



Dispatch No. 346 | 28 February 2020

## Sierra Leoneans say health care hard to access, beset by corruption – especially for the poor

Afrobarometer Dispatch No. 346 | Josephine Appiah-Nyamekye Sanny

### Summary

A decade-long civil war (1991-2002) and a 2014 Ebola outbreak left Sierra Leone's health-care system in a poor state, including inadequate infrastructure and staff (Ministry of Health and Sanitation, 2017). With 1,165 deaths per 100,000 live births recorded in 2017, Sierra Leone has one of the world's highest rates of maternal and infant mortality (United Nations Population Fund, 2017).

In 2010, the government removed some financial barriers to basic health care through its Free Health Care Initiative for pregnant women, lactating mothers, and children aged less than 5 years (Witter et al., 2017). And the Health Sector Recovery Plan 2015-2020 aims to ensure "high quality, accessible, affordable and equitable" health care for all Sierra Leoneans (Ministry of Health and Sanitation, 2017). But corruption in the health sector – both bribery and unauthorized charges – seems to persist (Mitchell, 2017).

The most recent Afrobarometer survey in Sierra Leone, conducted in July 2018, reveals that many citizens report difficulties and delays in accessing care at public hospitals and clinics. About half of those who sought care say they had to pay a bribe – a particularly frequent experience among poor and less-educated respondents.

### Afrobarometer surveys

Afrobarometer is a pan-African, nonpartisan survey research network that provides reliable data on Africans' experiences and evaluations of quality of life, governance, and democracy. Seven rounds of surveys have been completed in up to 38 countries since 1999. Round 8 surveys in 2019/2020 are planned in at least 35 countries. Afrobarometer conducts face-to-face interviews in the language of the respondent's choice with nationally representative samples.

The Afrobarometer team in Sierra Leone, led by ITASCAP, interviewed 1,200 adult Sierra Leoneans in July 2018. A sample of this size yields country-level results with a margin of error of +/-3 percentage points at a 95% confidence level. Campaign for Good Governance (CGG) and Lena Thompson are responsible for disseminating the key findings of the survey. Previous surveys have been conducted in Sierra Leone in 2012 and 2015.

### Key findings

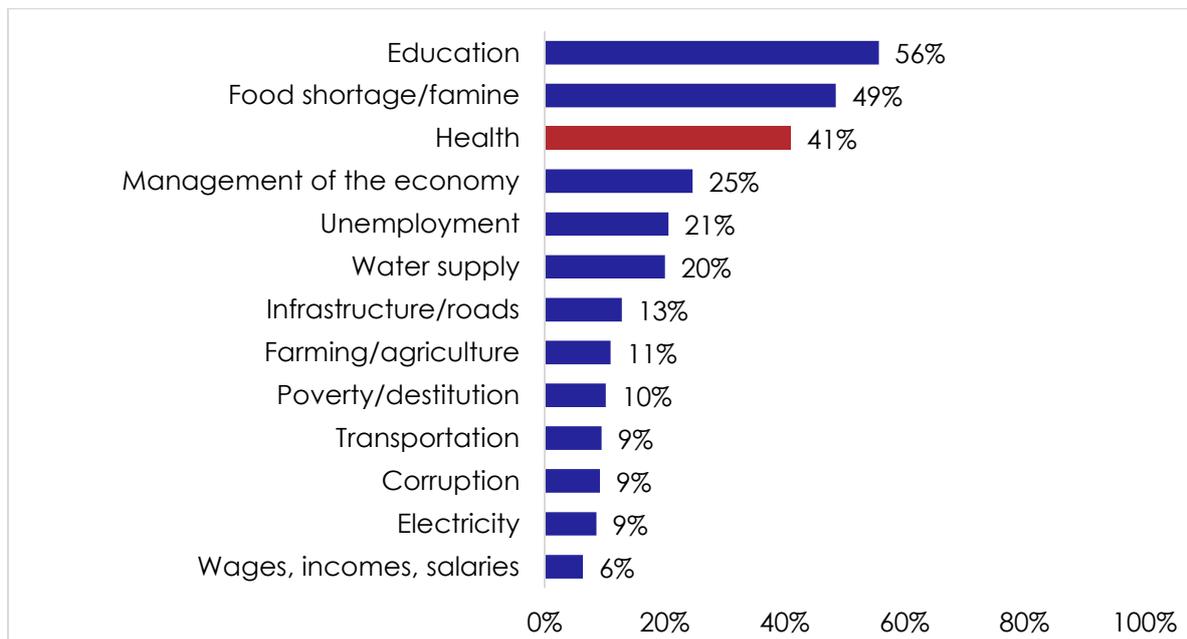
- As of mid-2018, health ranked third among the most important problems that Sierra Leoneans want their government to address (cited by 41%), following education (56%) and food shortage (49%).
- Among respondents who had contact with key public services during the previous year:
  - More than half (54%) said it was difficult to obtain medical care.

- Four in 10 (40%) said they either received the medical care they sought “after a long time” or never received it at all.
  - And half (50%) said they had to “pay a bribe, give a gift, or do a favour” to get the care they needed.
  - Poor citizens were three times as likely as the best-off to say they had to pay a bribe to get medical care (64% vs. 21%) and found it difficult to access care (68% vs. 23%). Similarly, less-educated citizens were more likely to be victimized by corruption (61% of those with no formal education vs. 45% of those with post-secondary qualifications).
- Despite concerns about their health-care system and the prevalence of bribery, a slim majority (53%) of Sierra Leoneans said, as of mid-2018, that the government was doing “fairly well” or “very well” on improving basic health care, and even more (66%) gave the government good marks on fighting corruption.

### Health as a priority

When asked what they think are the most important problems facing the country that government should address, four out of 10 Sierra Leoneans (41%) cited health among their top three priorities. Health trailed only education (cited by 56%) and food shortages (49%) among citizens' priorities, well ahead of management of the economy (25%) and unemployment (21%) (Figure 1).

**Figure 1: Most important problems | Sierra Leone | 2018**

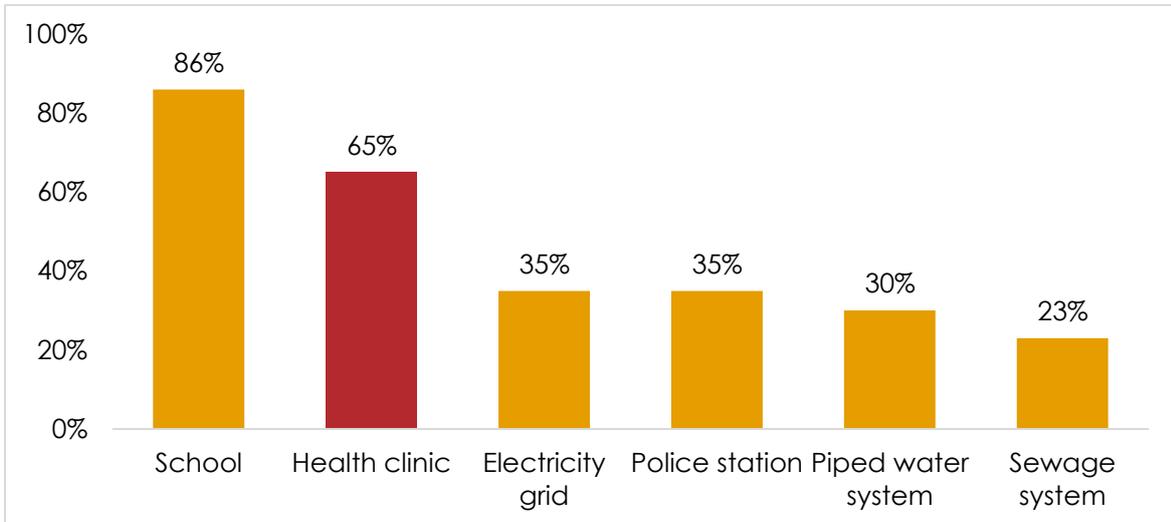


**Respondents were asked:** *In your opinion, what are the most important problems facing this country that government should address? (Respondents could give up to three answers.)*

### Access to public services

Afrobarometer collects data on the physical presence of basic infrastructure, including health facilities, through onsite observations by field interviewers. In Sierra Leone, the interviewers found that two-thirds (65%) of citizens live “within easy walking distance” of a public or private health clinic. Schools are more common (86%), while only about one-third or fewer of respondents have a nearby police station (35%) or live in zones served by an electricity grid (35%), a piped water system (30%), and a sewage system (23%) (Figure 2).

**Figure 2: Presence of public service infrastructure | Sierra Leone | 2018**

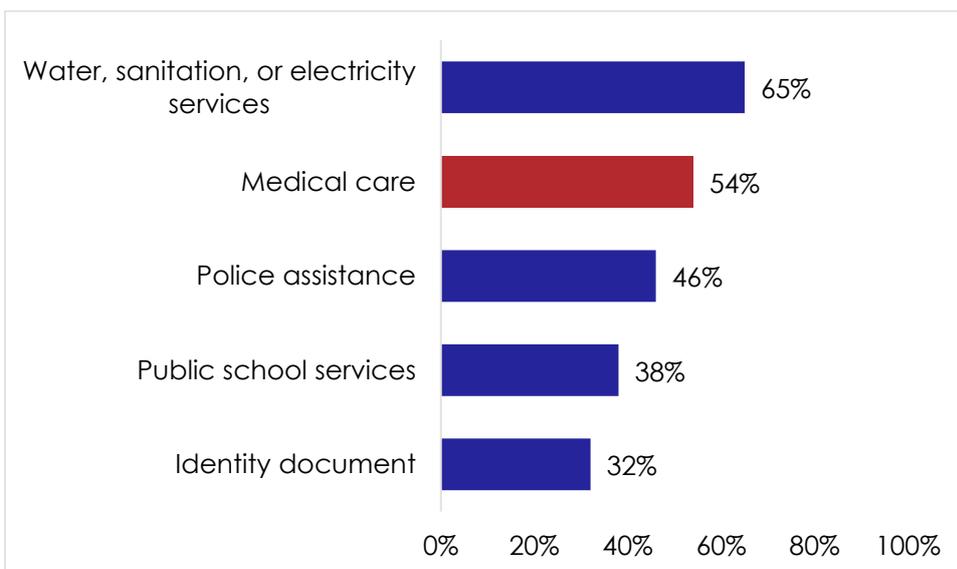


*Survey enumerators recorded the presence or absence in the enumeration area of health clinics as well as schools, electricity grids, police stations, piped water, and sewage systems.*

But among the 59% of respondents who had contact with a public hospital or clinic during the previous 12 months, a majority (54%) said it was “difficult” or “very difficult” to obtain the care they needed. Among key public services that Afrobarometer asked about, only household utilities (water, sanitation, or electricity services) were considered harder to obtain (65%) (Figure 3).

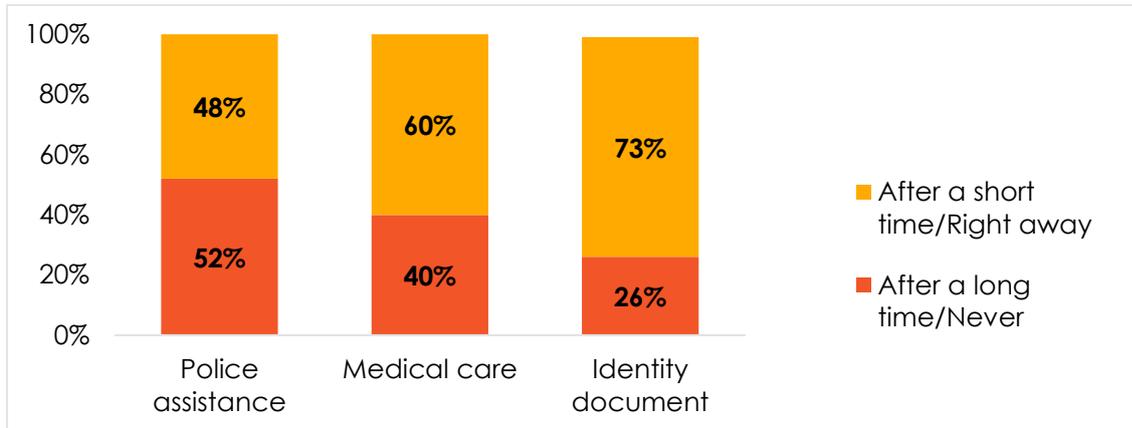
Four in 10 respondents (40%) also said they had to wait “a long time” to receive care or “never” received the care they needed, while six in 10 (60%) said they received care “right away” or “after a short time.” By comparison, more than half (52%) said that police assistance came “after a long time” or “never,” while fewer (26%) complained of delays in obtaining identity documents (Figure 4).

**Figure 3: Difficult to obtain services | Sierra Leone | 2018**



*Respondents who had contact with key public services in the previous 12 months were asked: How easy or difficult was it to obtain [the needed services]? (% who said “difficult” or “very difficult”). (Note: Those who had no contact with these services during the previous year are excluded.)*

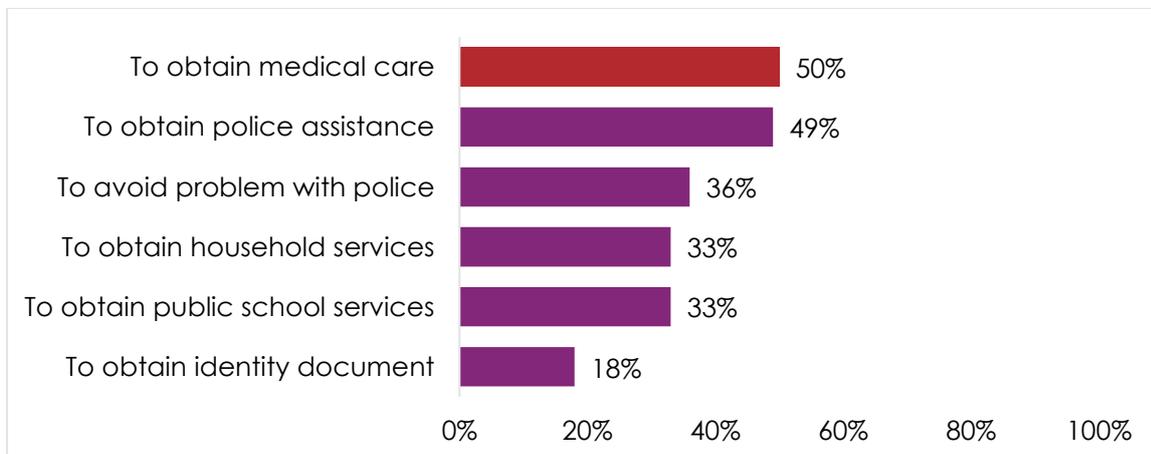
**Figure 4: Time required to obtain public services | Sierra Leone | 2018**



**Respondents who had contact with key public services were asked:** How long did it take for you to obtain [the needed services]? (Note: Those who had no contact with these services during the previous 12 months are excluded.)

Moreover, fully half (50%) of Sierra Leoneans who sought medical care at a public health facility during the previous year said they had to “pay a bribe, give a gift, or do a favour” at least once to obtain the care they needed. Only those seeking police assistance (49%) came close to matching this proportion of bribe-paying for key public services. About one-third of respondents said they had to pay bribes to avoid problems with the police (36%), to obtain household utilities (33%), and to obtain public school services (33%) (Figure 5).

**Figure 5: Paid a bribe to access public services | 2018 | Sierra Leone**



**Respondents who said they had contact with selected public services during the previous year were asked:** And how often, if ever, did you have to pay a bribe, give a gift, or do a favour [to obtain these services]? (% who said “once or twice,” “a few times,” or “often”)  
 (Note: Those who had no contact with these services during the previous year are excluded.)

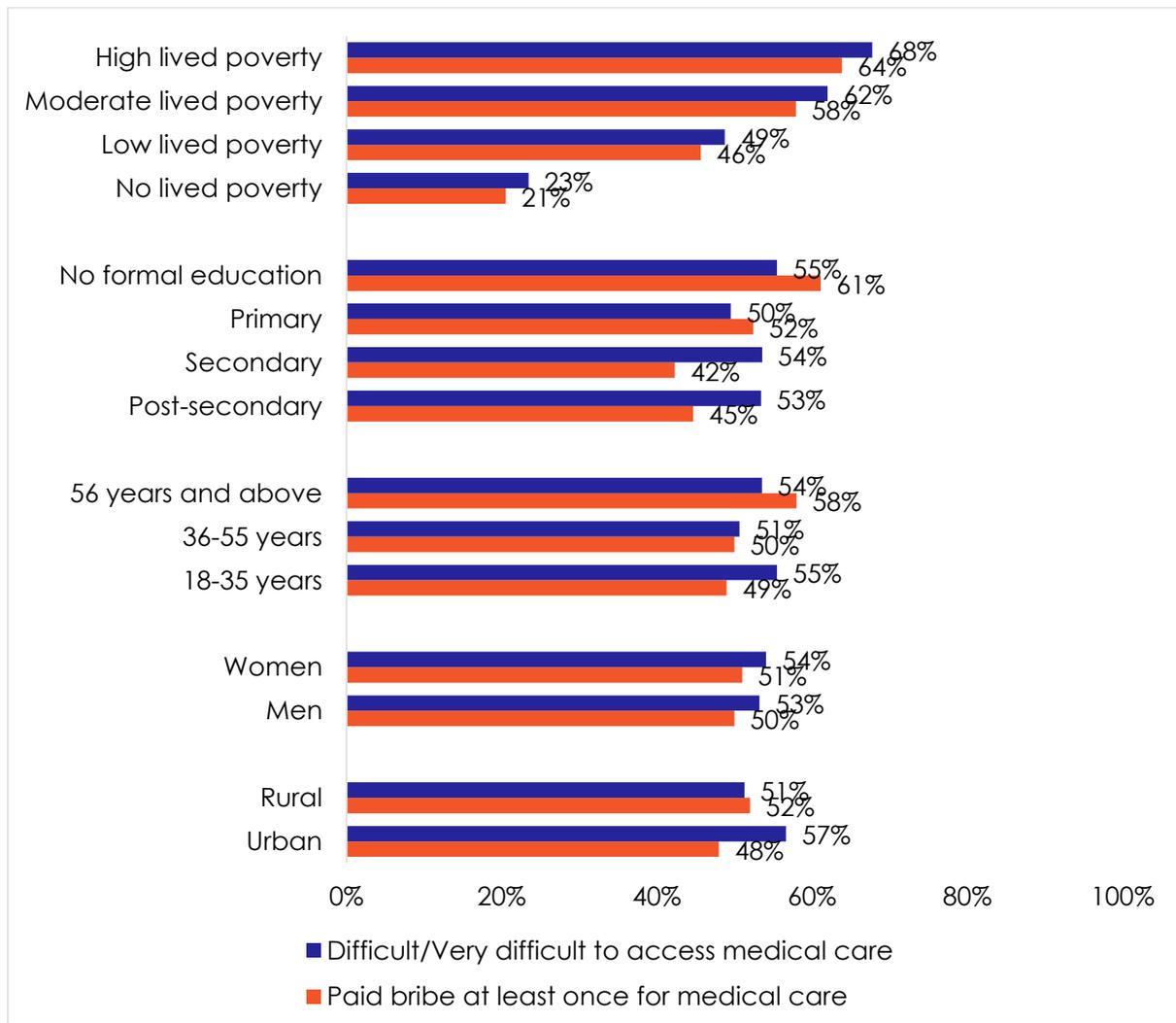
Poor citizens were particularly likely to find it difficult to access medical care and to have to pay a bribe. Individuals experiencing high levels of lived poverty<sup>1</sup> were about three times as

<sup>1</sup> Afrobarometer’s Lived Poverty Index (LPI) measures respondents’ levels of material deprivation by asking how often they or their families went without basic necessities (enough food, enough water, medical care, enough cooking fuel, and a cash income) during the preceding year. For more on lived poverty, see Mattes, Dulani, & Gyimah-Boadi (2016).

likely as those with no lived poverty to report difficulty in accessing care (68% vs. 23%) and to say they paid a bribe (64% vs. 21%) (Figure 6). Citizens with no formal education (61%) were 16 percentage points more likely to have paid bribes for medical care than those with post-secondary education (45%).

Payment of bribes was more common among older citizens (58% among those aged 56 and above) than younger citizens (49%-50% among those below 56 years). Whereas more urbanites had difficulties accessing medical care (57% vs. 51%), rural residents were slightly more likely than urbanites to reporting having to pay bribes (52% vs. 48%).

**Figure 6: Obtaining medical care: Difficulty and bribe-paying** | by socio-demographic group | 2018 | Sierra Leone



**Respondents who said they had contact with a public clinic or hospital during the previous year were asked:** How easy or difficult was it to obtain the medical care you needed? (% who said "difficult" or "very difficult") And how often, if ever, did you have to pay a bribe, give a gift, or do a favour for a health worker or clinic or hospital staff in order to get the medical care you needed? (% who said "once or twice," "a few times," or "often")  
 (Note: Those who had no contact with these public services during the previous year are excluded.)

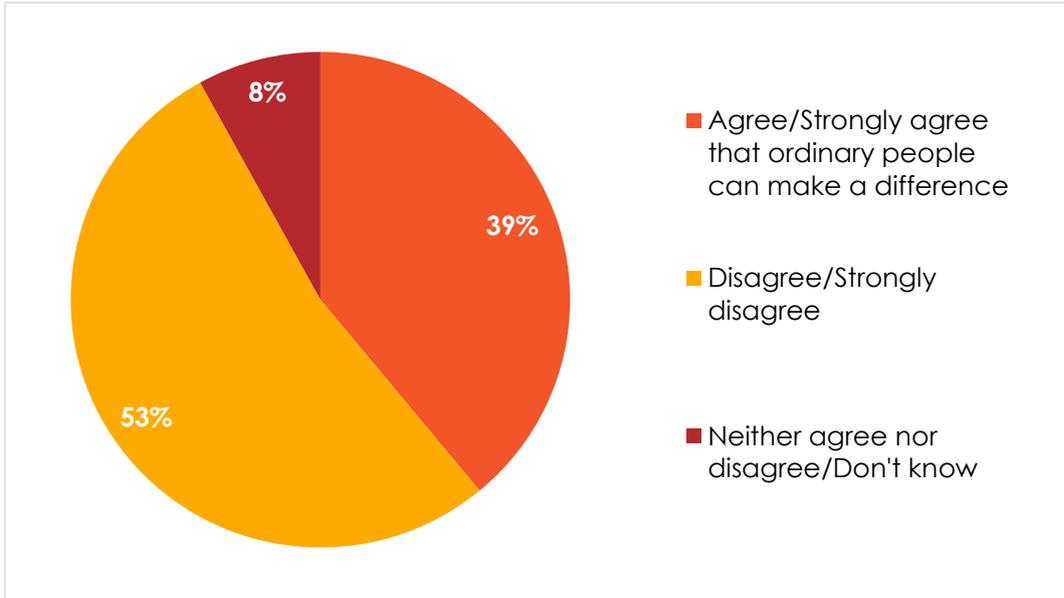
### Citizens' role in fighting corruption

Sierra Leon's Anti-Corruption Commission launched a "Pay No Bribe" campaign in 2014, encouraging citizens to report incidents of bribery and other corruption-related issues they

witness in the delivery of services such as education, health, police, justice, electricity, and water (Abdul, 2019). But only four in 10 citizens (39%) “agree” or “strongly agree” that ordinary people can make a difference in fighting corruption, while a majority (53%) “disagree” or “strongly disagree” (Figure 7).

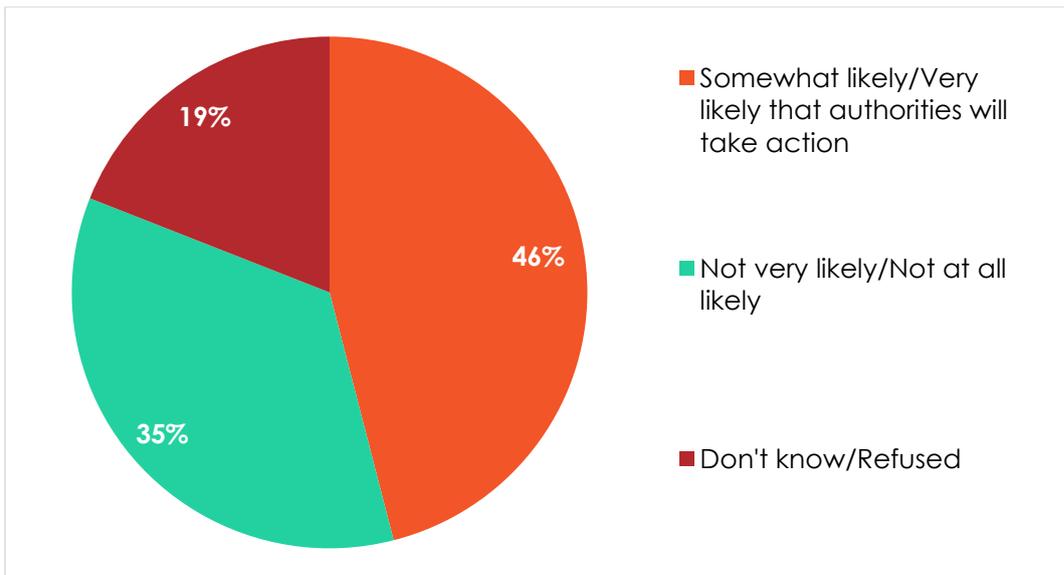
And fewer than half (46%) of Sierra Leoneans consider it “somewhat likely” or “very likely” that authorities will take action when incidents of corruption are reported (Figure 8).

**Figure 7: Can citizens make a difference in fighting corruption? | Sierra Leone | 2018**



**Respondents were asked:** Please tell me whether you agree or disagree with the following statement: Ordinary people can make a difference in the fight against corruption?

**Figure 8: Will the authorities take action when corruption is reported? | Sierra Leone | 2018**



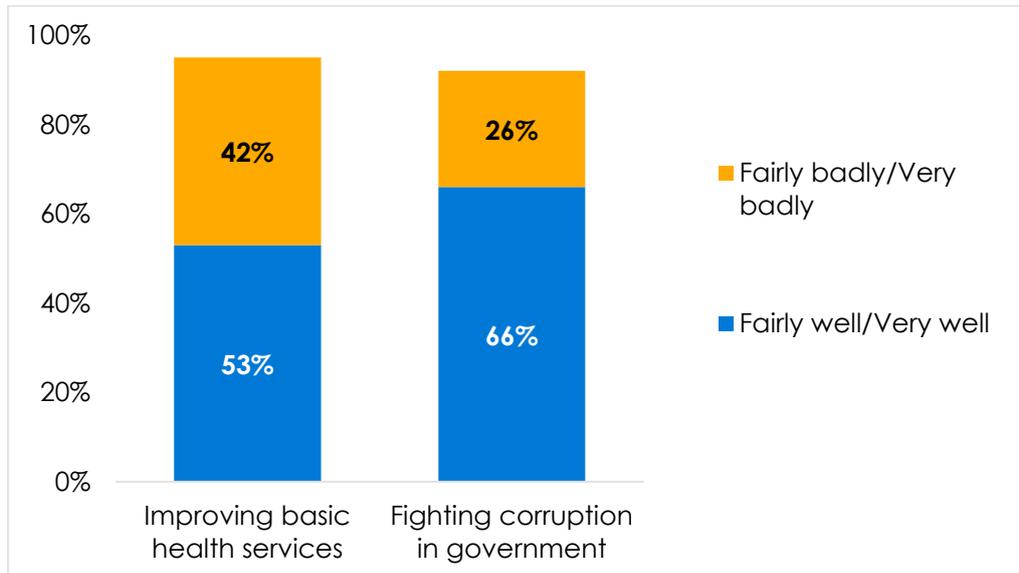
**Respondents were asked:** How likely is it that you could get someone to take action if you went to your local government council to report corrupt behaviour like misuse of funds or requests for bribes by government officers, police, or school or clinic staff?

## Government performance on health care and corruption

Despite concerns about their health care system and the prevalence of bribe-paying to obtain care, as of mid-2018, majorities of Sierra Leoneans gave their government passing grades: 53% said the government was doing “fairly well” or “very well” on improving basic health-care services, and even more (66%) approved of the government’s performance in the fight against corruption (Figure 9). (Since the survey questions asked about “the current government” but were posed just two months after the new Julius Maada Bio government had taken office, we do not know to what extent respondents’ assessments credited or blamed a particular administration or the government in general.)

**Figure 9: Perceived government performance on health care and corruption**

| Sierra Leone | 2018



**Respondents were asked:** How well or badly would you say the current government is handling the following matters, or haven't you heard enough to say?

## Conclusion

The most recent Afrobarometer survey shows that health care, one of Sierra Leoneans’ top priorities for government action, is difficult to access and bedeviled by bribery. Underprivileged groups – the poor and less-educated – are particularly likely to be victimized by the need to pay a bribe to obtain care. To achieve the Health Sector Recovery Plan’s goal of ensuring “high quality, accessible, affordable and equitable” health care for all, concerted efforts will have to be made to rid the health sector of corruption.

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Afrobarometer, a nonprofit corporation with headquarters in Ghana, is a pan-African, non-partisan research network. Regional coordination of national partners in about 35 countries is provided by the Ghana Center for Democratic Development (CDD-Ghana), the Institute for Justice and Reconciliation (IJR) in South Africa, and the Institute for Development Studies (IDS) at the University of Nairobi in Kenya. Michigan State University (MSU) and the University of Cape Town (UCT) provide technical support to the network.

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