Follow-up Study on Public Knowledge, Attitudes, and Practices Relating to EVD Prevention and Medical Care

KAP 4
Preliminary Findings
KAP-4

- Nationally representative random sample (n=3564)
  - Multi-stage cluster sampling
- District-specific estimates for Western Area, Kambia, and Port Loko
BLUF: Bottom Line Up Front

• Substantial reduction in misconceptions & increase in knowledge

• Perception that Ebola is no longer a threat at national, district, and community, and household levels - especially in the ‘silent’ districts and Western

• Compared to Dec ’14: more people now reject burials NOT involving the washing/touching of the deceased family member

• Major improvement in Burial Team response-time but some delays persist

• Substantial objection to riding in an ambulance if sick - especially in Western

• Stigma/discriminatory attitudes remain the same as in Dec’ 14

• For Recovery work-- core confidence in health care system exists but needs strengthening, especially in ‘silent’ districts
30% of respondents said Ebola is no longer a threat in Sierra Leone.
25% of respondents reported not knowing how long SL must go without new cases to be declared Ebola-Free.
High intention to wait for Burial Team and avoid contact with the corpse while waiting

Would wait for burial team if family member died

Would NOT have contact with the corpse while waiting

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<th>KAP 2</th>
<th>KAP 3</th>
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<tbody>
<tr>
<td>Would wait</td>
<td>87%</td>
<td>97%</td>
<td>95%</td>
</tr>
<tr>
<td>Would NOT contact</td>
<td>91%</td>
<td>95%</td>
<td>96%</td>
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Compared to Dec ‘14: Increased rejection of burials not involving washing of the corpse; especially in Western Area

- KAP 2: 33%
- KAP 3: 11%
- KAP 4: 20%
- KAP 4 - W.Area: 34%
- KAP 4 - Kambia: 19%
- KAP 4 - P.Loko: 7%
- Rest of country: 18%
Compared to Dec’ 14: Reduction in respondents reported having contact with corpse during burial/funeral

Participation in burial/funeral
• Higher in ‘silent’ districts (11%)
• Lower in ‘active’ districts (5%)
p<0.05

Participated in burial/funeral in <30 days
Had contact with corpse during burial/funeral
Increased proportion of 117 calls (41%) are related to reporting deaths

- Get health information on Ebola: KAP 1 (18%), KAP 2 (18%), KAP 3 (11%), KAP 4 (8%)
- Report a death: KAP 1 (18%), KAP 2 (18%), KAP 3 (31%), KAP 4 (41%)
- Report a suspected case: KAP 1 (37%), KAP 2 (40%), KAP 3 (36%)
- Want to know if the number is working: KAP 1 (14%), KAP 2 (13%), KAP 3, KAP 4
Substantial improvements in responding to death/sick alerts within 4 hours; BUT 11% not responded to for 2+ days

* Called to report death/sick person in 2015 (n=97)
35% of respondents don’t intend to ride in an ambulance if sick today; or even after Ebola (33%)
Steady decline in misconceptions about EVD transmission, prevention, and treatment

- Believe that bathing with salt and hot water can prevent Ebola: 42% KAP 1, 36% KAP 2, 27% KAP 3, 16% KAP 4
- Believe Ebola is transmitted through air: 30% KAP 1, 24% KAP 2, 15% KAP 3, 10% KAP 4
- Believe Ebola is transmitted through mosquito bites: 30% KAP 1, 30% KAP 2, 20% KAP 3, 10% KAP 4
- Believe that spiritual healers can treat Ebola: 19% KAP 1, 12% KAP 2, 5% KAP 3, 5% KAP 4
- Believe that traditional healers can treat Ebola: 6% KAP 1, 3% KAP 2, 1% KAP 3, 1% KAP 4
Substantial increase in comprehensive knowledge due to reduction in misconceptions

- Accept three means of prevention/treatment: KAP 1 (79%), KAP 2 (90%), KAP 3 (91%), KAP 4 (90%)
- Reject three misconceptions: KAP 1 (50%), KAP 2 (53%), KAP 3 (63%), KAP 4 (78%)
- Have comprehensive knowledge: KAP 1 (39%), KAP 2 (48%), KAP 3 (56%), KAP 4 (69%)
No improvement b/w Dec ‘14 & July ‘15 in reducing stigma/discriminatory attitude toward EVD survivors

- Some discriminatory attitude towards Ebola survivors
  - KAP 1: 46%
  - KAP 2: 38%
  - KAP 3: 41%
  - KAP 4: 41%

- Would not buy fresh vegetables from a shopkeeper who survived Ebola
  - KAP 1: 67%
  - KAP 2: 31%
  - KAP 3: 15%
  - KAP 4: 15%

- Believes pupil fully recovered from Ebola puts other pupils in class at risk of Ebola
  - KAP 1: 75%
  - KAP 2: 32%
  - KAP 3: 20%
  - KAP 4: 28%

- Would not welcome back neighbor into their community after recovering from Ebola
  - KAP 1: 75%
  - KAP 2: 14%
  - KAP 3: 8%
  - KAP 4: 8%
KAP 4: 12% of respondents won’t send their child to a school with a student who survived Ebola
Some improvements in hand washing with soap
BUT reduction in avoidance of physical contact

- Wash hands with soap and water: 87% (KAP 1), 80% (KAP 2), 66% (KAP 3), 36% (KAP 4)
- Avoid crowded places: 56% (KAP 1), 50% (KAP 2), 54% (KAP 3), 36% (KAP 4)
- Do not participate in burials involving handling of the body: 50% (KAP 1), 51% (KAP 2), 44% (KAP 3), 28% (KAP 4)
- Avoid physical contact with everyone: 52% (KAP 1), 55% (KAP 2), 45% (KAP 3), 36% (KAP 4)
- Avoid physical contact with people I suspect may have Ebola: 46% (KAP 1), 45% (KAP 2), 35% (KAP 3), 36% (KAP 4)
RADIO remains the leading source for receiving EVD information; followed by mosques/churches.

* Open-ended, multiple selection question
Stronger confidence in health care system to handle non-Ebola related illnesses but lower in ‘silent’ districts

Very Confident - Treat Ebola: 52% All Districts, 58% Active Districts, 49% Silent Districts
Very confident - Immunization: 62% All Districts, 69% Active Districts, 53% Silent Districts
Very confident - Antenatal care: 61% All Districts, 69% Active Districts, 57% Silent Districts
Very Confident - Non EVD illnesses: 63% All Districts, 68% Active Districts, 60% Silent Districts
42% of respondents directly know at least one person who was quarantined, died of EVD, or survived EVD.
Additional findings

• 70% reported decrease in earnings/wages since Ebola

• 27% believe that taking sick people to traditional healers is a reason for people dying of EVD
Recommendations

• Strengthen community buy-in on the continued need for Safe Dignified Medical Burials despite recording few or no cases

• Continue to improve Burial Team response time

• Build trust and promote confidence in the use of ambulances

• Address complacency – especially in the ‘silent’ districts & Western Area
  – Educate the public on “Zero for 42” or whatever the appropriate definition is
  – Emphasize that a single case in SL poses serious threat to all of SL

• Intensify social mobilization efforts promoting the acceptance and integration of Ebola Survivors -- especially for school children who are Ebola survivors

• Deepen engagement with traditional healers in the final push to zero