An assessment of cultural perceptions and recognition of Ebola virus disease, and its correlation with traditional burial practice in rural Guinea

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BACKGROUND

West Africa faced the largest Ebola outbreak between during 2014-2016 with 11,310 lives, more than all other outbreaks combined.

The humanitarian response to control the disease was hampered in part due to a limited understanding of local rituals including traditional medicine and West African funeral rituals. Forceful removal of the sick or dead from the community was highlighted as one particularly problematic intervention. Despite the perceived investment in Ebola social mobilization campaigns in West Africa during the outbreak, there remain gaps in the evaluation of these campaigns and whether knowledge about Ebola leads to any behavior change including traditional burial practices.

OBJECTIVES

Our objective is to understand the extent of knowledge of Ebola 1 year into the outbreak and the association between that knowledge and traditional burial practices.

RESULTS

Most respondents had correct knowledge about PTP (79.2%), transmission from a corpse (79.5%), and PPE (86.6%) but low knowledge about the cause of Ebola (36.6%). Respondents were more likely to visit government health care providers (34.8%) and use medication in the last month (46.6%) compared to visiting traditional medicine specialists (23.9%) and using traditional medicine in the last month (30.4%).

After controlling for the three confounders (demographics, knowledge of Ebola etiology & symptoms, and access to medical care), there was no significant association between traditional burial practices and knowledge about PTP (PTP infection: 12.2 percentage points, P < 0.1 by one-tailed test; body PTP infection: -1.5 percentage points, P > 0.1) & PPE (5.8 percentage points, P > 0.1).

CONCLUSIONS

In West Africa, many believe that funerary and burial practices are a crucial step in transitioning from the living world to the spiritual one. Traditional burial practices were important in the emergence and transmission of Ebola. Our results imply that knowledge about PTP & PPE does not translate to respondents stopping unsafe burial practices. However, knowledge about Ebola symptoms is associated with respondents having safer burial practice behavior.

Social mobilization campaigns were propagated but little rigorous evaluation has been done to understand how knowledge about disease influences risky behaviors. To prevent another Ebola outbreak, culturally-appropriate interventions that address traditional burial practices are critical.

REFERENCES


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