Bangladesh: COVID-19 knowledge, attitudes, practices and needs

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BANGLADESH: COVID-19 KNOWLEDGE, ATTITUDES, PRACTICES & NEEDS

May 2020
Background

- The first COVID-19 positive patient in Bangladesh was reported on 8 March 2020 by the Institute of Epidemiology, Disease Control & Research (IEDCR).
- On 18 March 2020, the Ministry of Education (MoE) of Bangladesh declared school closures of all educational institutions.
- From 26 March 2020, the first 10-day long nationwide ‘holiday’ was declared by the government, including a ban on all passenger travel via water, rail, and domestic air routes during this period, which ultimately continued until the end of May 2020.
Overview: Data collection

Phone-based survey conducted between 20–30 April 2020

- **Location:** Project areas of Bogura, Jamalpur, Sherpur, Kushtia and Chapainawabganj districts
- **Sample:** Sample from Bogura and Jamalpur represents all the adolescent girls in program area. The rest are a random sample of program-enrolled girls
- **Respondents:** 959 adolescent girls
- **Success rate:** 68%
- **Average interview time:** 22 minutes
## Background characteristics

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Percentage</th>
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<tbody>
<tr>
<td><strong>Age group</strong></td>
<td></td>
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<tr>
<td>10-12 years</td>
<td>9%</td>
</tr>
<tr>
<td>13-15 years</td>
<td>57%</td>
</tr>
<tr>
<td>16-18 years</td>
<td>27%</td>
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<tr>
<td>19-21 years</td>
<td>7%</td>
</tr>
<tr>
<td>Average age (years)</td>
<td>15 years</td>
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<tr>
<td><strong>Schooling status</strong></td>
<td></td>
</tr>
<tr>
<td>In school</td>
<td>81%</td>
</tr>
<tr>
<td>Out-of-school</td>
<td>19%</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
</tr>
<tr>
<td>Unmarried</td>
<td>88%</td>
</tr>
<tr>
<td>Married</td>
<td>12%</td>
</tr>
<tr>
<td><strong>N</strong></td>
<td>959</td>
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</tbody>
</table>
Process of data collection

• Structured questionnaire administered via smartphone with SurveyCTO software
• 11 interviewers trained through Facebook messenger and WhatsApp
• Consent taken through SMS by the respondents
Knowledge on symptoms, transmission and prevention
What are the symptoms of COVID-19?

- Fever: 94%
- Runny nose: 85%
- Dry cough: 72%
- Sore throat: 68%
- Sneezing: 51%
- Headache/Muscle pain: 44%
- Breathing difficulty: 43%
- Diarrhea: 14%

Fever, dry cough and sore throat correctly identified as major symptoms by adolescent girls.

Difficulty breathing being a serious symptom was identified by a small percentage of the adolescent girls.
How can COVID-19 be prevented?

Specific knowledge is higher among older adolescent group and those with higher educational attainment.
Changed practices (compared to previous month) for prevention of COVID-19

- Wash hands more frequently: 71%
- Stayed at home: 66%
- Maintaining social distance while outside from home: 46%
- Can’t meet with school friends: 36%
- Covering mouth and nose when sneezing: 30%
- Stopped hanging out: 23%
- Stopped tuition classes: 19%
- Checking the news more frequently: 15%

70% of adolescent girls said that they use face masks when they go outside.
Risk perception: Can you be infected by coronavirus?

Younger girls are less likely to say they are at high risk compared with older girls (6% for aged 10–15 vs. 18% for aged 16–21)
What steps should be taken if showing COVID-19 symptoms?

- Stay in quarantine/ living in isolation even in the same house: 68%
- Go to the hospital/ health centre only if the symptoms are severe: 51%
- Go to the neighbourhood nurse: 44%
- Call the helpline number: 34%
- Staying home if minor symptoms of cold and fever appeared: 32%
- Go to the market to buy medicine: 12%
Social distancing during lockdown

Mean days staying home per week

- Adolescent girls: 7 days
- Any family member: 1 day

Went out in past 24 hours

- Adolescent girls: 35%
- Any family member: 70%
Effects of and coping with the response to COVID-19
Income status and food security

- 47% of adolescent girls said that the household earned no income this week.
- 27% of adolescent girls said that household income reduced drastically.
- 5% of adolescent girls said that they do not have enough food for today.
- 20% of adolescent girls said that they could afford food expenses only for one week or less if lockdown continues.

Essential items for households:
- 90% of adolescent girls mentioned food (rice, pulses and/or groceries).
- 68% mentioned soap to wash hands frequently.
- 41% mentioned medicine.
How do you study during the time of lockdown?

Among the in-school girls 90% reported studying by herself or studying under the supervision of other family members at home.

Among the in-school girls 26% reported following the classes broadcast on television.
Health and social impacts

10% of adolescent girls (n=85) mentioned having any sick or ill person in her house.

53% of adolescent girls reported increased workload in patient care-taking.

Service seeking

- 41% of sick family members took medicines from the local pharmacy
- 22% of sick family members visited a doctor
- One third of the sick family members did not take treatment

60% of adolescent girls reported experiencing depression sometimes during the lockdown

15% of adolescent girls reported experiencing depression most of the time during the lockdown
Experiences of domestic violence during lockdown

18% of the adolescent girls reported experiencing domestic violence.

- Older girls aged 16–21 reported experiencing more violence compared with younger girls aged 10–15 (32% vs 11%)
- Married girls reported experiencing more violence compared with unmarried girls (35% vs 16%)

28% of the adolescent girls mentioned they observed increased domestic violence in their surroundings during lockdown.

- Older girls aged 16–21 reported observing more violence compared with younger girls aged 10–15 (46% vs 19%)
- Married girls reported observing more violence compared with unmarried girls (53% vs 25%)
Recommendations (1)

Strengthen public education campaigns on:

- Asymptomatic spread
- Social distancing practices
- Help-seeking for suspected infection, such as calling hotline for advice and staying home/self-isolating if one has mild symptoms
- Since younger adolescent girls (aged 10–15) seem to have comparatively less knowledge about COVID-19, the education system should tap into awareness messaging in girls’ life skills curriculum
Recommendations (2)

Provide Social Protection and Safety Net for the most vulnerable

• Address the impacts of income loss and food security, with special attention to adolescent girls and women as increased household work and caring for ill family members have been reported by adolescent girls.

• It is critical that assistance is provided to women in order to help them cope with these challenges.

• Provide access to remote mental health services protection from violence.
# Team Members

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<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Location</th>
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<tbody>
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<td>Mehnaz Manzur</td>
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