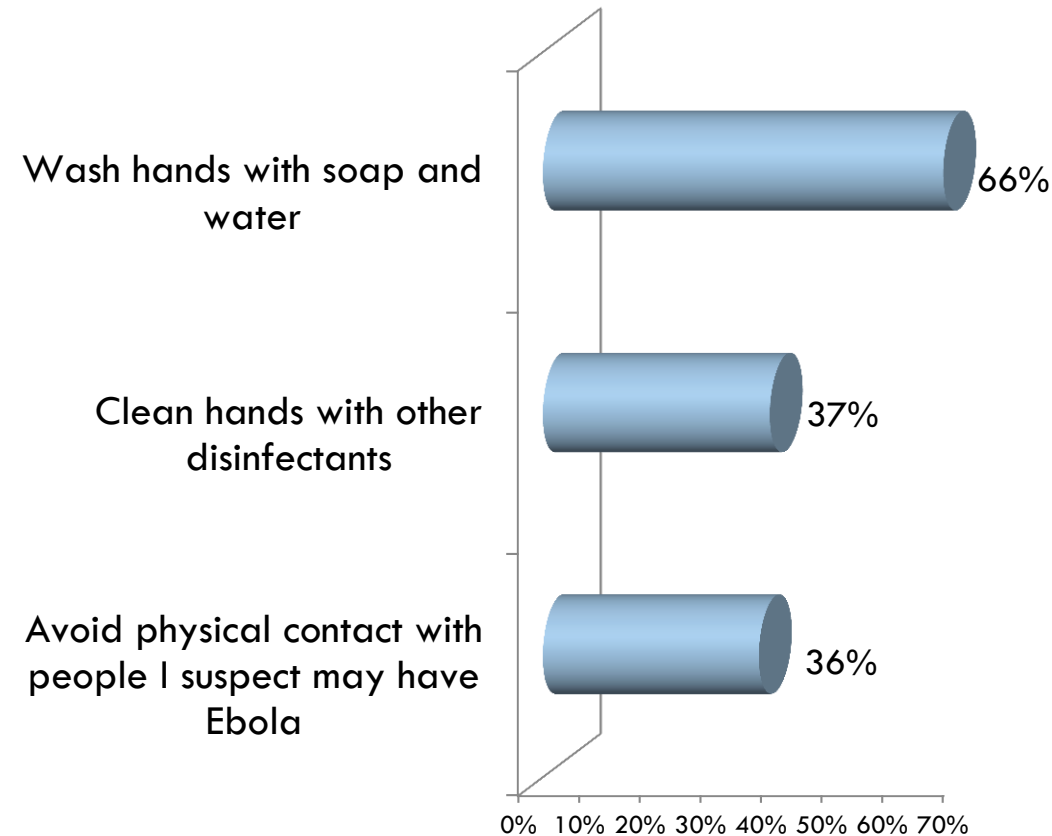
- House visits by health professional especially preferred in Epicenters – Kailahun, Kenema, Port Loko (54-63%)

Trusted sources of EVD information



- **Health professionals** are the most trusted source - especially in epicenters (67 – 86%)
- **Government/MoHS** is the second most trusted source of EVD related information

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



Hand washing with soap and water

Highest

Bo (84%)

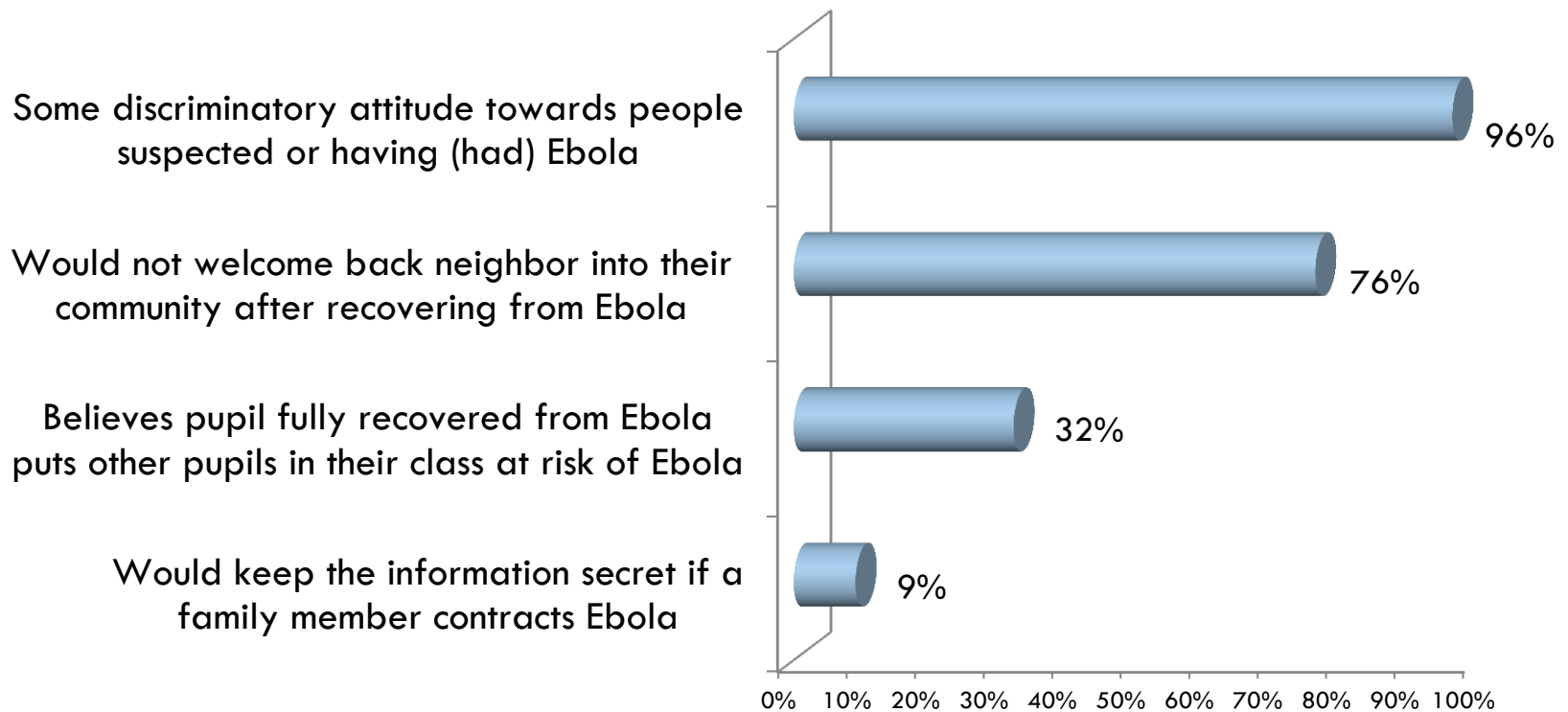
Koinadugu (82%)

Lowest

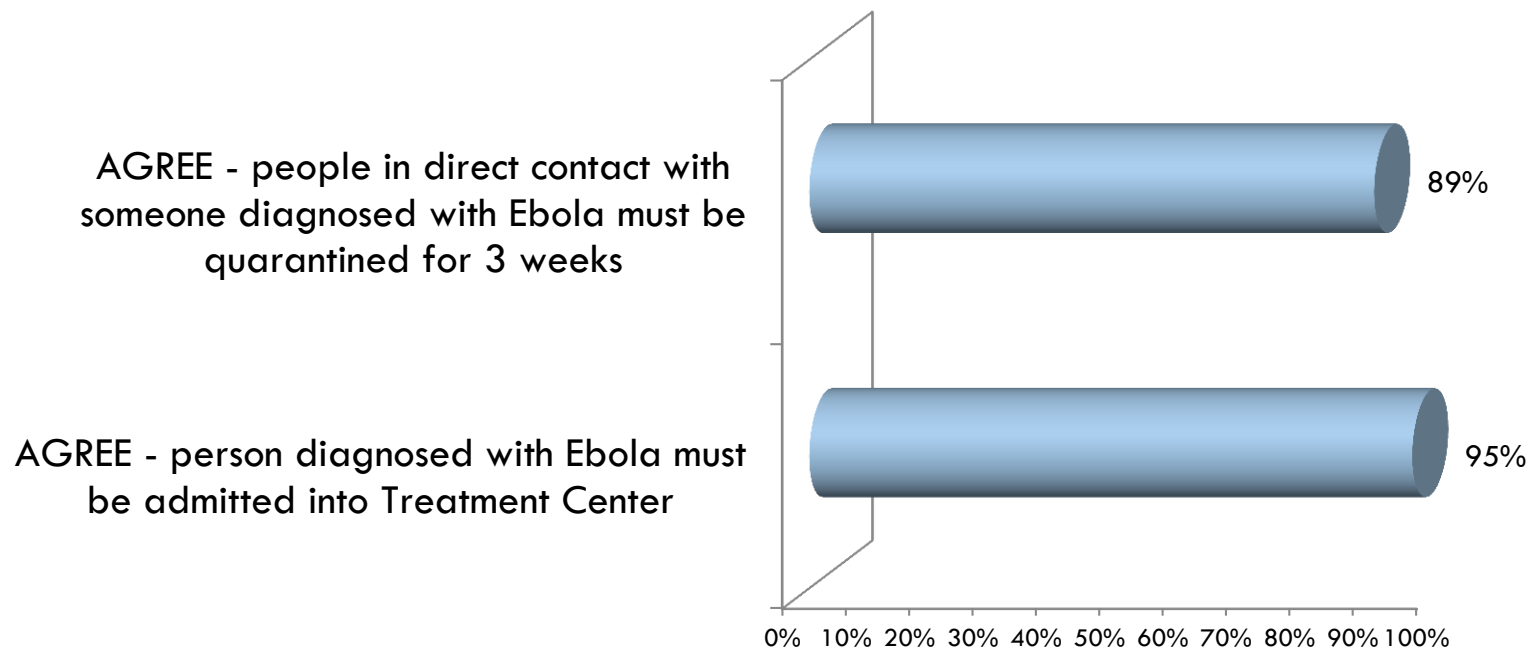
Western Rural (40%)

Port Loko (55%)

Very high level of stigma and discrimination towards Ebola victims



Very high acceptance levels towards use of holding centers & quarantining suspected Ebola cases



Ebola epidemic is having some negative effects on other essential health services

- 17% of interviewed parents with an Under-Five child reported missing scheduled vaccination < 3 months
 - ▣ 38% who missed attributed it to current Ebola situation
- 14% of interviewed pregnant women reported missing Antenatal Clinic
 - ▣ 10% who missed attributed it to current Ebola situation



RECOMMENDATIONS

Update National Social Mobilization Strategy and Plan

- Use evidence generated from the research to update and finalize the National Social Mobilization Strategy and Plan of Action

Target most at risk groups

- Heads of households / families with individuals suspected to have contracted EVD
- Individuals who participate in funeral/burial ceremonies and rituals (touching and washing of dead body)
- Other vulnerable groups
 - ▣ People in hotspots and quarantine areas, street children, adolescents/youths, commercial sex workers
- Survivors of EVD (stigma and discrimination) – also to educate then on protected sex

Refocus Messaging (SPES)

- Shift from Awareness Creation (Ebola is Real) to **Actions** relating to **prevention of risky practices, misconceptions and stigma**
- Prioritize key messages and social support for:
 - **avoiding burial ceremonies and rituals** that involve the washing or touching of the dead body
 - safe home-based care while waiting for help
- Emphasize **human-to-human transmission** of the disease
- Shift from DOOM to HOPE
 - Use survivor stories to create a hopeful narrative

Prioritize preferred channels and trusted sources

Health professionals on Radio and Television

- More effective use of health professionals on Radio and TV to educate the public about EVD

Survivors on Television

- More effective use of television to tell survivor stories

Churches and Mosques as EVD information channels

- Churches and mosques should use relevant citations from the Quran and Bible to support key messages on Ebola

Provide policy guidelines on EVD

Practical guidelines on alternative & safe burial practices

- Showing respect and dignity to the dead and bereaved families

Practical guidelines on home-base

- Protective measures to help family members take the right action to support loved ones suspected to have Ebola

Ensure rapid response to community calls in relation to infected or dead persons suspected of Ebola