



**POPULATION
COUNCIL**

Ideas. Evidence. Impact.



MINISTRY OF HEALTH

NAIROBI INFORMAL SETTLEMENTS: COVID-19 KNOWLEDGE, ATTITUDES, PRACTICES & NEEDS

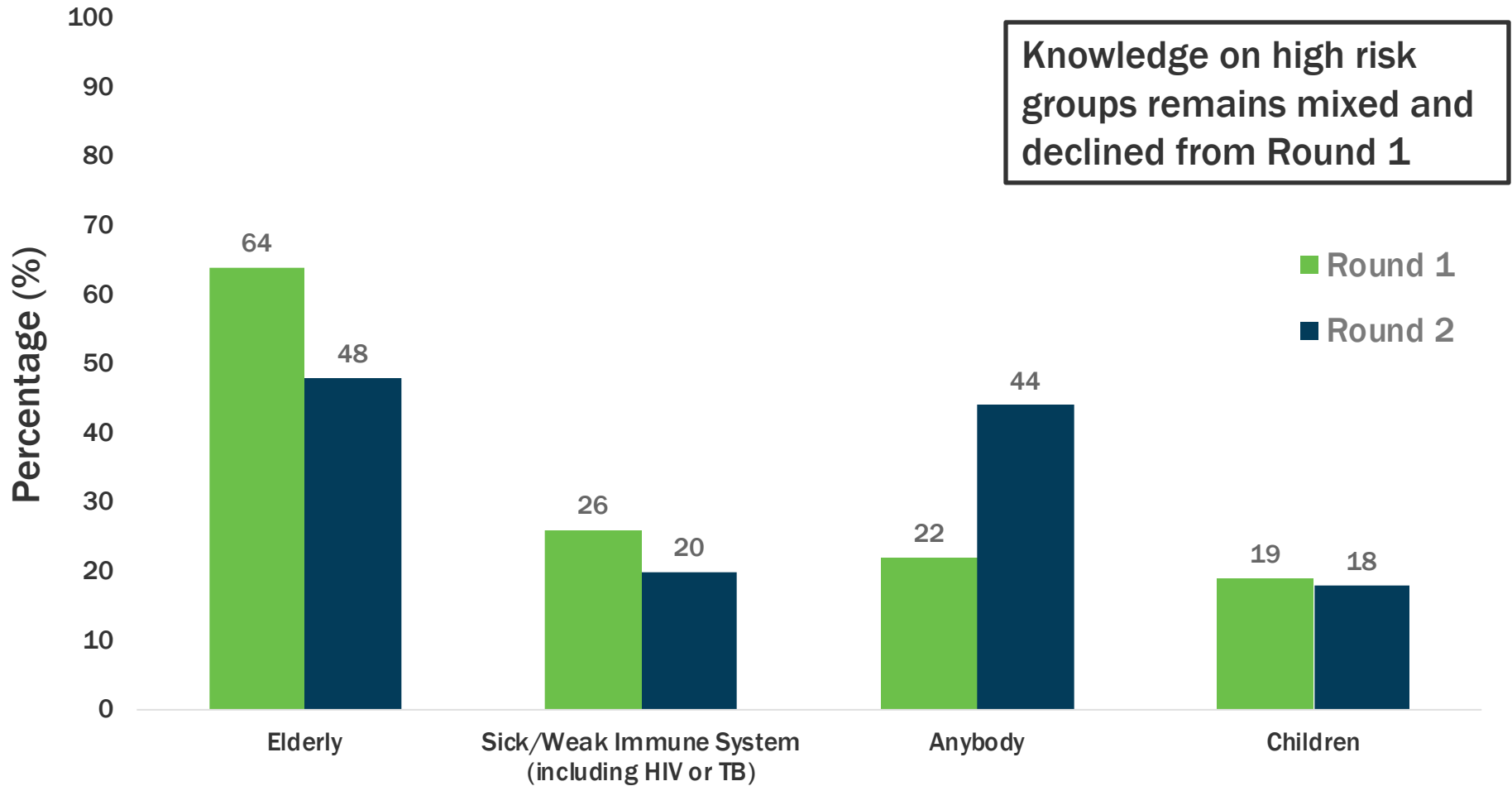
Population Council Kenya

April 22, 2020

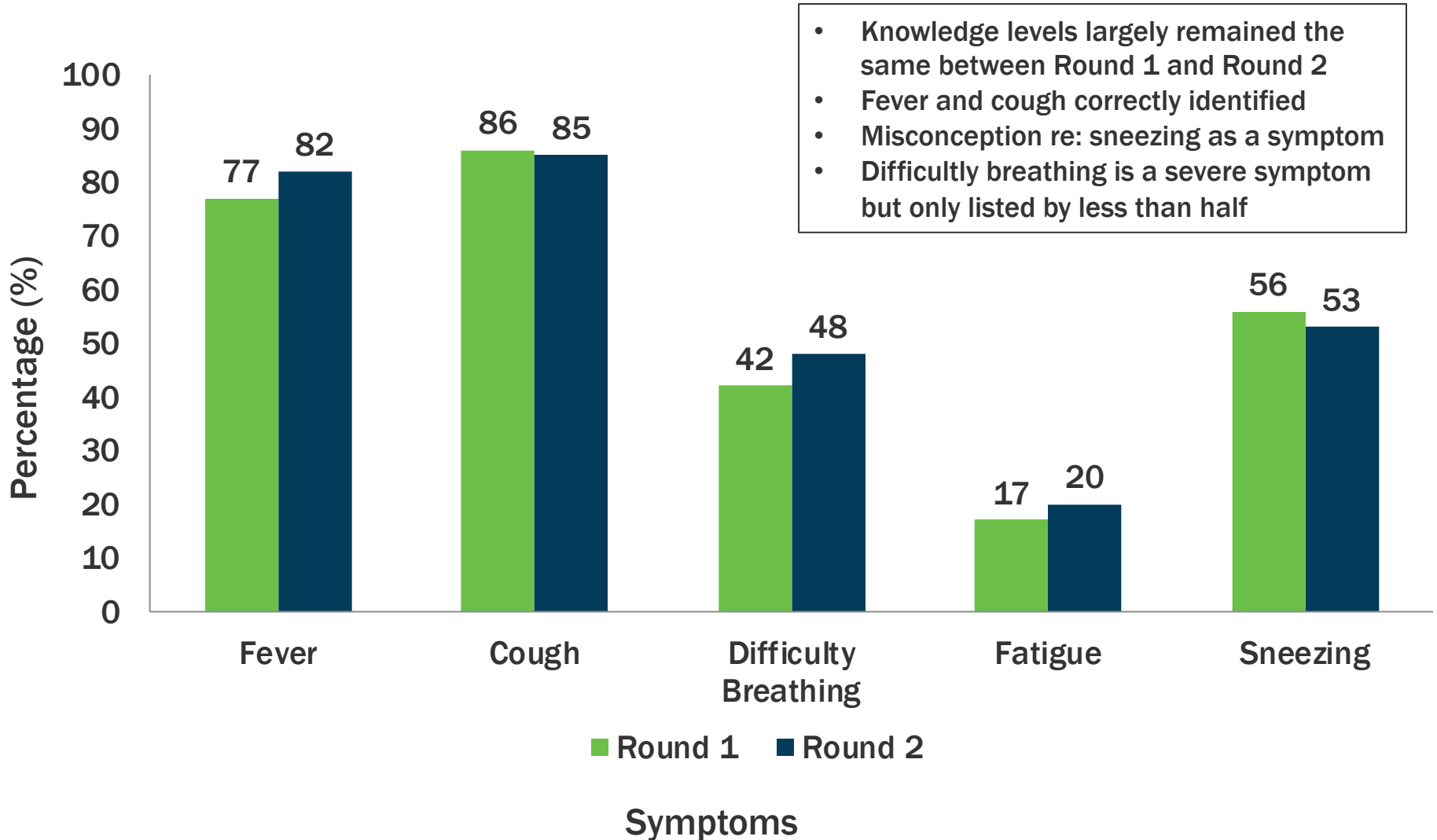
Overview – Round 2 Data Collection

- Phone survey conducted on April 13-14
 - Kibera, Huruma, Kariobangi, Dandora, Mathare
 - 1769 interviews completed (88% of Round 1)
 - 37% male; 63% female
 - Mean age: 36 years
 - 18-24: 21%
 - 25-34: 20%
 - 35-45: 38%
 - >45: 21%
 - 95% living in same location as Round 1

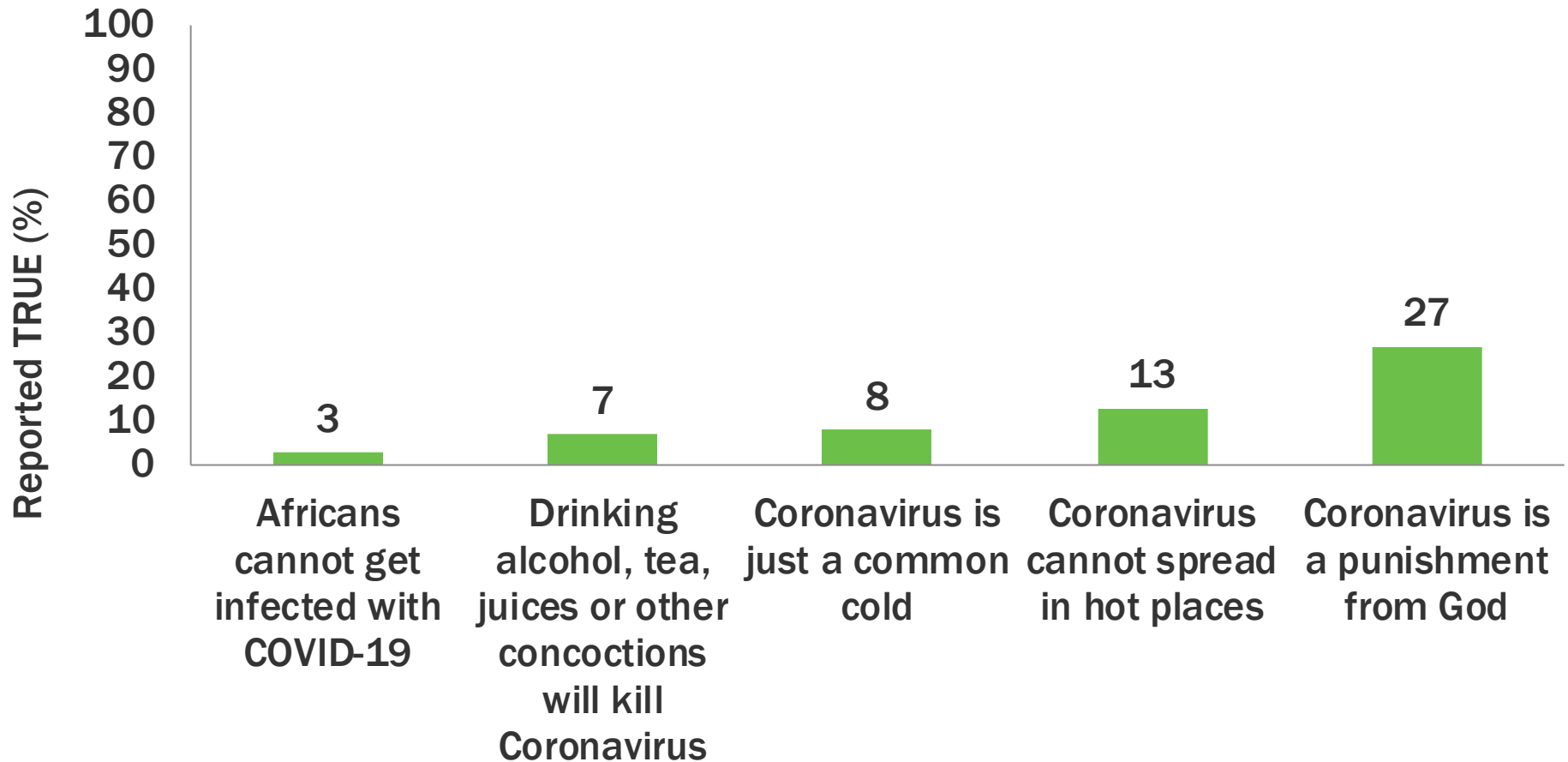
Who is at high risk of severe illness?



What are symptoms of Coronavirus?

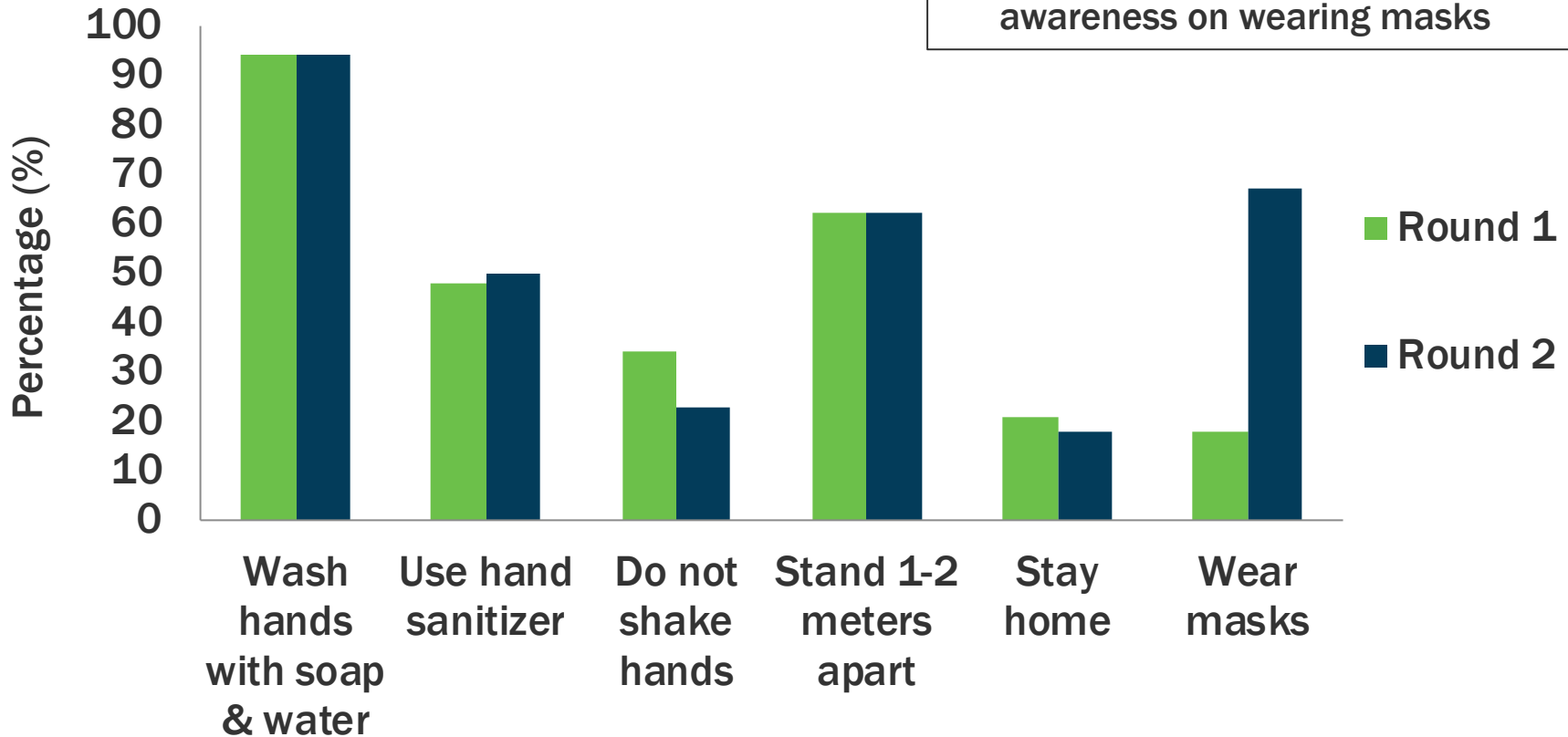


Myths & Misconceptions on COVID-19

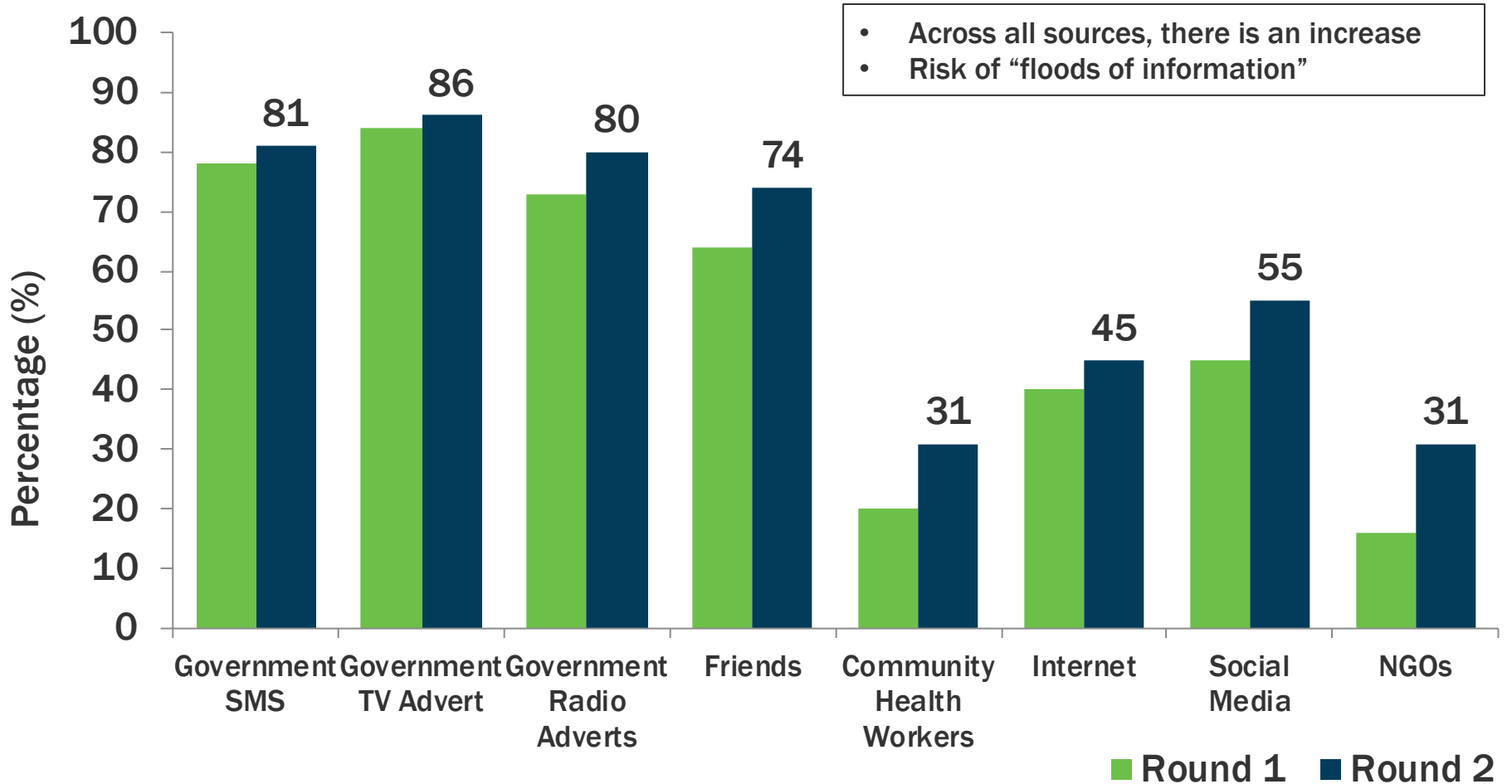


How can infection be prevented?

- Knowledge levels largely remained the same between Round 1 and Round 2 apart from increased awareness on wearing masks

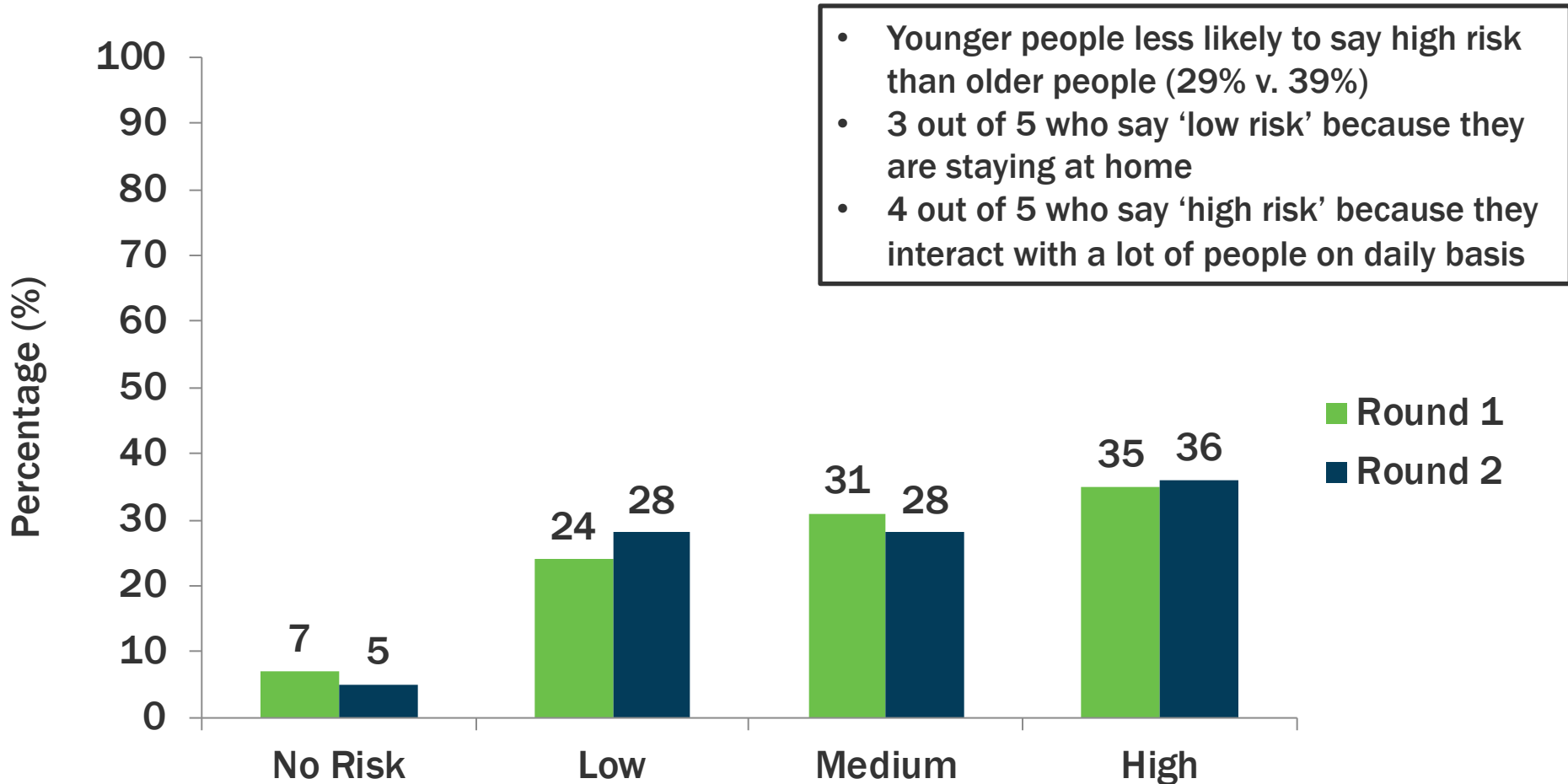


Sources of Information on Coronavirus

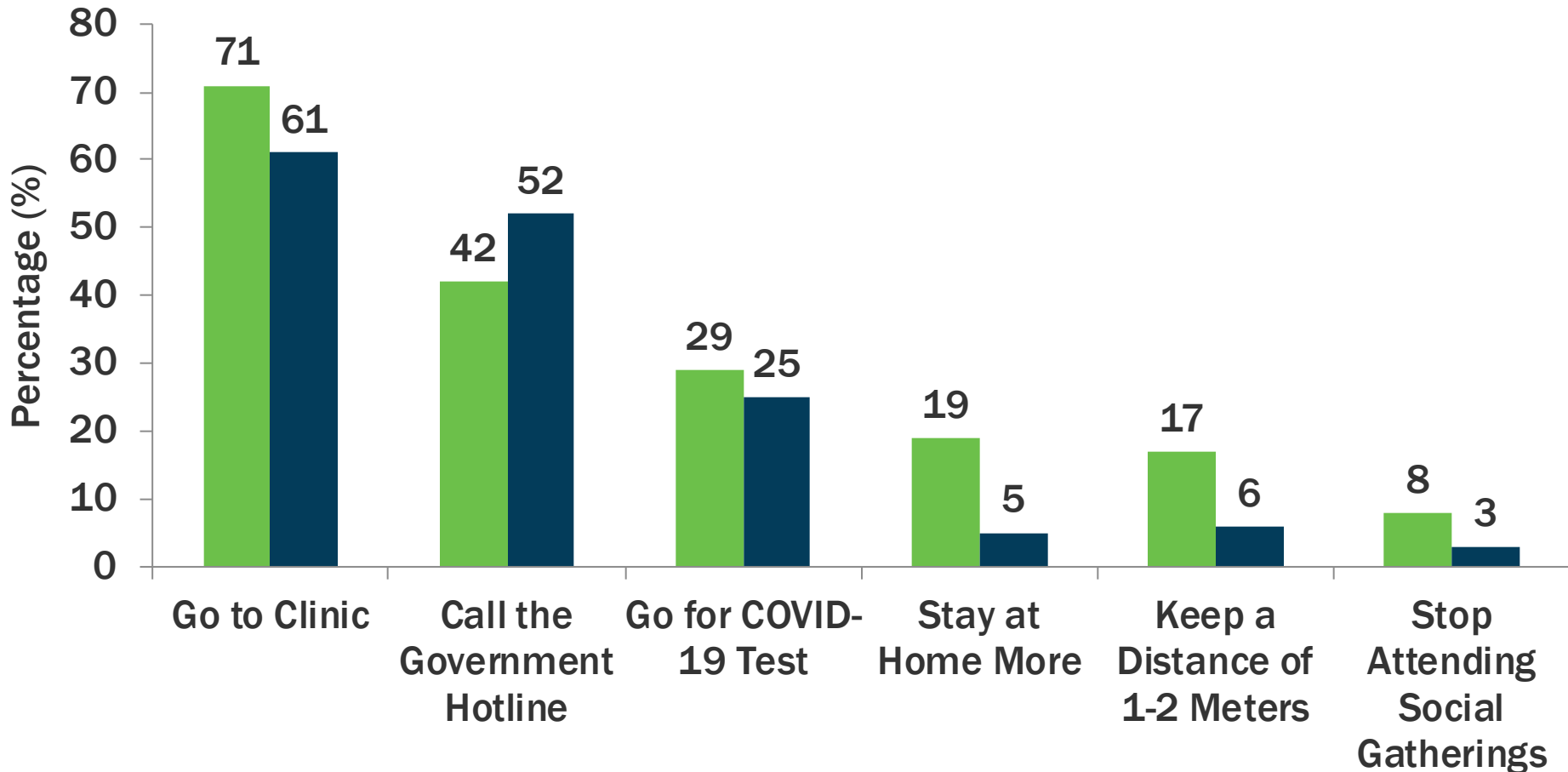


*Government, NGOs and health facility/worker sources are the most trusted (>90%)

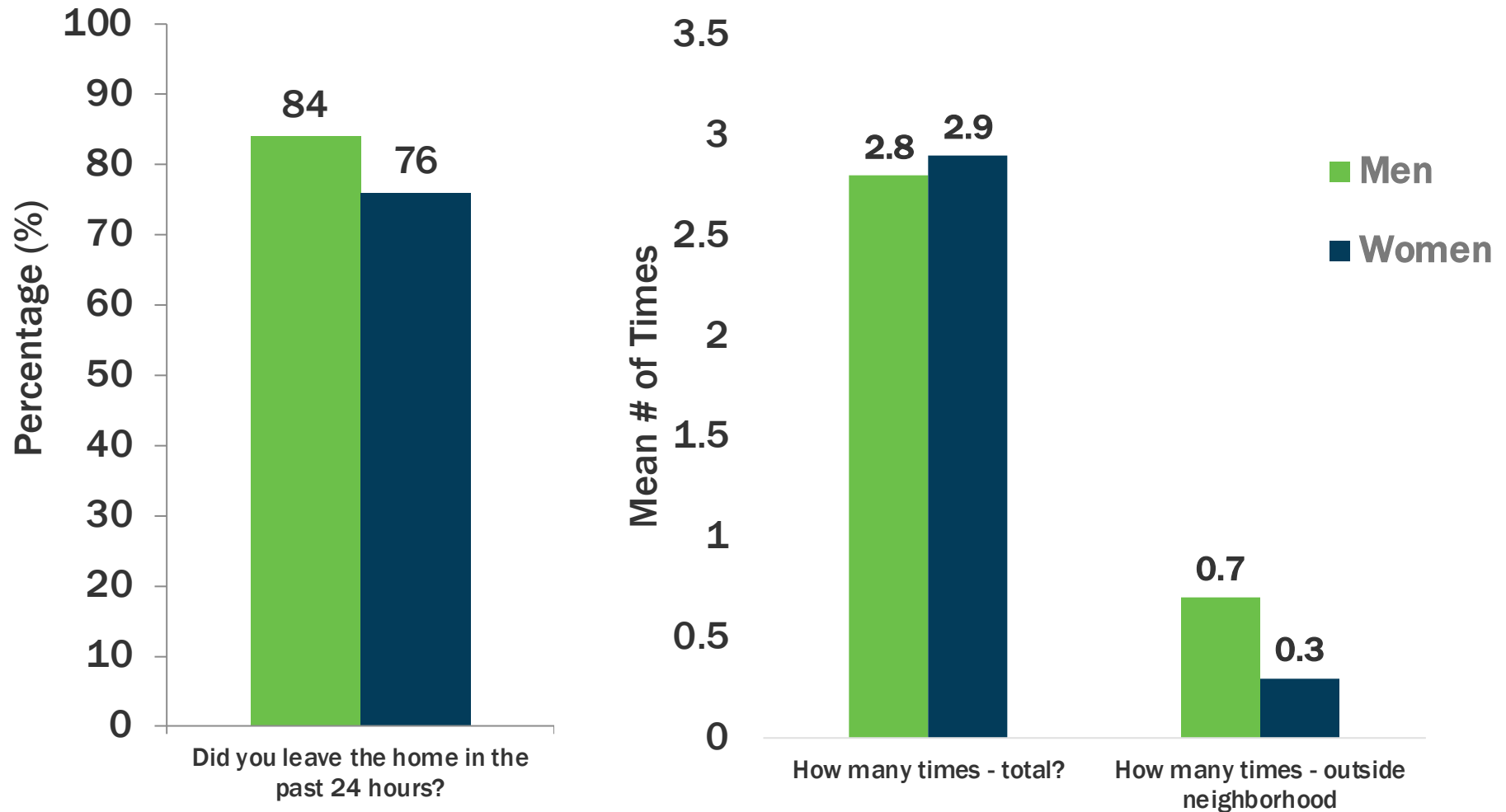
What is your risk of being infected?



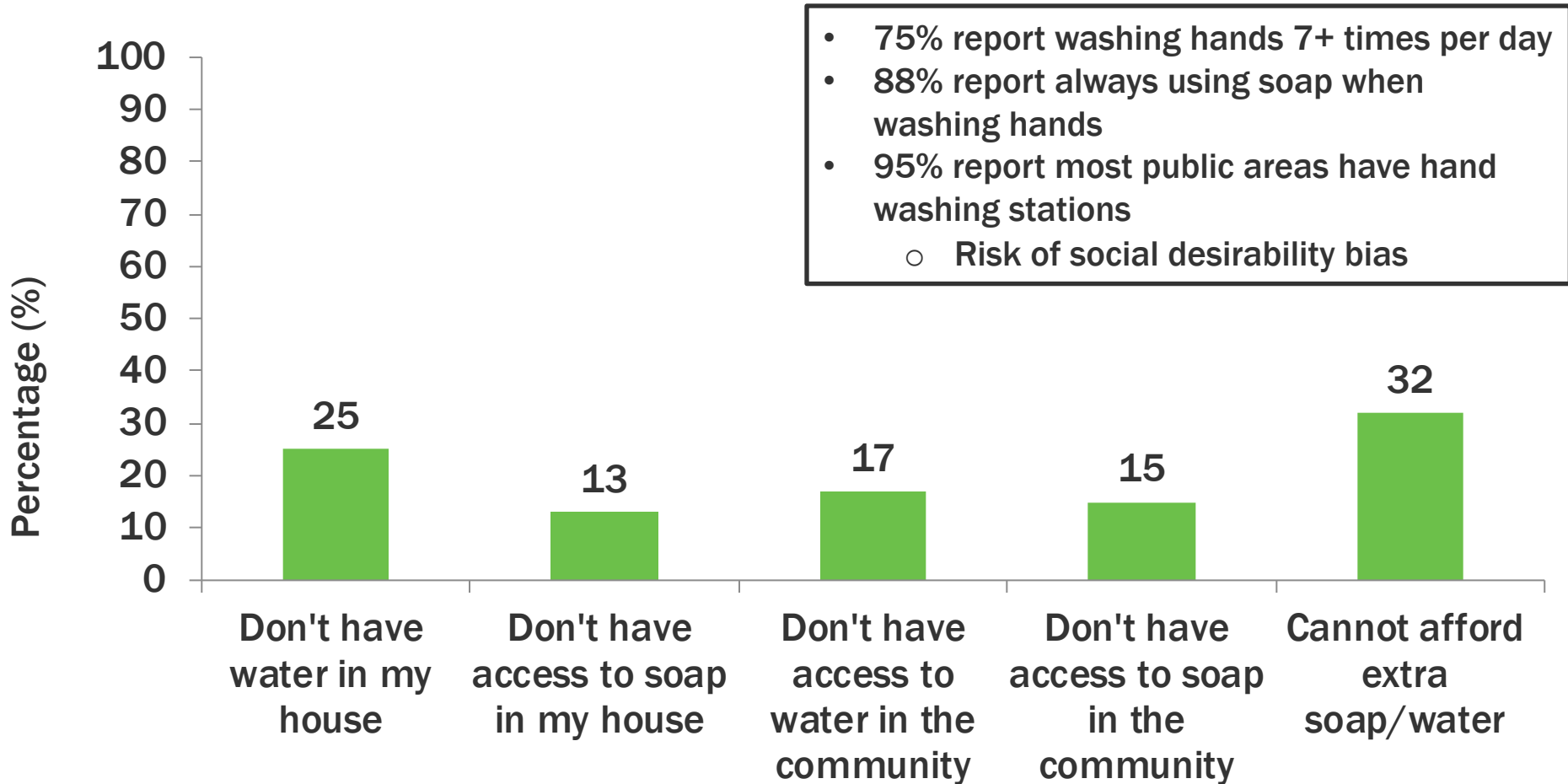
If you had symptoms of COVID-19, what would you do?



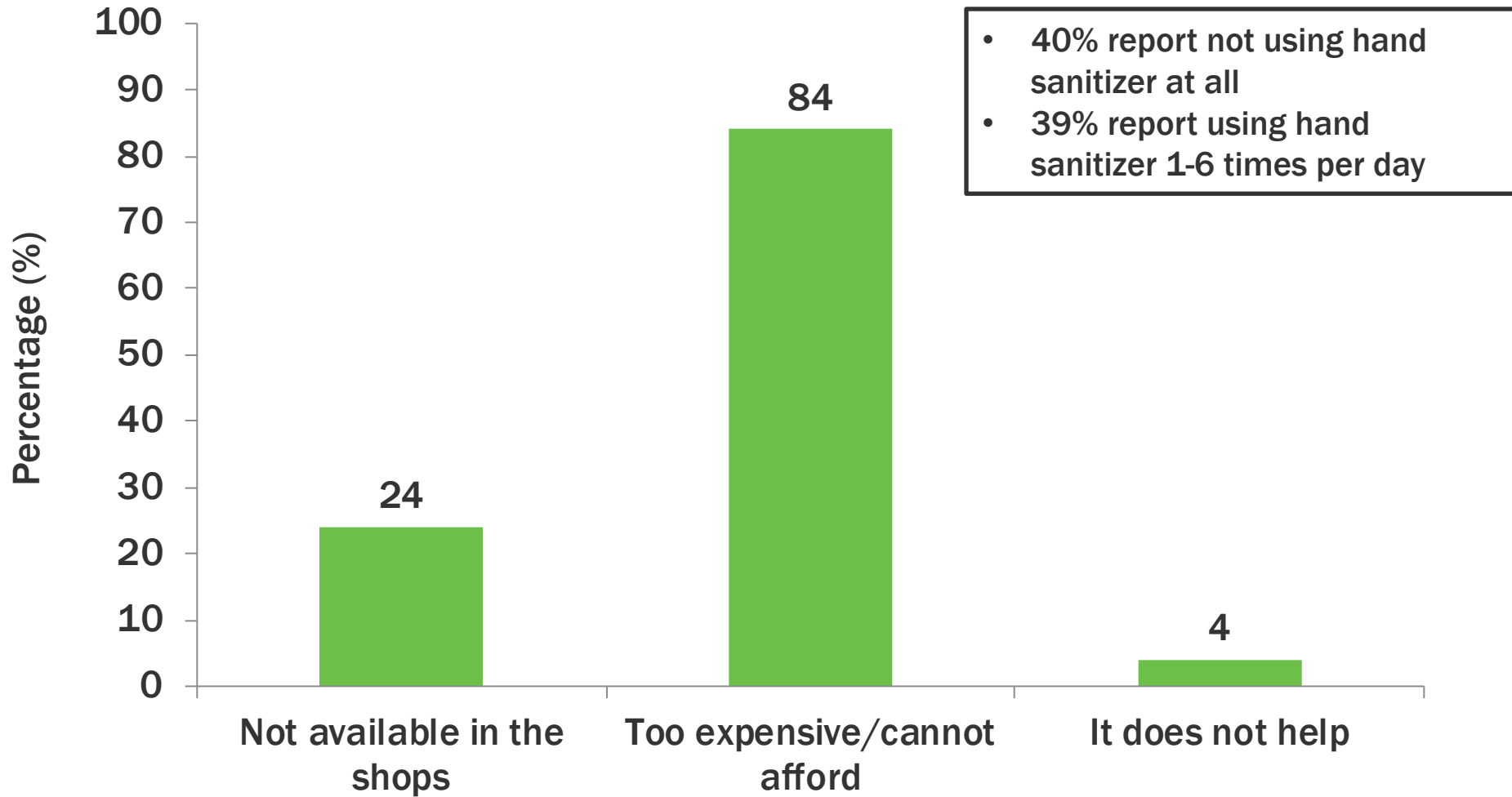
Movement outside home/neighborhood



Barriers to hand washing



Barriers to use of hand sanitizer

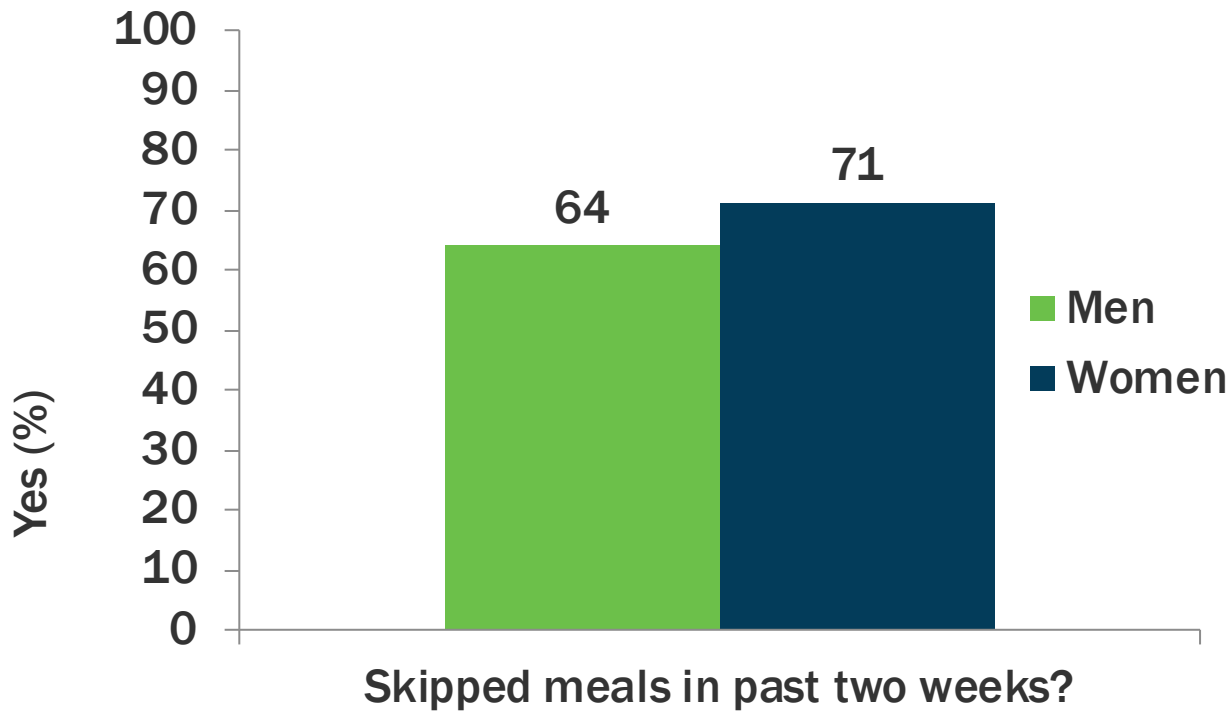


Use of Face Masks

- 73% report always wearing a mask when outside their house
 - 24% report sometimes
- Common barriers
 - 57% report they are uncomfortable
 - 19% report they cannot afford face masks

★ High likelihood of social desirability bias due to recent government decree on use of face masks in public

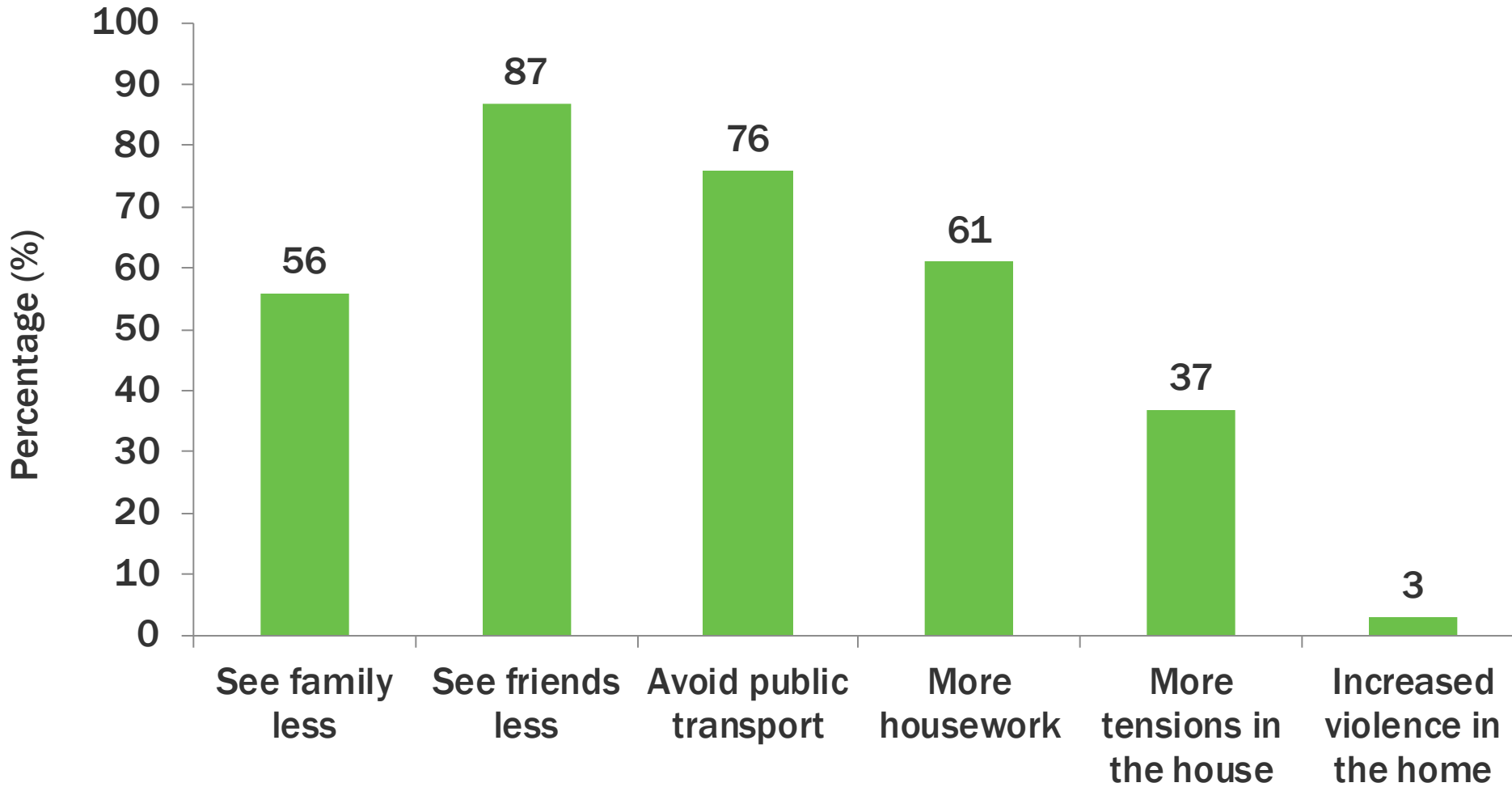
Food Security



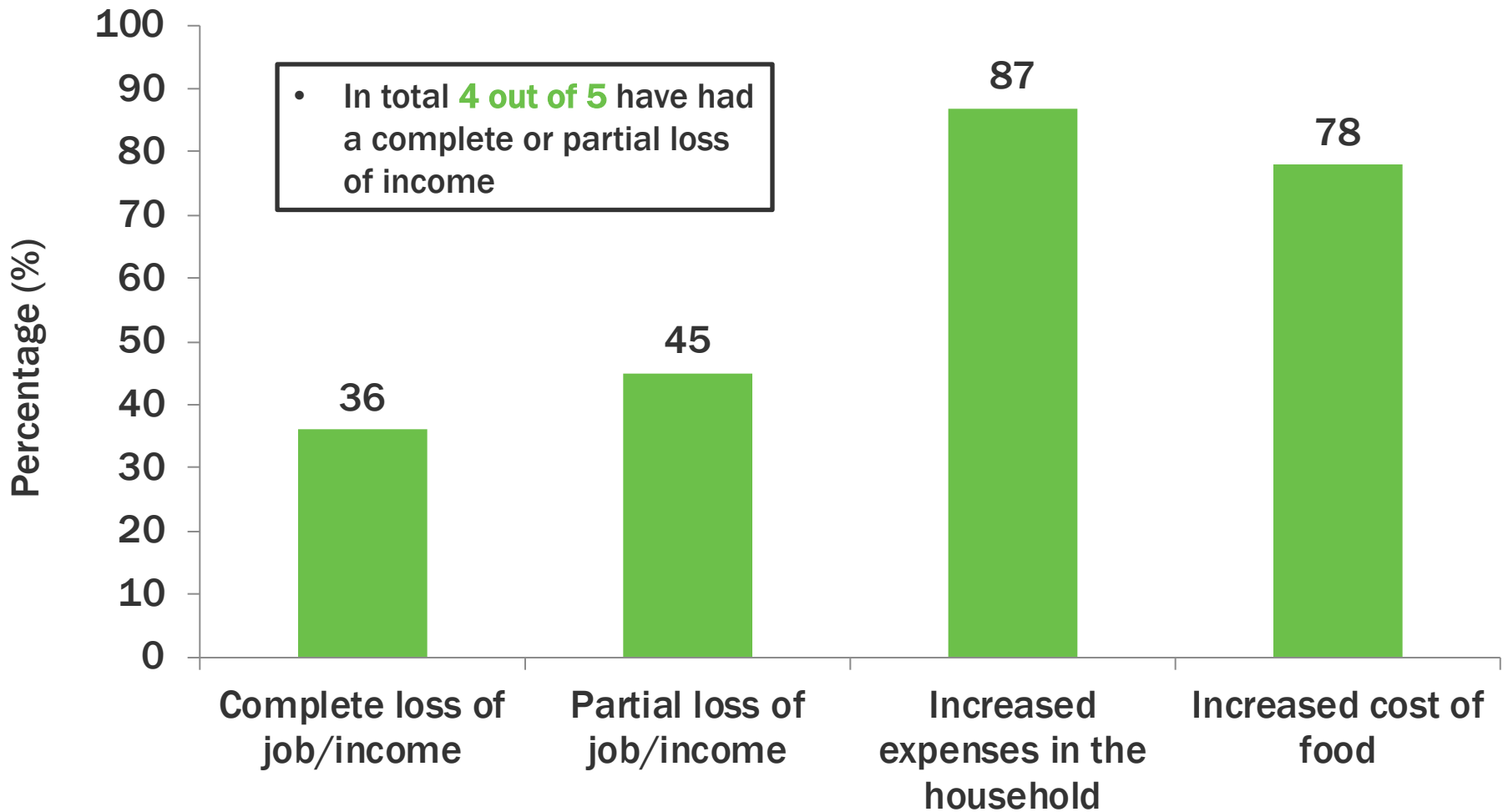
- 98% report that this is due to COVID-19
- 70% report that others in community are skipping meals/eating less due to COVID-19

- 76% report that their biggest need currently **NOT** being addressed is food

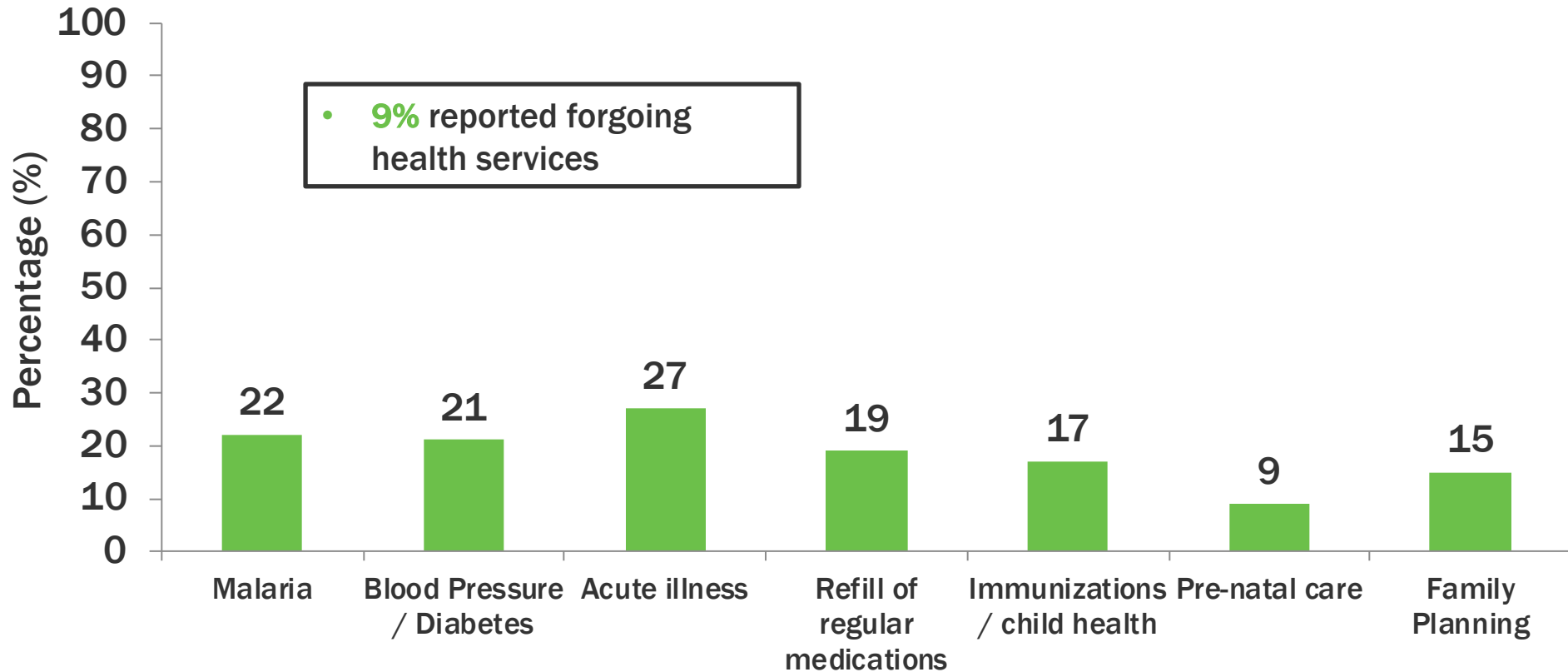
Social Effects of COVID-19



Economic Effects of COVID-19



Health Effects of COVID-19



Receiving Assistance?

- Only 7% reported receiving assistance
- Of those that received:
 - 72% - soap/hand sanitizer
 - 40% food
 - 39% from Good Samaritans/corporate donations
 - 37% from NGOs
 - 35% from Government

★ Those who received assistance were not those who were most likely to report losing income or missing meals

Gender Considerations

- Women are impacted more on many of the social, health and economic dimensions. Compared to men they are more likely to have:
 - **completely lost their income** (38% v. 33%)
 - **increased housework** (67% v. 51%)
 - **increased tension in the home** (39% v. 32%)
 - **forgone health care services** (11% v. 5%)
 - **skipped meals due to COVID-19** (71% v. 64%).
- They also have less accurate knowledge of transmission, symptoms and preventive behaviors and are less likely to wear masks outside the home.

Recommendations: Public Education Campaigns

- 1) Maintain clear messages on symptoms
- 2) Clarify that all can be infected and pass on the virus to others – even if asymptomatic
- 3) People are being flooded with information from multiple sources → re-focus on prevention methods and how to access social protection

Recommendations – Social Protection

1. Address the impacts of income loss and food security, with special attention to women
2. Ensure that those most at need of assistance are the ones receiving
 - a) Consider ensuring that assistance is getting into the hands of women given their increased experience of social and economic impacts

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Partnering with national health ministries and other government agencies in sub-Saharan Africa, South Asia, and Latin America, Population Council global and in-country scientists are conducting COVID-19 public health and social science research to produce relevant and timely evidence to support policymakers in controlling the spread of coronavirus, evaluating the effectiveness of prevention and mitigation measures, and assessing longer-term health, social and economic effects of the pandemic.