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Nairobi informal settlements: COVID-19 knowledge, attitudes and practices—Preliminary findings

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

Population Council Kenya
April 7, 2020
Overview

• Phone survey conducted on March 30-31
  – Kibera, Huruma, Kariobangi, Dandora, Mathare
  – Household from ongoing Population Council survey cohorts
  – 2010 interviews completed
  – 37% male; 63% female
  – Mean age: 36 years
    • 18-24: 21%
    • 25-34: 20%
    • 35-45: 38%
    • >45: 21%
  – 100% awareness of COVID-19
Who can be infected with Coronavirus?

- Anybody: 83, 84, 78%
- Elderly: 10, 11, 14%
- Children: 9, 5, 7%

Also - more women think children are at risk (21% vs 16% of men)
Who is at high risk of severe illness?

People with lower levels of education have less correct knowledge about symptoms.
What are symptoms of Coronavirus?

- Fever and cough correctly identified
- Misconception re: sneezing as a symptom
- Difficulty breathing is a severe symptom but only listed by less than half
- Those with LOWER EDUCATION have less knowledge on symptoms
How can infection be prevented?

- Wash hands with soap & water
- Use hand sanitizer
- Do not shake hands
- Stand 1-2 meters apart
- Stay home
- Wear masks

Percentage (%)

- None
- Primary
- Secondary
- Higher
What is your risk of being infected?

Men and younger people have a lower perception that they are at risk.
Sources of Information on Coronavirus

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

**Those with lower levels of education are less likely to receive information via government channels and more likely to get information from NGOs and public announcements via a megaphone
Few report being afraid they will infect others; may relate to low uptake of social distancing behaviors.
If you had symptoms of COVID-19, what would you do?

- Go to Clinic: 71%
- Call the Toll-Free Number: 42%
- Go for COVID-19 Test: 29%
- Stay at Home More: 19%
- Keep a Distance of 1-2 Meters: 17%
- Stop Attending Social Gatherings: 8%
If you were told someone in your household might have coronavirus, do you have a separate room or space for them to stay in?

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Percentage (Yes)</th>
<th>Percentage (No)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Schooling</td>
<td>11%</td>
<td>89%</td>
</tr>
<tr>
<td>Primary</td>
<td>12%</td>
<td>88%</td>
</tr>
<tr>
<td>Secondary</td>
<td>17%</td>
<td>83%</td>
</tr>
<tr>
<td>Higher</td>
<td>25%</td>
<td>75%</td>
</tr>
</tbody>
</table>
What are the challenges to self-quarantine/social distancing?

- Single room home: 57%
- Shared toilet facilities: 31%
- Cannot afford to lose income: 61%
- No money for a place to self isolate: 26%
What are the challenges to adoption of hand-washing behaviors?

Promotion of hand sanitizer may be shifting focus from water and soap – although
What would be your critical needs if a lockdown occurred?

Men are slightly more worried about the financial aspects of a lockdown (48%).
Recommendations: Public Education Campaigns

1) Clarify COVID-19 symptoms and what to do if experiencing symptoms
2) Highlight idea that even those at low risk of severe illness can pass on virus
3) Reach less educated segments of the population
4) Engage more NGO partners and health facilities/workers as they are highly trusted but currently underutilized sources of information
Recommendations – Behavior Change

1. Address inability to forgo income/social distance:
   - Consider social protection strategy to address the inability to self-isolate or practice social distancing
   - What are contextually relevant risk mitigation strategies (i.e. masks, stop social gatherings, etc.)

2. Invest in hand-washing facilities in informal settlements
   - Personal water sources are scarce and the cost of hand sanitizers is prohibitive
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Population Council COVID-19 Research & Evaluations
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.