

# COVID-19 : Community needs assessment survey

**Findings from Mumbai and Thane**

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## OBJECTIVE



The objective of the survey was to assess community's understanding of the COVID-19 pandemic with respect to their:

- knowledge
- sources of information
- preventive behaviours
- trust in institutions
- information needs
- attitudes towards pandemic response initiatives and,
- services available to them (food, sanitation, medical facilities, helplines)

in order to better inform outbreak response measures



- Study type: Cross-sectional survey
- Study period: May to June 2020
- Sampling method: Simple random
- Sample size: 300 per area
- Study participants: Beneficiaries (aged 18 and older) in the programme intervention areas in Malvani, Mankhurd-Govandi, Wadala and Kurla in Mumbai and Kalwa in Thane
- Questionnaire: adapted from WHO's 'SURVEY TOOL AND GUIDANCE: Rapid, simple, flexible behavioural insights on COVID-19'\*, 26 questions
- Data analysis: Stata v.14
  - Telephonic interviews were conducted after taking informed, verbal consent
  - Each interview lasted for about 20 to 25 minutes

\*[https://www.euro.who.int/\\_data/assets/pdf\\_file/0007/436705/COVID-19-survey-tool-and-guidance.pdf](https://www.euro.who.int/_data/assets/pdf_file/0007/436705/COVID-19-survey-tool-and-guidance.pdf)



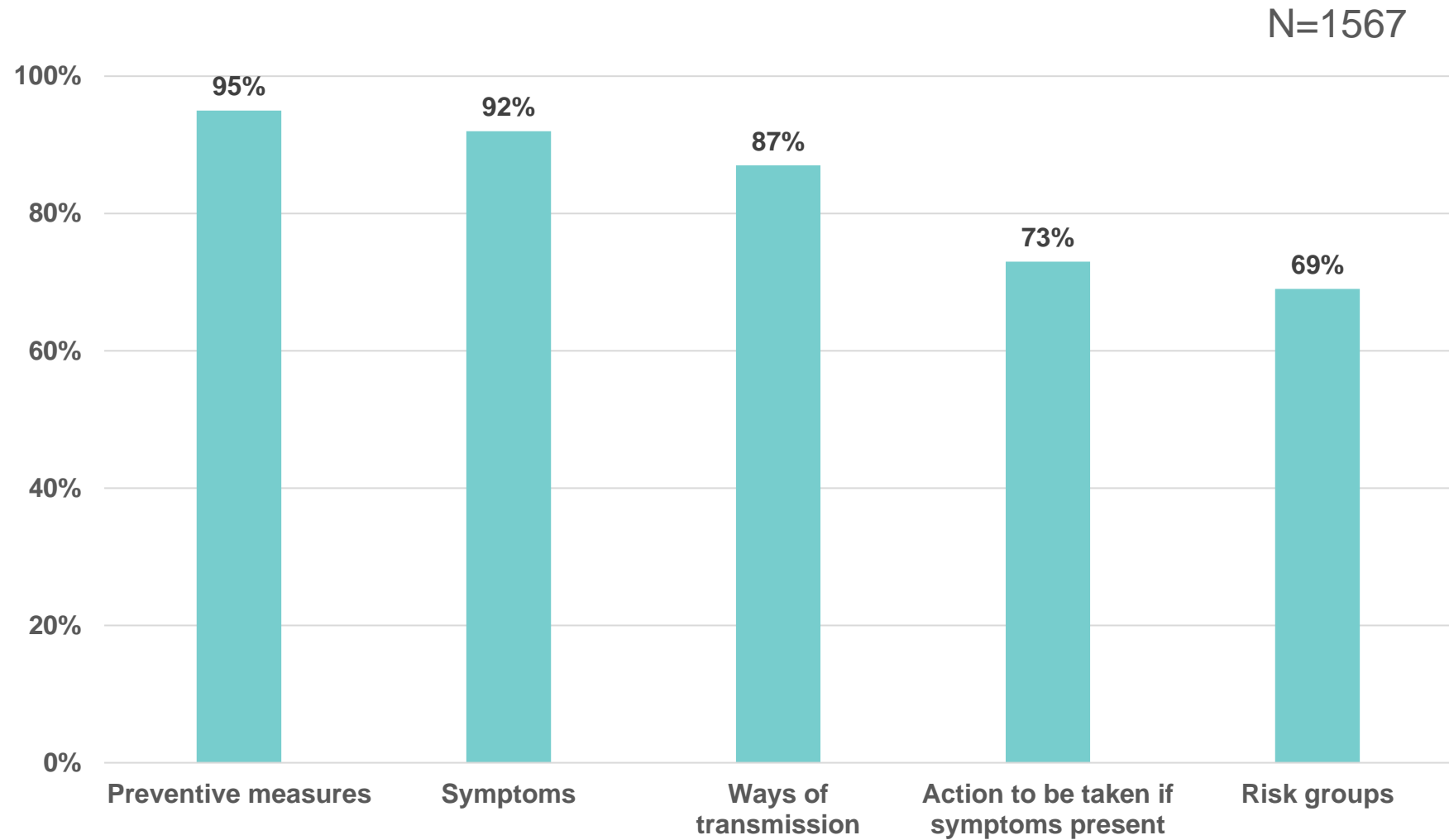
- Response rate:

	N(%)
<b>Interviews completed</b>	<b>1567 (34)</b>
Refusal	144 (3)
Migrated to native place	410 (9)
Phone unavailable	2439 (53)
Total beneficiaries contacted	4560

- Socio-demography:

- Mean age of the respondents was 33 years
- Majority of the respondents were **female (76%)**
- Mean family size was 5

## Information received about COVID-19

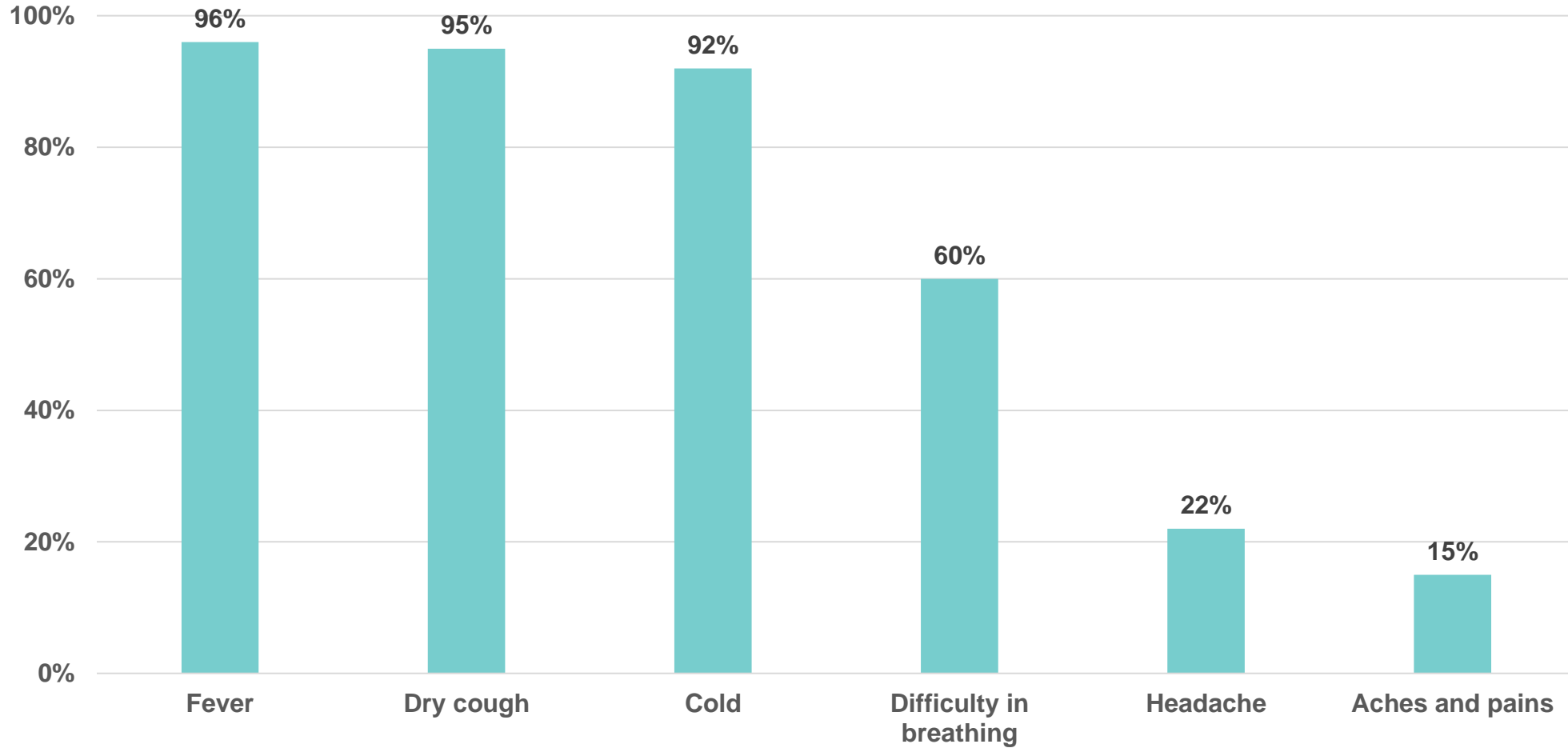


## *Source of information, residence in containment zone (N=1567)*

VARIABLES	N (%)
1. Source of information	
• Television	<b>1450 (93)</b>
• Family/friends/neighbours	865 (55)
• Social media (Facebook/Instagram)	621 (40)
• SNEHA	271(17)
2. Residence in hotspot/containment zone	
No	<b>1296 (83)</b>
Yes	260 (16)
Don't know	11 (1)

## Knowledge about COVID-19 symptoms

N=1567

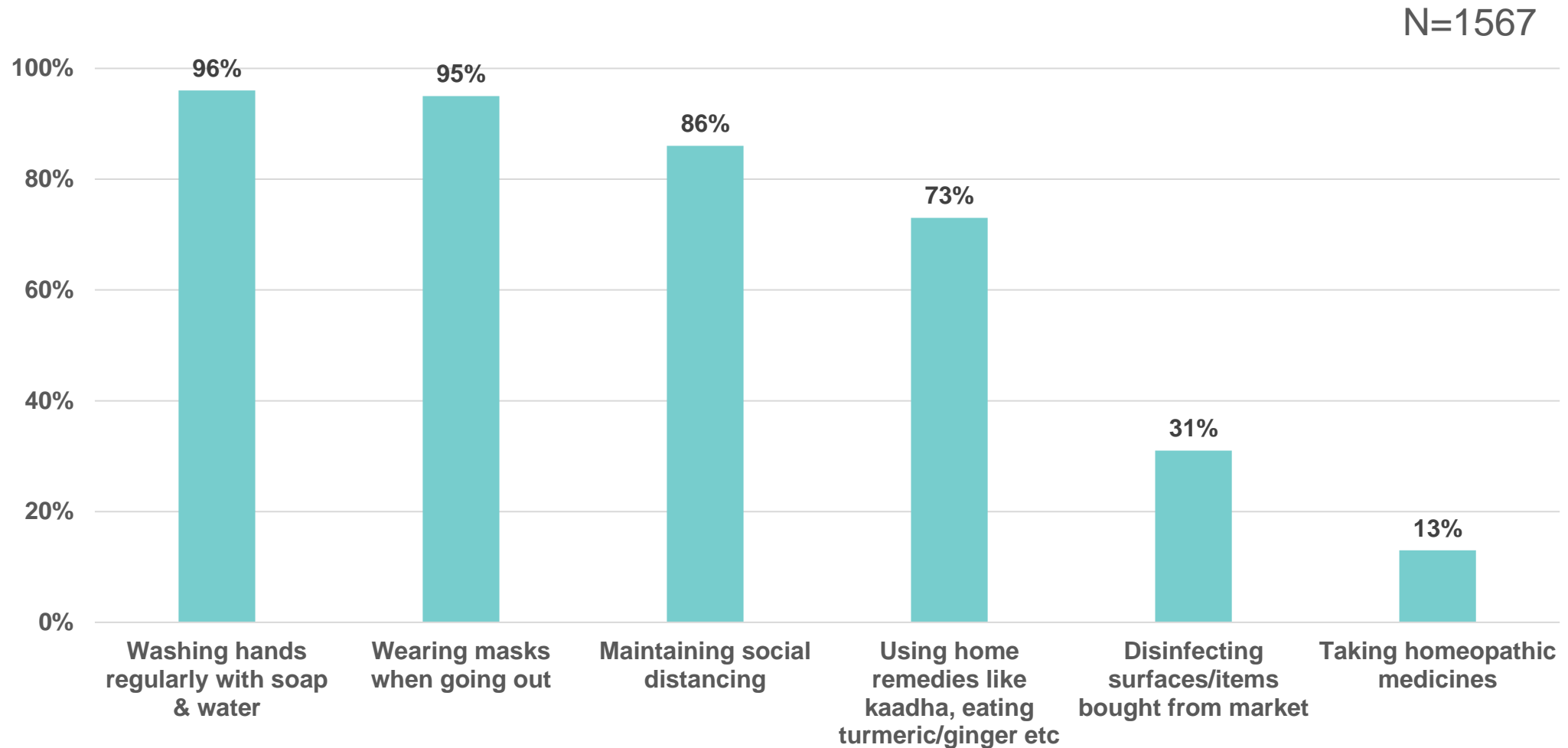


## *Reported infected status of family and quarantine (N=1567)*

VARIABLES	N (%)
1. Has anyone in the family been infected with the novel coronavirus?	
• Suspected, not confirmed with a test	32 (2)
• Suspected, tested negative	72 (5)
• Yes, tested positive	4 (<1 )
• No	<b>1459 (93)</b>
2. Self or family admitted in hospital (N=108)	
• Yes	6 (6)
3. Mean number of days of hospitalisation	10
4. Self or family kept in quarantine (N=108)	
• Yes	12 (11)
5. Mean number of days of quarantine	13



## Preventive measures followed in the family



## Information needs (N=1567)

Topics on which further information was needed by the community	N (%)
Protecting family's health	<b>676 (43)</b>
Economic impact of pandemic on family	<b>240 (15)</b>
Children's education	<b>191 (12)</b>
Procuring ration	<b>159 (10)</b>
Care of high risk group	75 (5)
Accessing health services if infected	55 (4)
Mental health of self if kept away from family for quarantine	17 (1)
Travel to native place	18 (1)
Others*	97 (6)
No information needed	573 (37)

\*Others included information on new symptoms of COVID-19, vaccine for COVID-19 and duration of the pandemic

# Attitudes towards pandemic response initiatives (N=1567)

*“One should be allowed to go out of the house only for professional, health or emergency reasons”*

	N (%)
Agree	1466 (94)
Disagree	101 (6)

*“If someone comes in contact with a COVID positive individual, the government should be permitted to keep them in quarantine”*

	N (%)
Agree	1298 (83)
Disagree	269 (17)

*“If someone tests positive for COVID-19, the government should be permitted to admit them in hospitals”*

	N(%)
Agree	1534 (98)
Disagree	33 (2)

*“It is appropriate to discriminate against certain people based on their occupation or religion”*

	N (%)
Agree	113 (7)
Disagree	1454 (93)

*“I think the restrictions being implemented now are very tough”*

	N (%)
Agree	713 (45)
Disagree	854 (55)

## Awareness of service provisions in area of residence (N=1567)

Awareness about services provided in area of residence by Government/NGO	N (%)
Disinfection of public toilets	<b>954 (61)</b>
Patrolling of perimeter by police	<b>950 (61)</b>
Distribution of essentials like ration/medicines	<b>941 (60)</b>
Disinfection of area/building after positive case is found	894 (57)
Door to door survey for screening of COVID-19 suspects	691 (44)
Communication about symptoms/preventive measures (speakers/posters/FLWs)	350 (22)
Testing of suspect cases & their contacts	<b>299 (19)</b>
Testing of high risk group	<b>285 (18)</b>
Quarantine of infected persons & their contacts	<b>269 (17)</b>

*Note: About 65% of the surveyed families used public toilets*

## Trust in institutions (to efficiently handle the pandemic, N=1567)



INSTITUTIONS	N (%)
Police	<b>1463 (93)</b>
Hospitals	1374 (88)
Local public health bodies (health posts/anganwadi/CHV)	1360 (87)
Government	1351 (86)
Religious institutions	1193 (76)
Any other*	413 (26)

*\*Others include SNEHA and local political committees*

## Major worries during the present crisis (N=1567)

FEARS & WORRIES DURING THE PANDEMIC	N (%)
Unemployment/loss of wages	<b>1124 (72)</b>
Inability to pay bills	<b>770 (49)</b>
Health of family members	<b>802 (51)</b>
Restricted access to food supplies	<b>553 (35)</b>
Restricted freedom of movement	448 (29)
Physical health of self	253 (16)
Others*	180 (11)
Losing loved ones	58 (4)
Mental health of self	43 (3)
Inability to meet people dependant on you	31 (2)
Overburdening of health system	31 (2)

\*Others include schooling of children, accessing ANC services and the duration of the pandemic

## Source of ration in past two months (N=1567)

Source of household ration in the past two months	N (%)
Ration shop, paid	<b>1137 (73)</b>
Ration shop, free	<b>907 (58)</b>
Received cooked food	550 (35)
Received ration from SNEHA	538 (34)
Received ration from other NGOs/local political and religious leaders	425 (27)
Had ration reserves for emergency	174 (11)
Others*	189 (12)

\*Others include ICDS, private donors in the community and employers

## Food security, income loss and intention to migrate (N=1567)



VARIABLES	N (%)
1. Has the family ever gone without a meal in the last two months because of lack of resources to get food?	
• Yes	<b>212 (14)</b>
2. If yes, how often?	N=212
Rarely (once or twice)	102 (48)
Sometimes (three to ten times)	92 (43)
Often (more than ten times)	18 (9)
3. Loss or great reduction in source of income of primary earning member	<b>1337 (85)</b>
4. Plan of going to native place after relaxation of travel restrictions	306 (20)



## High risk group (N=1567)



	N (%)
Presence of high risk group in family	929 (59)
• ANC	70 (4)
• Child (0-6 years)	698 (45)
• Older adults (>60 years)	261 (17)
• Diseased (any ailment including chronic conditions like DM/HTN and immunocompromised like on CA Rx etc.)	212 (14)

## Awareness and use of Helplines



VARIABLES	N (%)
1. Aware of helplines for medical/non-medical relief during this pandemic (N=1567)	
• No	1023 (65)
• Yes	544 (35)
2. Used any helpline	7% (N=544)
3. Satisfied with response	42% (N=38)

## CONCLUSION



- Information received is high for symptoms of COVID-19, ways of transmission and preventive measures but moderate for actions to be taken if symptoms arise and high risk groups
- Fever and dry cough emerged as the most known symptoms but awareness of new symptoms like headache, aches and pains is low
- Television was reported to be the major source of information on COVID-19
- Majority of the respondents reported practice of preventive guidelines like handwashing, social distancing and the use of masks when going in public
- Very few families reported infection or occurrence of COVID-19 symptoms

## *CONCLUSION contd.*

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- ‘How to best take care of family’s health and children’s education, ration procurement and economic impact on family’ are the major information needs that emerged from the survey
- Most families worried about loss of employment/reduced wages, health of family members and limited access to food supplies
- The community appeared to place high level of trust on police and hospitals for efficient handling of this pandemic
- About 14% of the families reported to have gone without a meal due to inability to buy food in the past two months
- Awareness and use of COVID-19 relief helplines was very low

## RECOMMENDATIONS



- Communication on new symptoms of COVID-19, high risk groups and action plan if symptoms arise could be shared with the community
- Information about helplines could be given and the community to be encouraged to use them
- Interventions to allay food insecurity could be undertaken: ration distribution, communication about rights under PDS, referrals to PDS and ICDS etc
- *Need of the hour is to work on unemployment and wage loss*

*Thank you*

***“What the world needs now is solidarity.  
With solidarity we can defeat the virus and  
build a better world.”***

***~ UN Secretary-General Antonio Guterres***



*Image of CME investigator conducting telephonic interview during WFH*