

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

Conducted: 20<sup>th</sup> - 25<sup>th</sup> August

## Objectives

- Examine the public's knowledge, attitudes, and practices related to Ebola Virus Disease (EVD) in Sierra Leone
- Identify bottlenecks preventing the spread 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

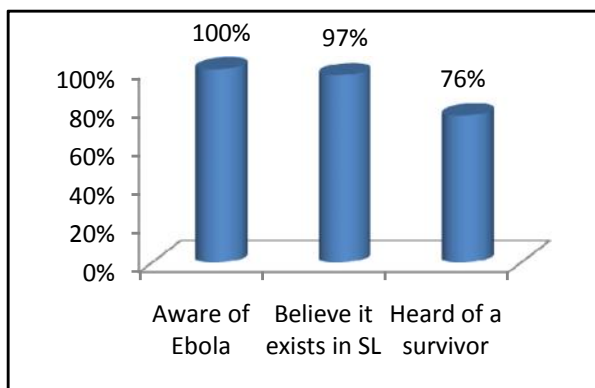
Administered a household survey to a random sample of 1413 people in Sierra Leone:

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

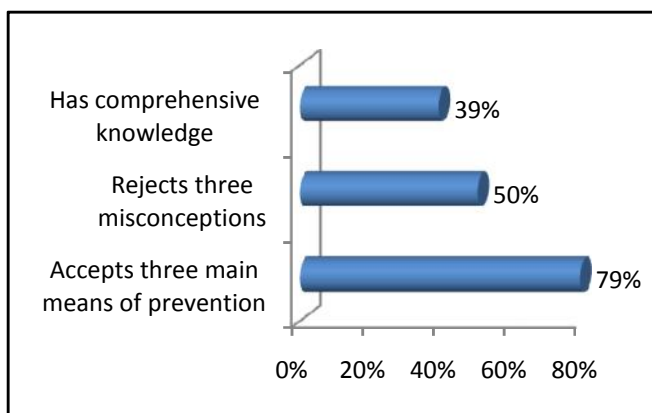
Conducted in-depth interview and focus groups with traditional/religious leaders, health workers and teachers, local councils, law enforcement personnel

## Key Findings

### High level of awareness and low denial



### Comprehensive knowledge on EVD is low



### Positive attitudes towards EVD prevention

- 87% agree with statement that one should “**avoid contact with blood and body fluids**”

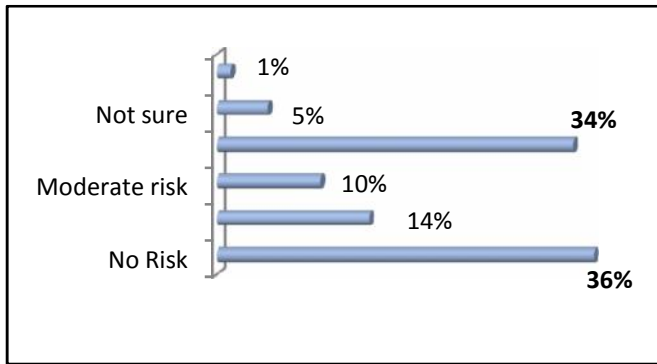
85% agree with statement that one can “**protect oneself by avoiding funeral or burial rituals that require handling the body of someone who died of EVD**”

91% agree with statement that a “**person with Ebola has higher chance of survival if he/she goes immediately to a health facility**”

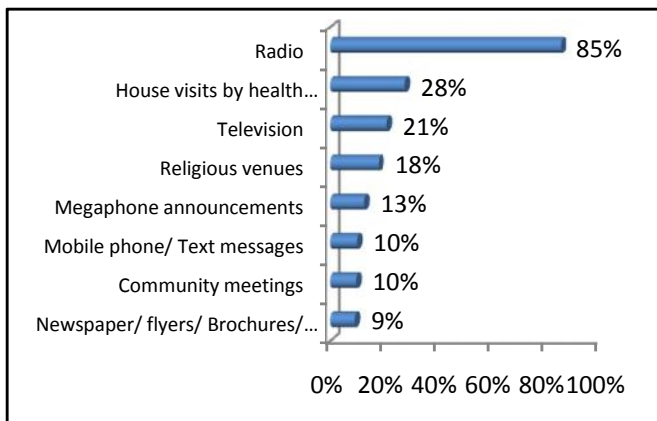
### There are serious misconceptions

- 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.

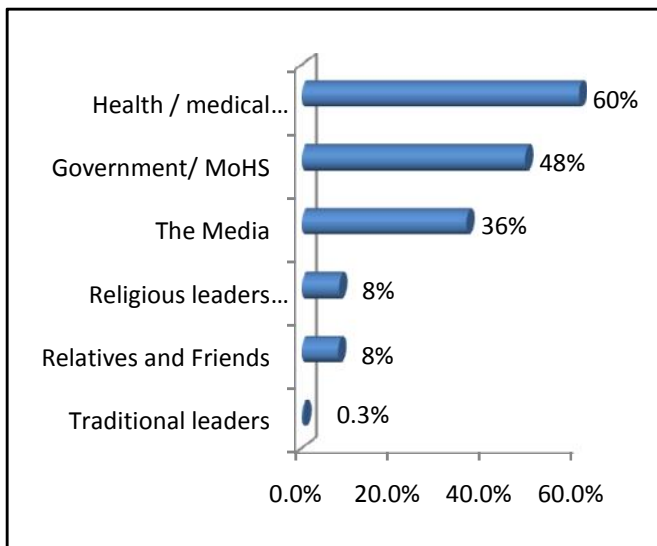
## Risk perceptions are mixed and polarized



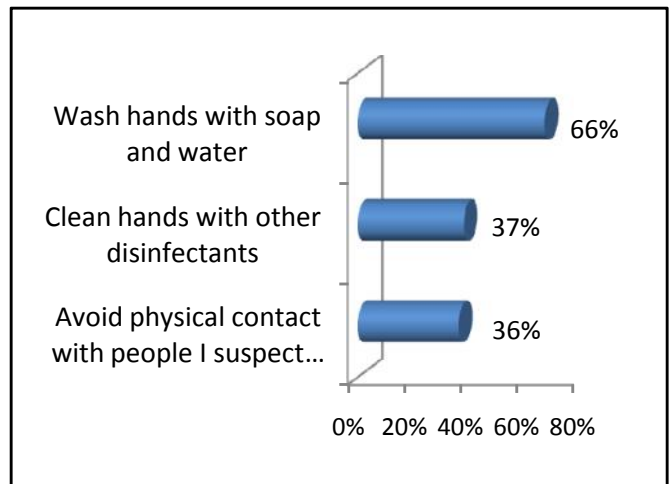
## Radio by far the preferred means for receiving information about Ebola



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



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



## 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 survival stories
- Strategic engagement with churches and mosques
- Information should come from health professionals and MoHS because they are the most trusted source