

To assist the Ministry of Health and Family Welfare,
Government of India

A joint effort by WHO, IDEA & UNICEF

COVID-19 Grassroot Level Frontline Health Workers' Survey The Social Listening System

IDEA and WHO (Country Office), RCCE Team, Health Security and Emergency



PRESENTATION ROADMAP

Aim

- **Objectives**
- **Methodology**
- **Survey Analysis**
- **Key Findings & Recommendations**



AIM & OBJECTIVES OF THE SURVEY

AIM

To understand the perception issues and challenges with regards to COVID-19 and responds of frontline health workers.

OBJECTIVES

Amidst COVID-19 scenario, to assess the perceptions of frontline health workers on:

**Community's
major concerns**

**Occupational
Risk**



**Mental &
Emotional distress**

**Continuation of
regular services
provided**

**Stigma &
Discrimination**

SURVEY SNAPSHOT

Total Response= 7719

PLANNED RESPONSES	SAMPLE SIZE AS PER CONFIDENCE MEASURE	ACHIEVED RESPONSES	ACHIEVED RESPONSES (ASHA/AWW/ANMs combined)
ASHA- 11415	568	364	6721
AWW- 220088	584	373	
ANM- 3634	515	328	

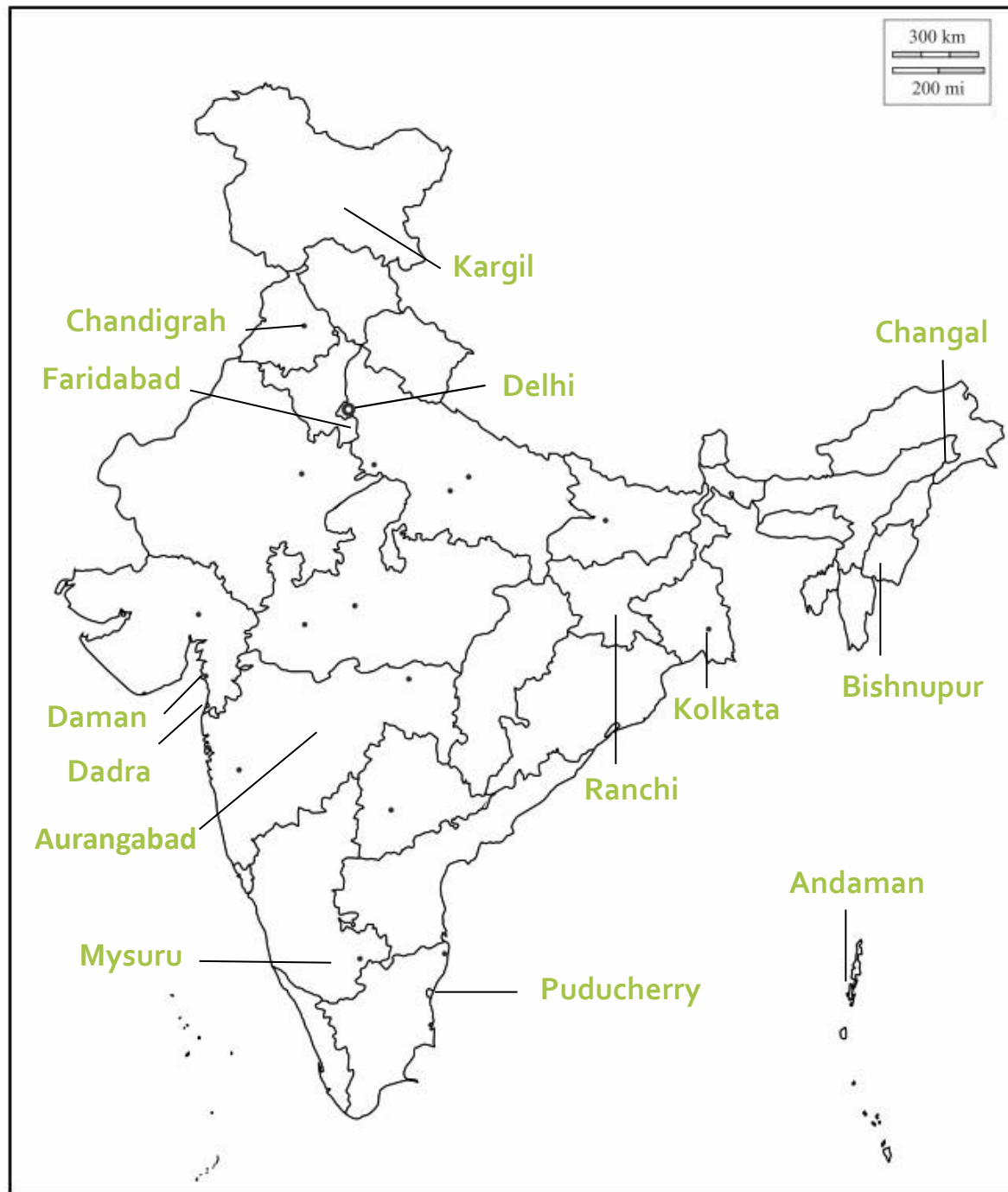
Sample size identified for the survey 95% confidence level & 5% margin

Survey was rolled out in Hindi (हिन्दी), Kannada (ಕನ್ನಡ), Marathi (मराठी), Punjabi (ਪੰਜਾਬੀ), Tamil (தமிழ்), Urdu (اردو) and English

Targeted
Frontline
Survey

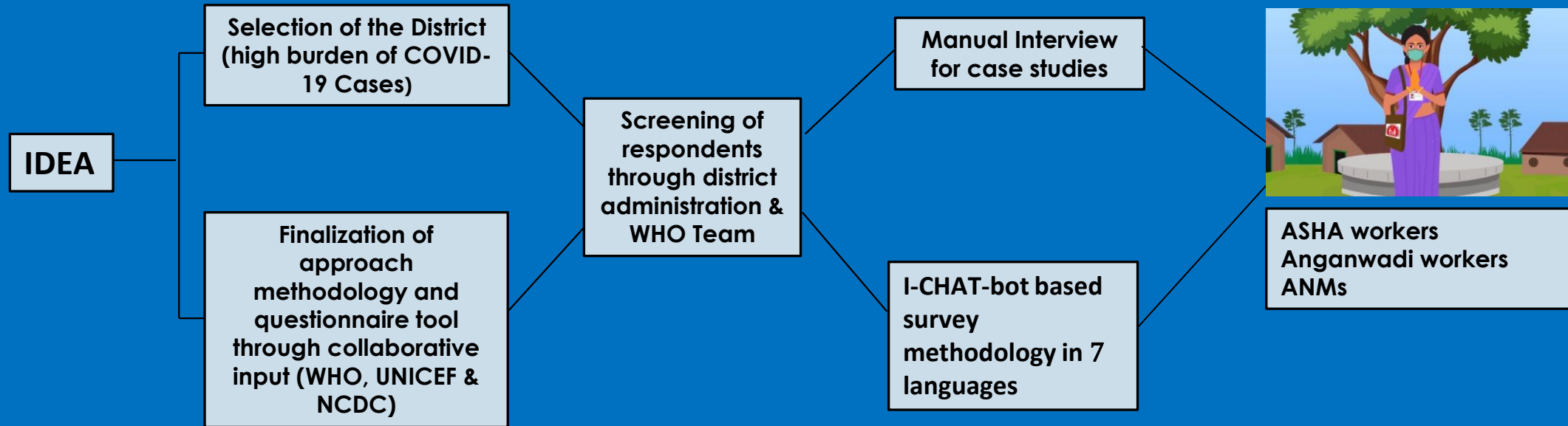
District
Health
Workers

for



METHODOLOGY

Survey commenced on- June 20, 2020
Survey ended on - August 21, 2020



Continued...

14 districts were selected based on:

1. Affected districts of the country
2. Urban/rural mix
3. Country wise approach
4. Equally targeting ASHA/ANM/AWW workers

Respondents mobilized to continue as feedback givers and they continue to participate in subsequent perception surveys and reviews.

Personal interviews and I-Chat-box also ensures geo-tagging and minimalistic data capture at the end of survey.



DATA & DEMOGRAPHICS



SURVEY LANGUAGES

LANGUAGES	NUMBER OF RESPONDENTS
Bengali	16
English	1294
Gujarati	1
Hindi	1669
Kannada	4370
Kashmiri	146
Marathi	6
Urdu	1
Punjabi	214
Tamil	2
TOTAL	7719

RESPONDENT'S DESIGNATION

HEALTH WORKERS' DESIGNATION	NUMBER OF RESPONDENTS
ANM	256
ASHA	524
AWW	139
ASHA Mentor	4
Health Assistant	66
Lab Technician	1
Lady Health Visitor	3
Supervisor	5
ASHA/AWW/ANMs combined	6721(87%)
TOTAL	7719

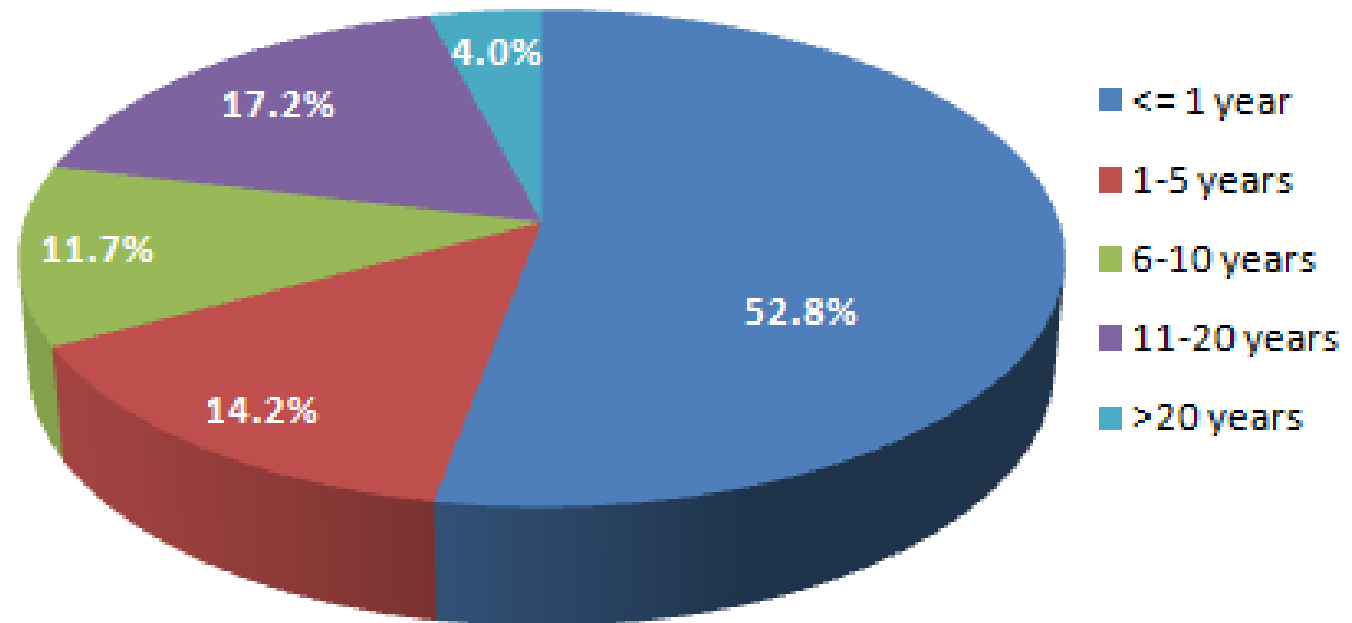
S.No	DISTRICTS	DISTRICTS MENTIONED BY RESPONDENTS	DISTRICTS MENTIONED BY RESPONDENTS PLUS THOSE GEO-TAGGED*
1	Dadra & Nagar Haveli	92	114
2	Aurangabad	19	755
3	Daman	18	18
4	Bishnupur	34	34
5	Mysuru	1856	2444
6	Ranchi	8	19
7	Changal	413	413
8	Puducherry	18	547
9	Andaman	11	11
10	Kargil	10	157
11	Faridabad	201	310
12	Chandigarh	9	64
13	Delhi	740	1789
14	Kolkata	13	321
	TOTAL	3,442	6,996

*Places as per geo-tagging with nearest coordinates have been merged with respective District or the nearest District, for ex; **Kavoor, Shimoga, Mandya, Tumakuru, Ramanagara have been merged with Mysuru**, similarly, Kolkata includes other nearby places in West Bengal and North-east, Delhi includes other nearby places in UP, Chandigarh includes other nearby places in Punjab and Haryana.

WORK EXPERIENCE

Demographically,
younger
ASHA/Anganwadi/ ANMs
have taken the survey.

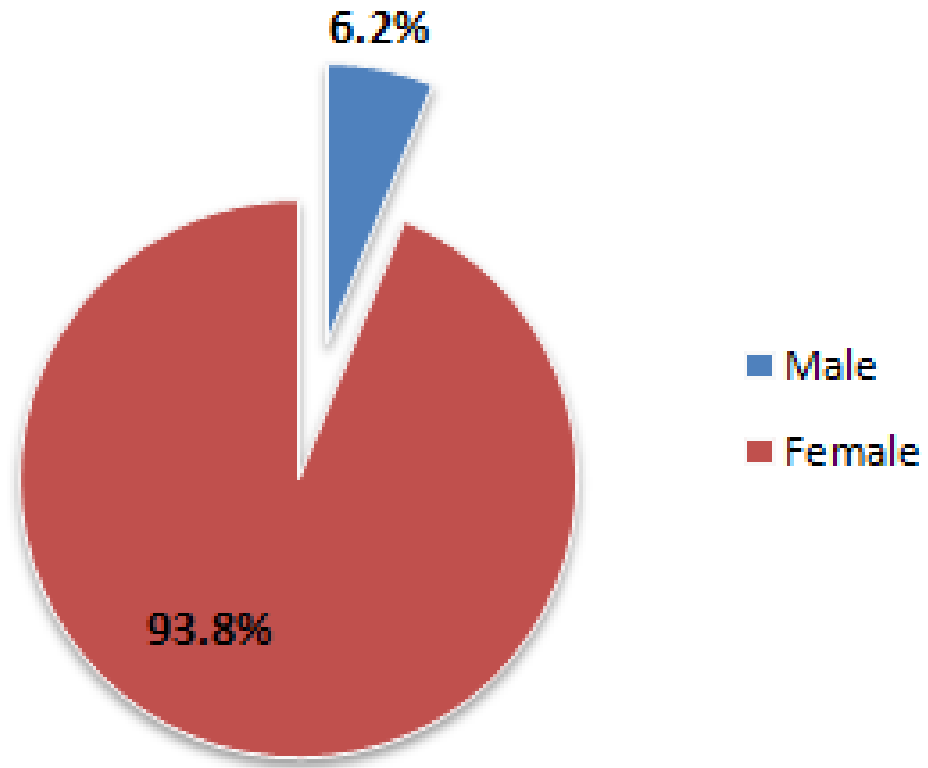
Number of years of work experience of
Respondents (N=2516)



NUMBER OF MALE VS FEMALE RESPONDENTS

Majority of the
respondents are female.

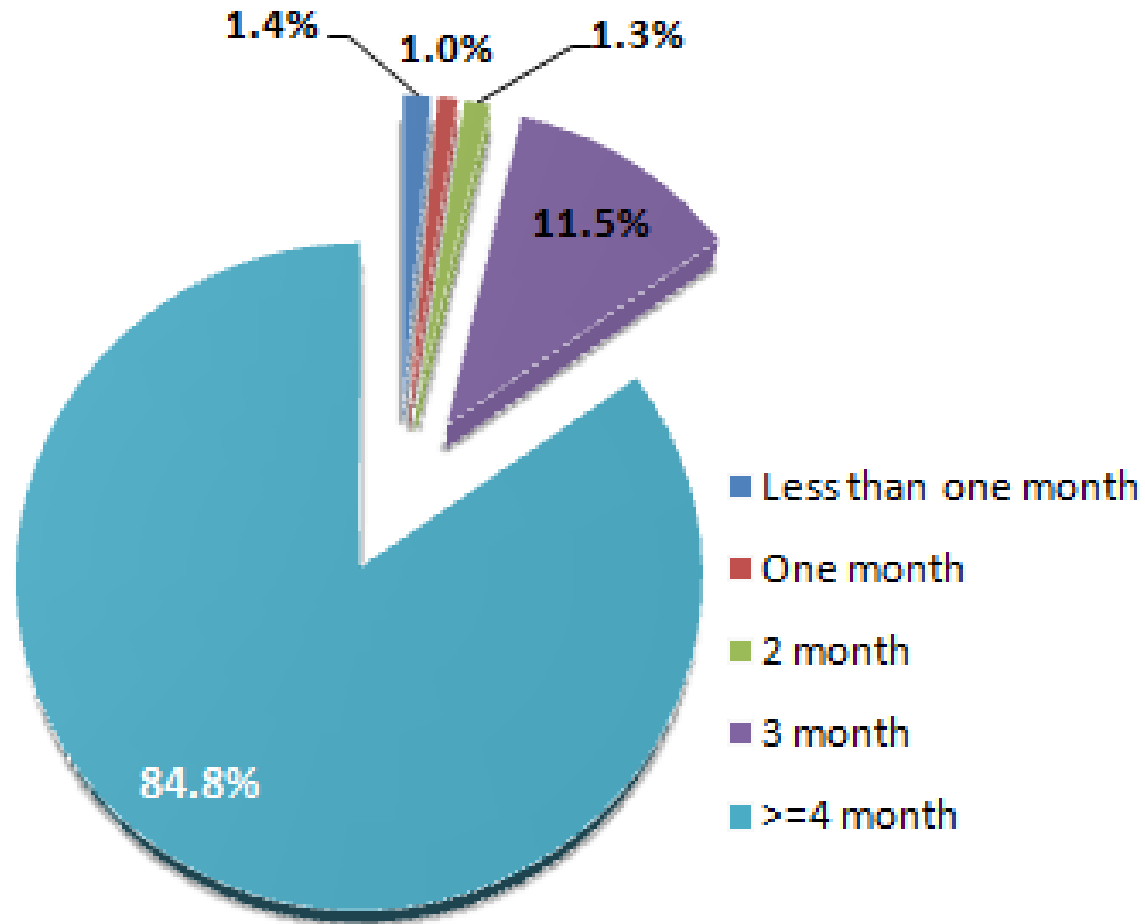
Gender profile of Respondents (N=2967)



TIME SINCE INVOLVED IN COVID-19 RESPONSE- SERVING AS COVID WARRIOR

FLWs are interacting with
community from the
initiation of the COVID-19
response/management.

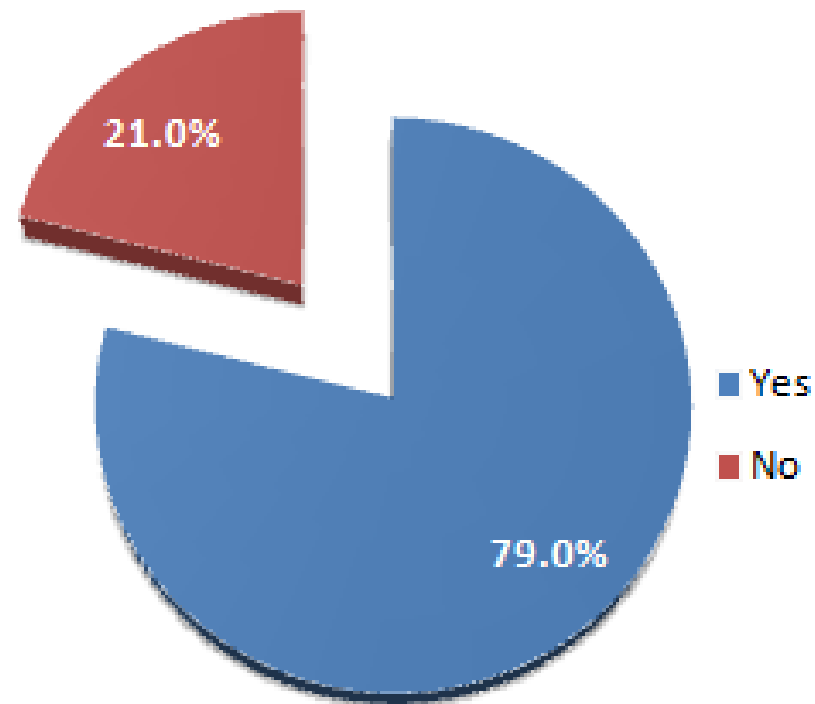
Time since when working in COVID-19 Response (N=2137)



EDUCATION, AWARENESS OR SENSITIZATION TRAINING ON COVID-19 MANAGEMENT

Four-fifths of the respondents have received some sort of synchronized COVID-19 training.

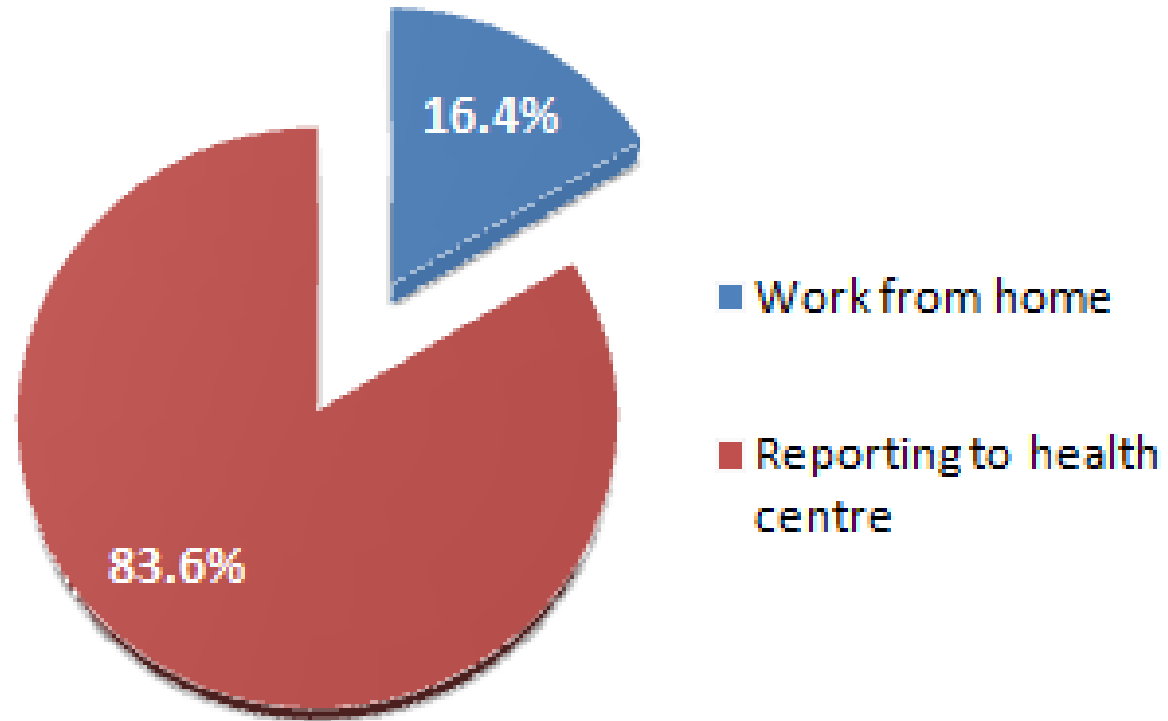
Have you received any training on COVID-19 management (N=2063)



MODALITY OF WORK

Majority of healthcare workers are reporting to the Health Centres. Hence, the work is still field based.

Modality of working (N=2016)



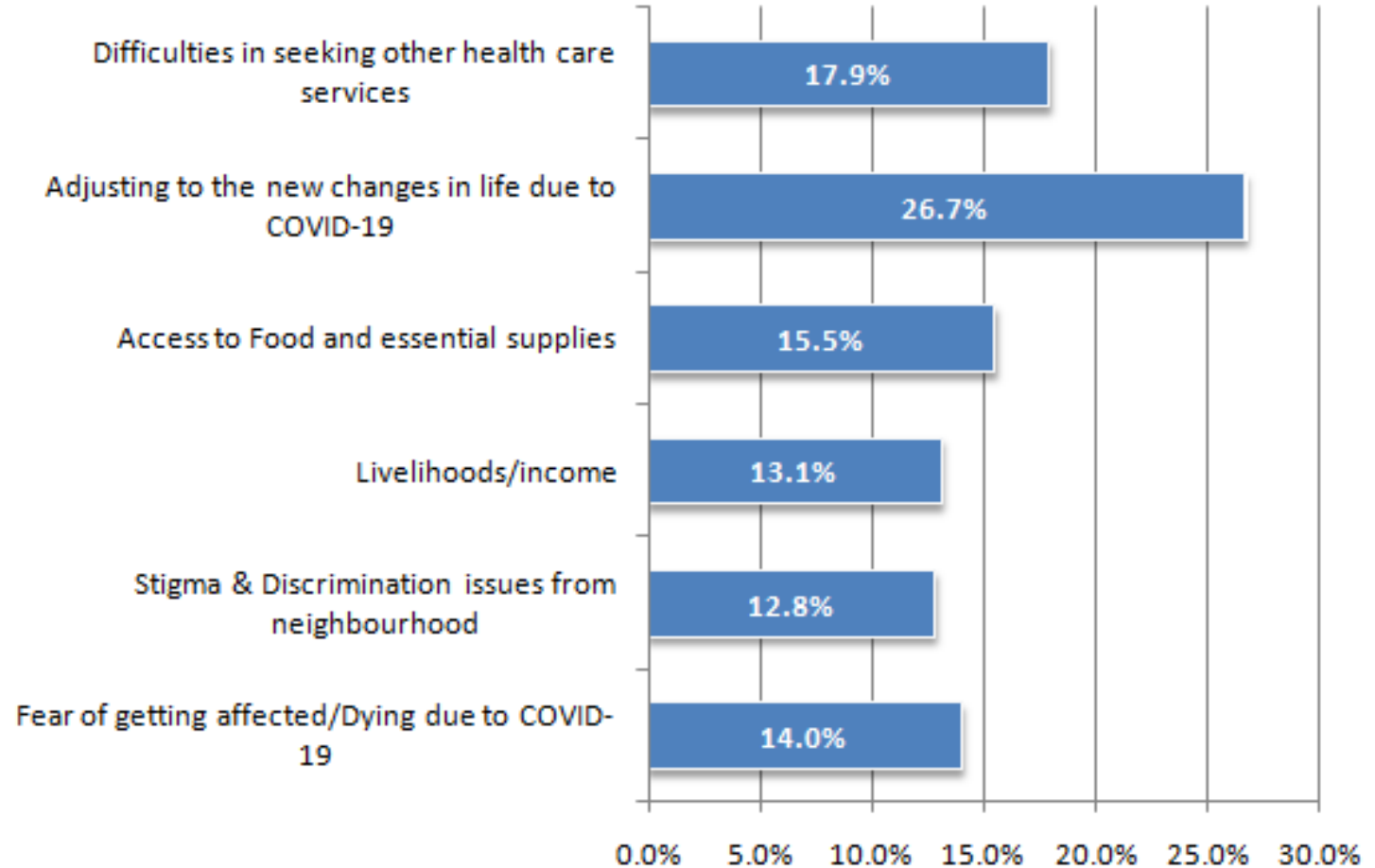
SURVEY ANALYSIS



COMMUNITY'S MAJOR CONCERNS ABOUT COVID-19 THROUGH THE EYE OF FRONTLINE HEALTH WORKERS

Community is concerned about the 'new normal'.

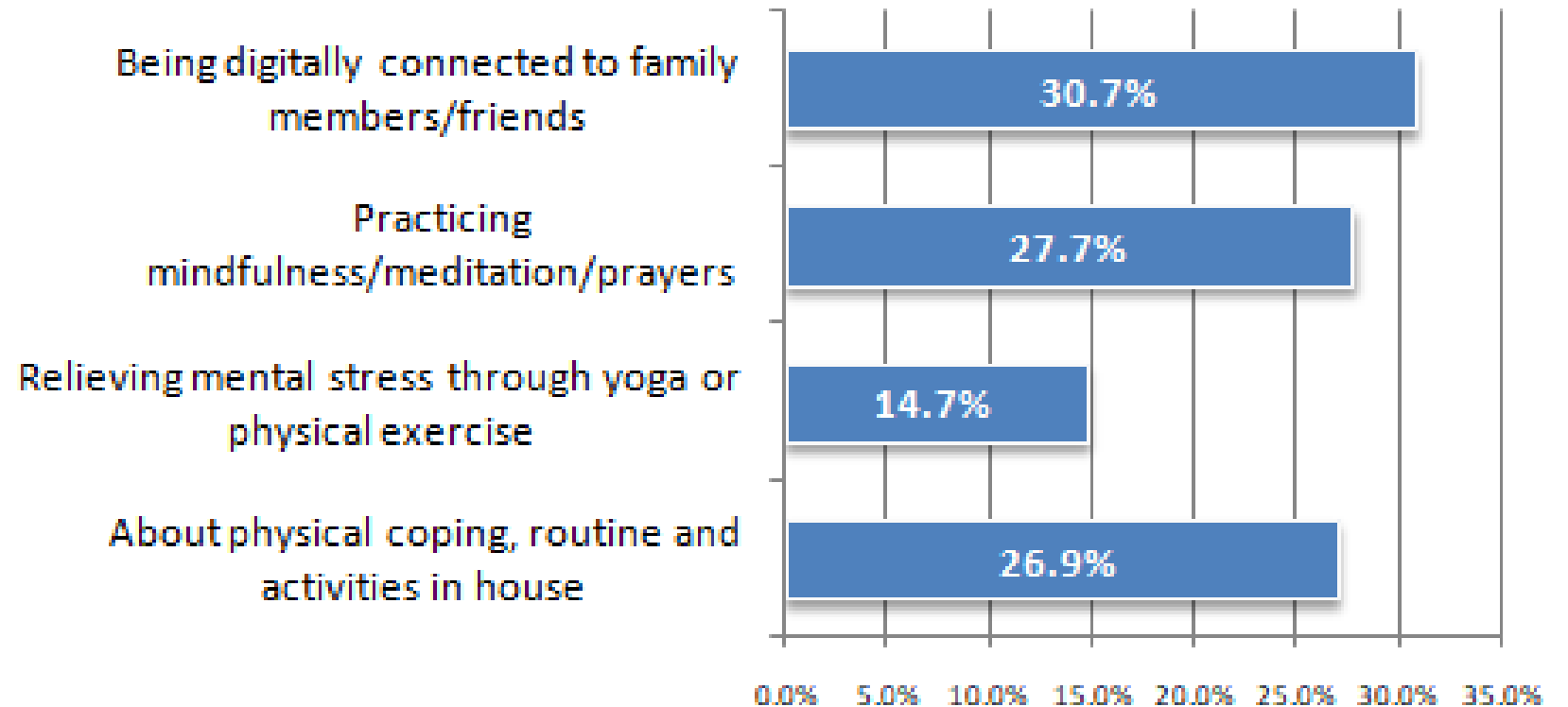
What are some of the major community concerns
(N=3858)



PSYCHOSOCIAL HEALTH CARE

The health workers are not creating awareness about COVID-19 but also advising about comprehensive well being.

How are you supporting/advising families to cope with current COVID-19 crises (N=3066)



“Guiding the women folk to maintain positivity, and also to keep our mind in positive frame was essential”

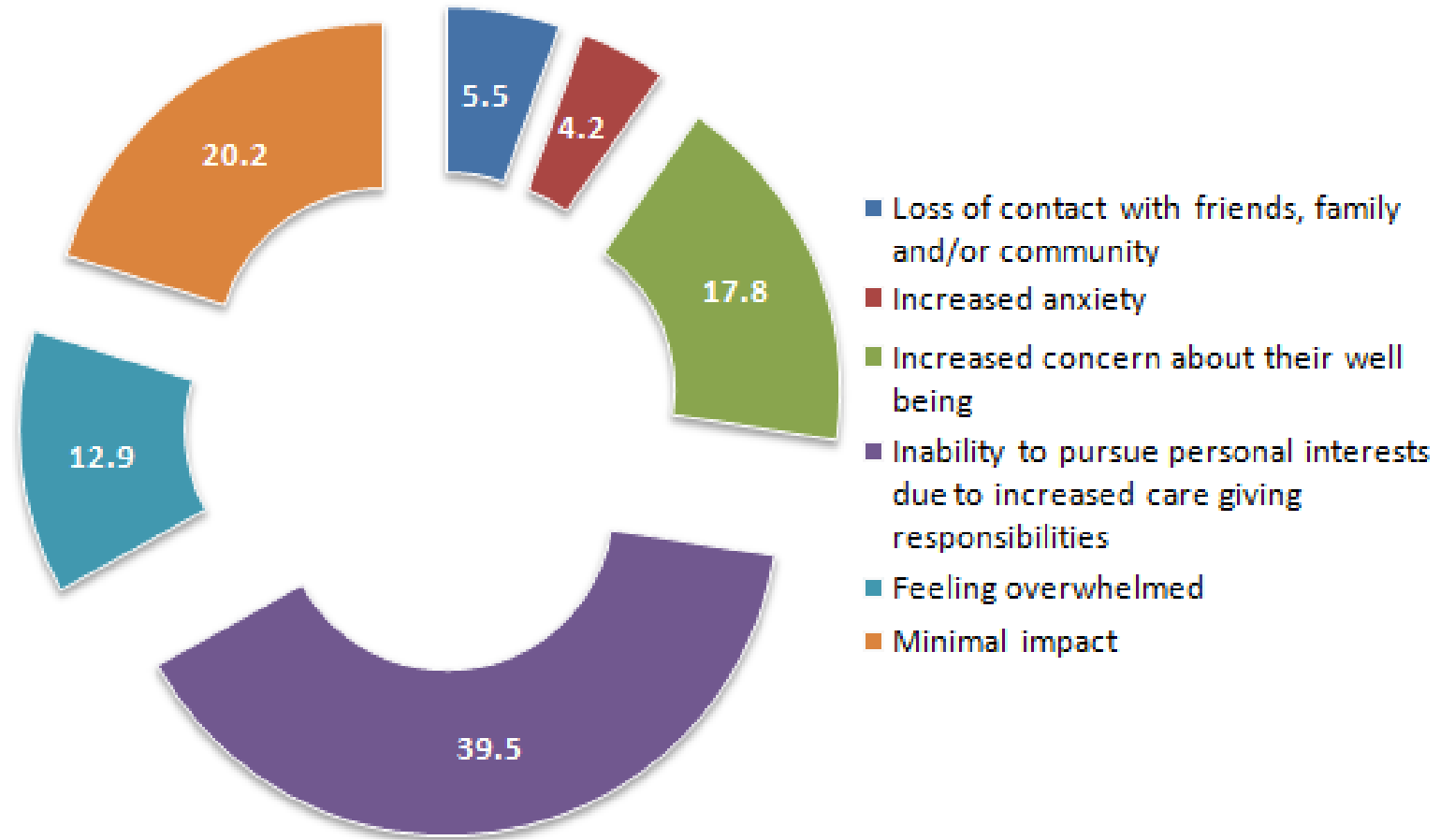
Radhika Rao, ANM, Aurangabad



IMPACT ON THEIR OWN MENTAL AND EMOTIONAL DISTRESS

Long hours of work and risk associated with it affects them physically and mentally.

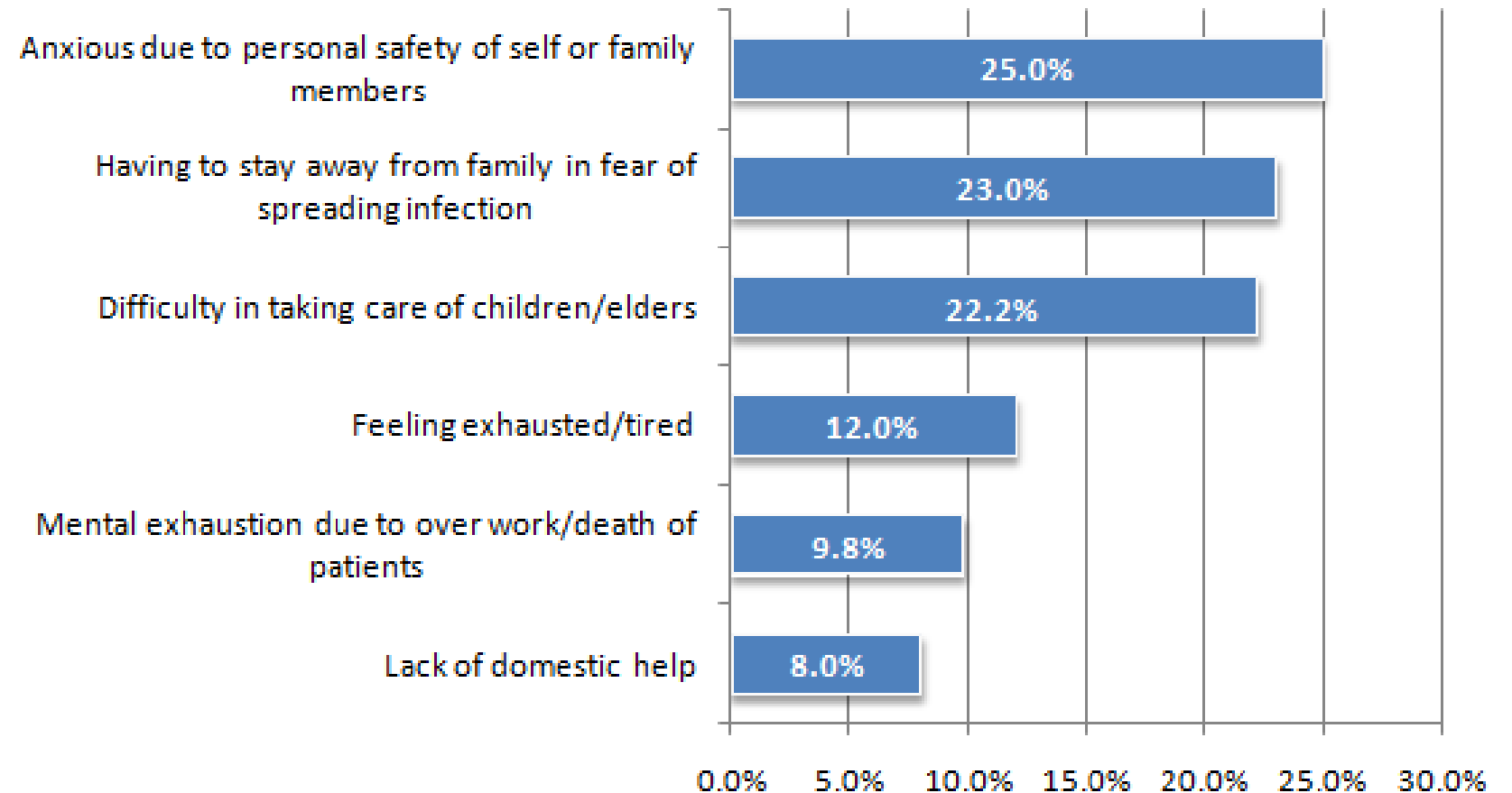
Describe impact of COVID-19 on your own mental and emotional well-being (N=2680)



CHALLENGES WHILE WORKING

Occupational risks do not permit them to interact with their family.

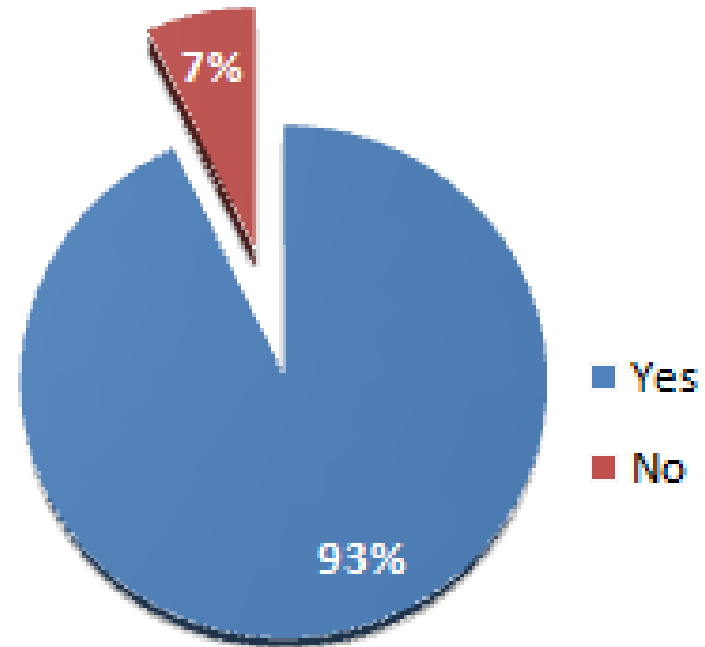
Challenges faced at home (N=3238)



UNDERTAKING HOME VISITS

Undertaking home visits for contact tracking of the suspected cases and making people aware about the preventive measures.

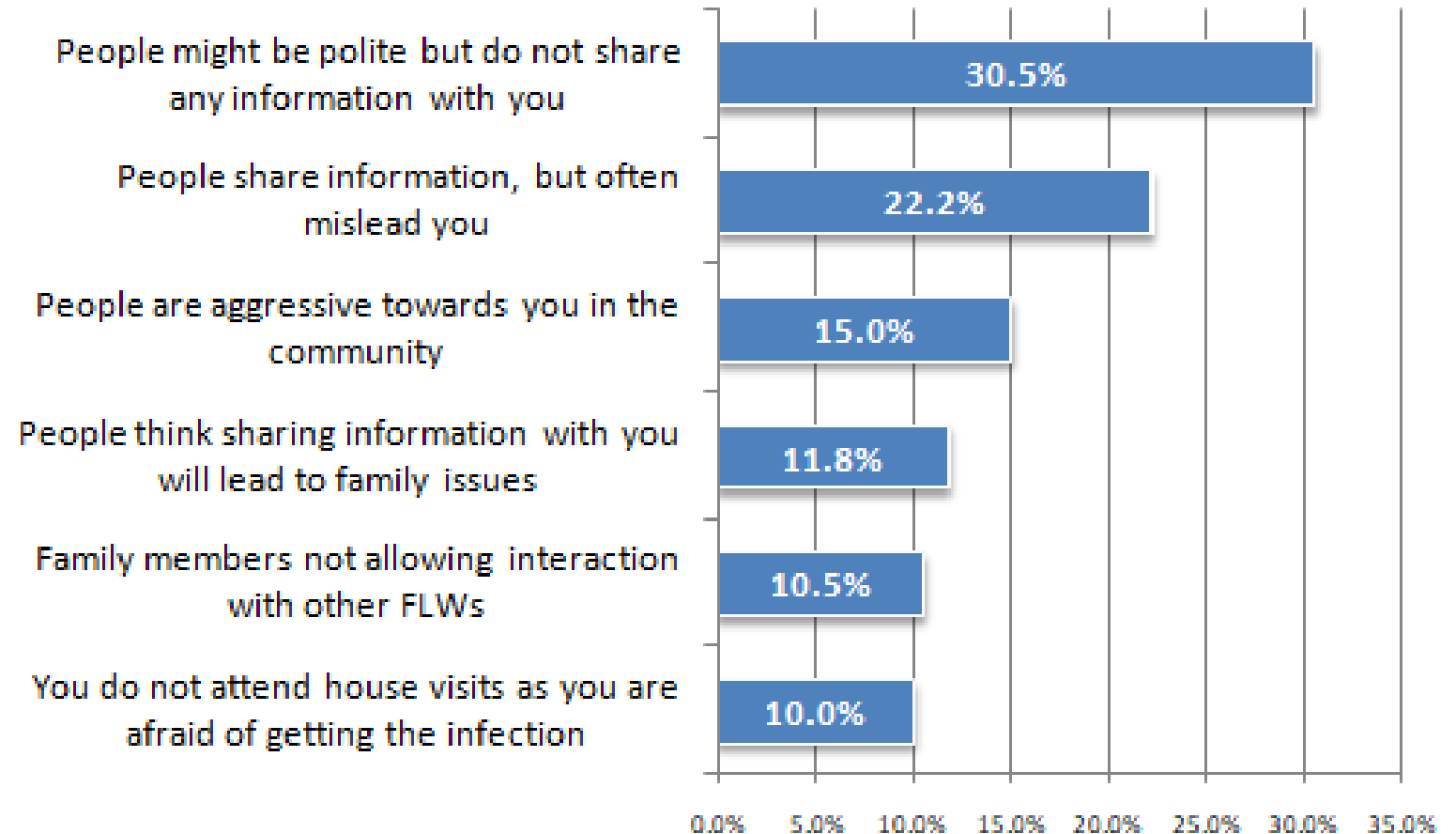
Are you undertaking house-to-house visits regularly (N=1463)



FACTORS AFFECTING HOUSE VISITS

There is a 'trust gap' between the community and healthcare workers.

Concerns impeding undertaking of house-to-house/community visits (N=1982)



“Earlier access to some particular community households was tricky as they would not allow us to penetrate and socialise with womenfolk, of their community, but later on when things settled down we were allowed to continue our services.”

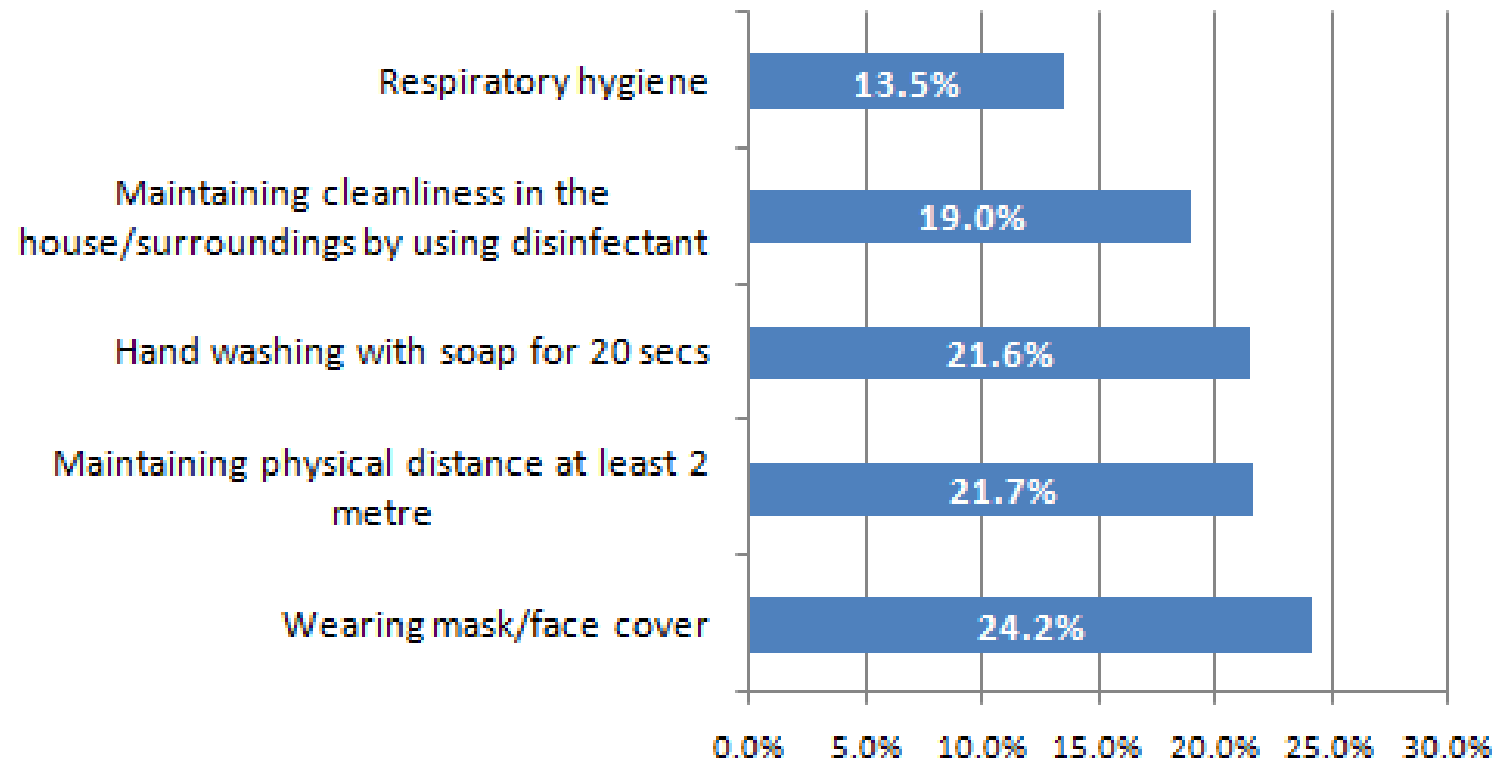
Shivani, ASHA, Aurangabad



KEY PREVENTIVE BEHAVIOURS TO PROMOTE

Effective risk communication with regards to preventive measures have successfully converted into protective behavioural practices.

Which are most appropriate behaviour for COVID-19 prevention that you should impart? (N=4136)



“Making people follow precautionary behaviour is difficult, even after repeated dissemination bringing a behavioural change is a challenge they still fail to understand the risk they carry.”

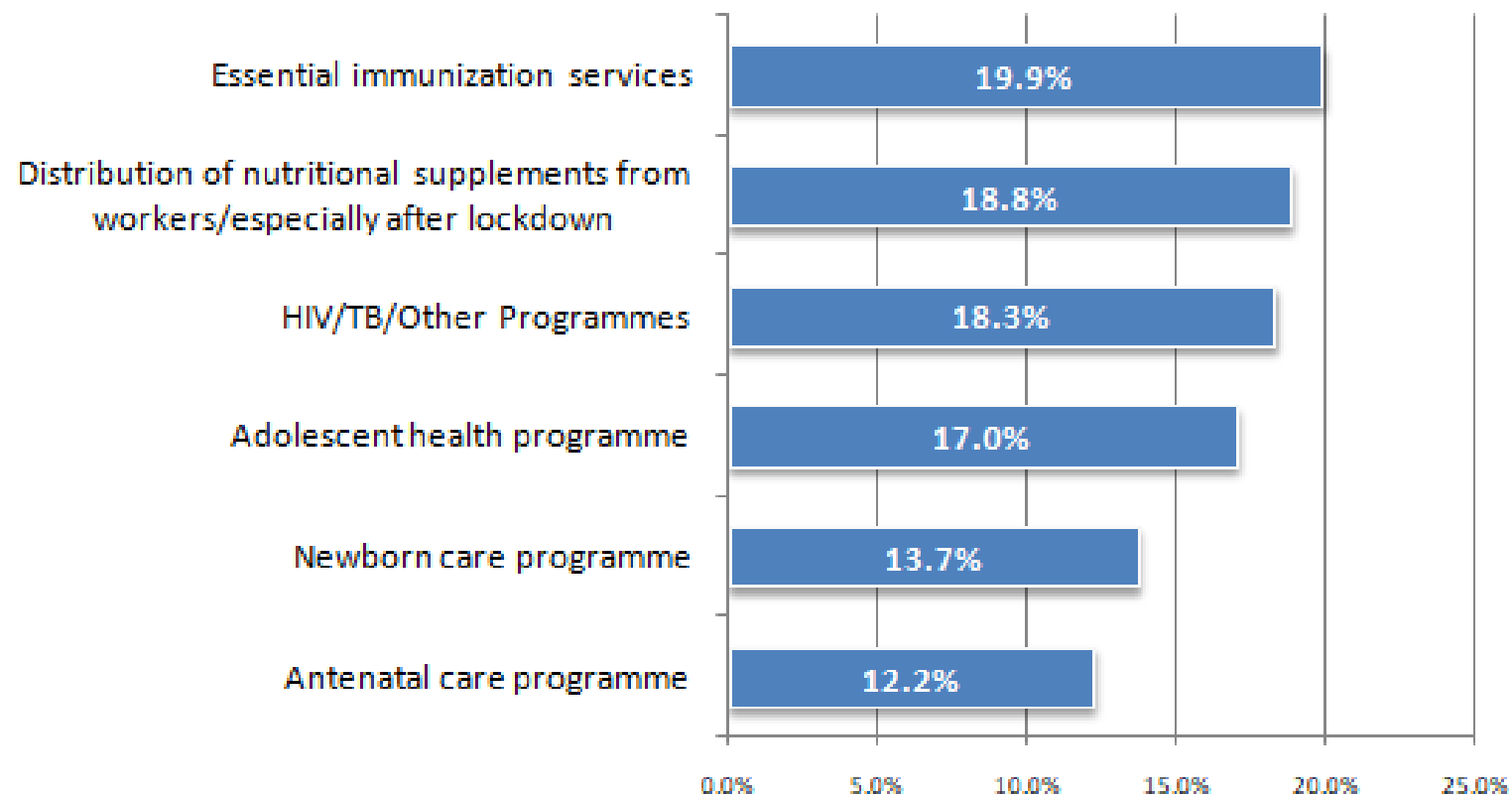
Titika Tai, AWW, Daman



ACTIVITIES/PROGRAMMES AFFECTED BY COVID-19 RESPONSE

FLWs are trying their best but COVID-19 pandemic has significantly affected the continuity of other and essential healthcare services.

Routine health services affected due to COVID-19 duty (N=3577)



“We have not only provided them continued services, but also counselled them that essential services like vaccination should not be stopped due to COVID-19, as that will bring greater problems to the community.”

**Rachna Yadav, ASHA,
Faridabad**



“COVID-19 is our priority but this affects are on other programmes too. But we are taking care of all.”

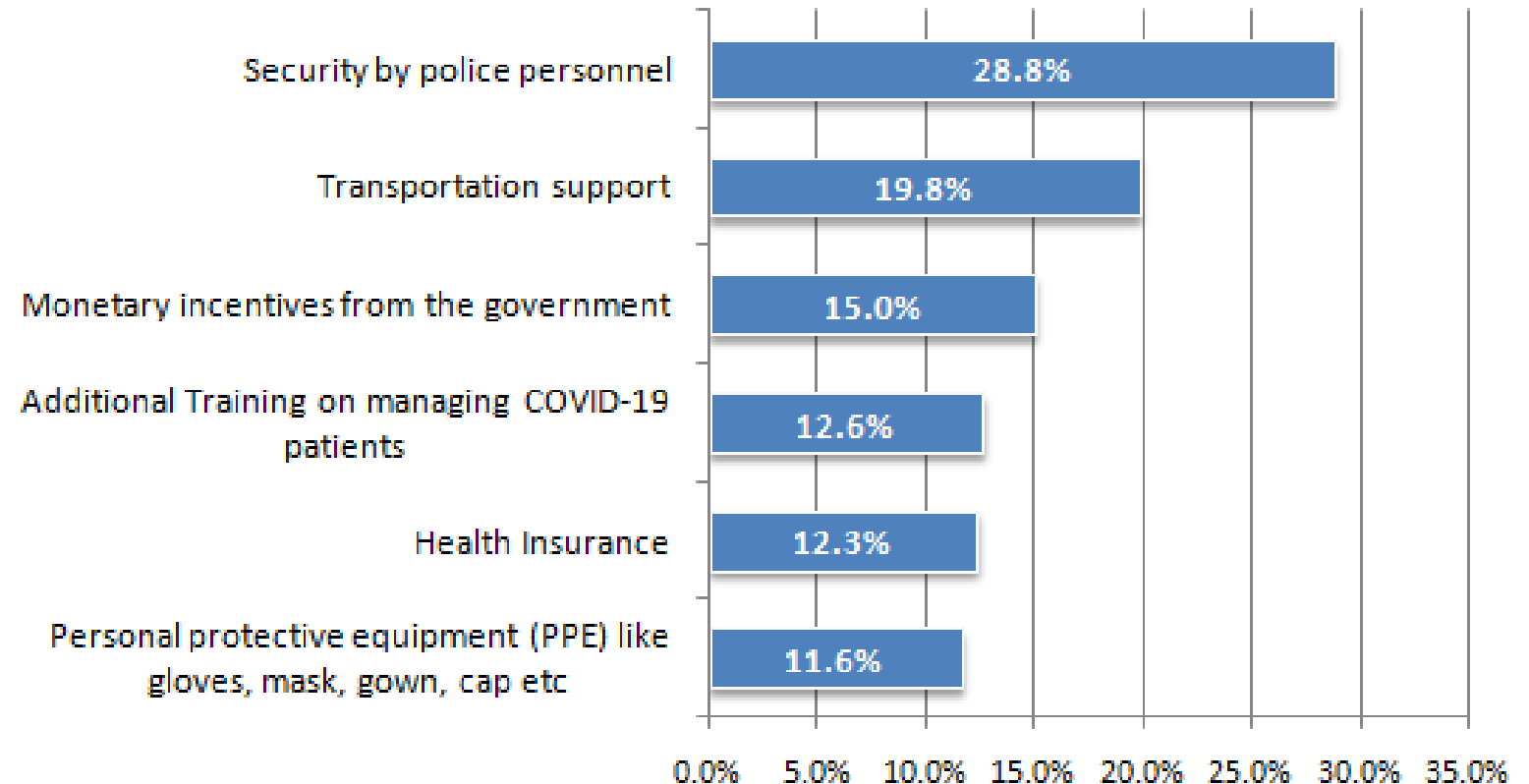
**ANM, Sukh Yashwant
Shalore, Faridabad**



SAFETY & SECURITY OF HEALTH WORKERS

Health workers have become 'Corona Carriers/Spreader'. Therefore, they request for security by police personnel.

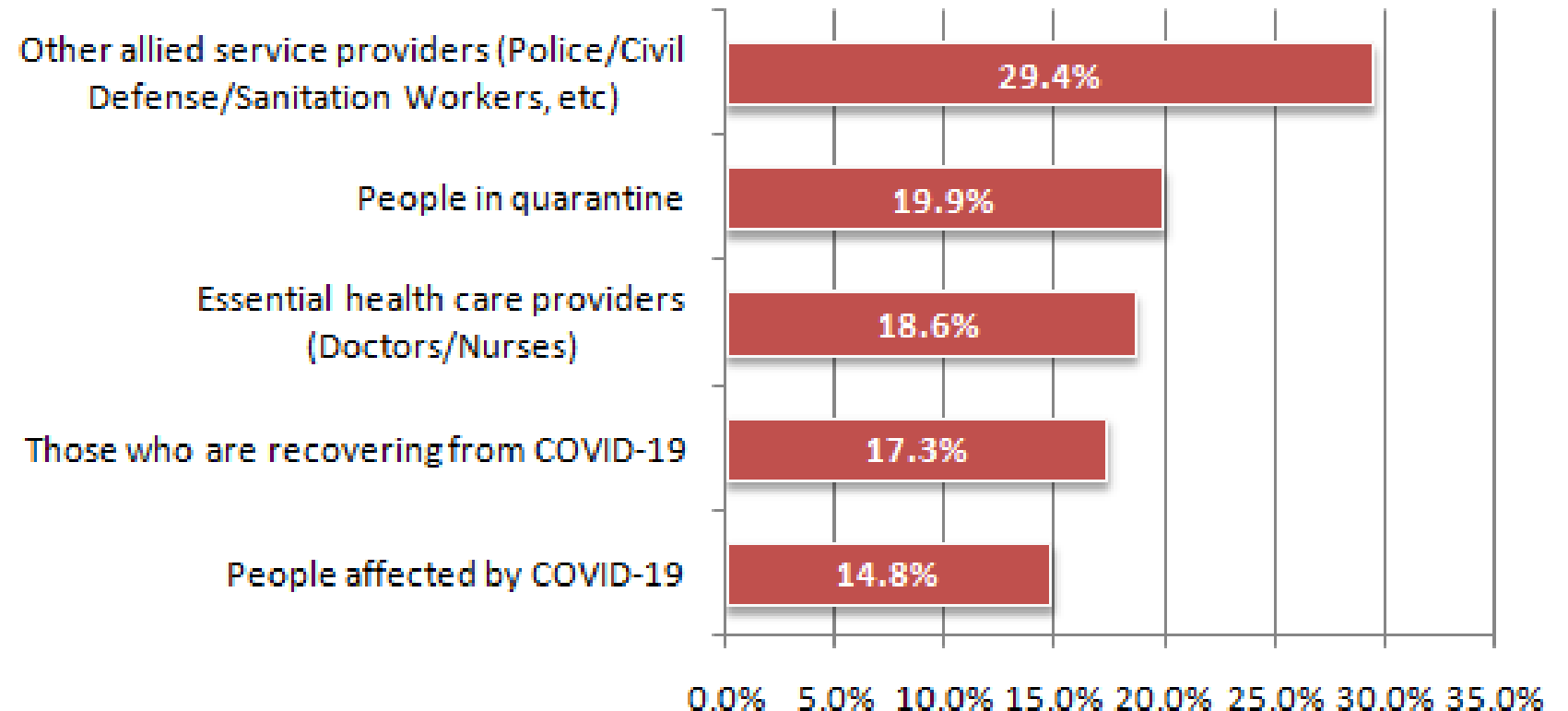
What are your additional needs before visiting community hotspot for COVID-19 (N=3650)



STIGMA AND DISCRIMINATION FOR DIFFERENT GROUPS

COVID-19 has created unprecedented panic in the minds of people. There is a need for community level behaviour change.

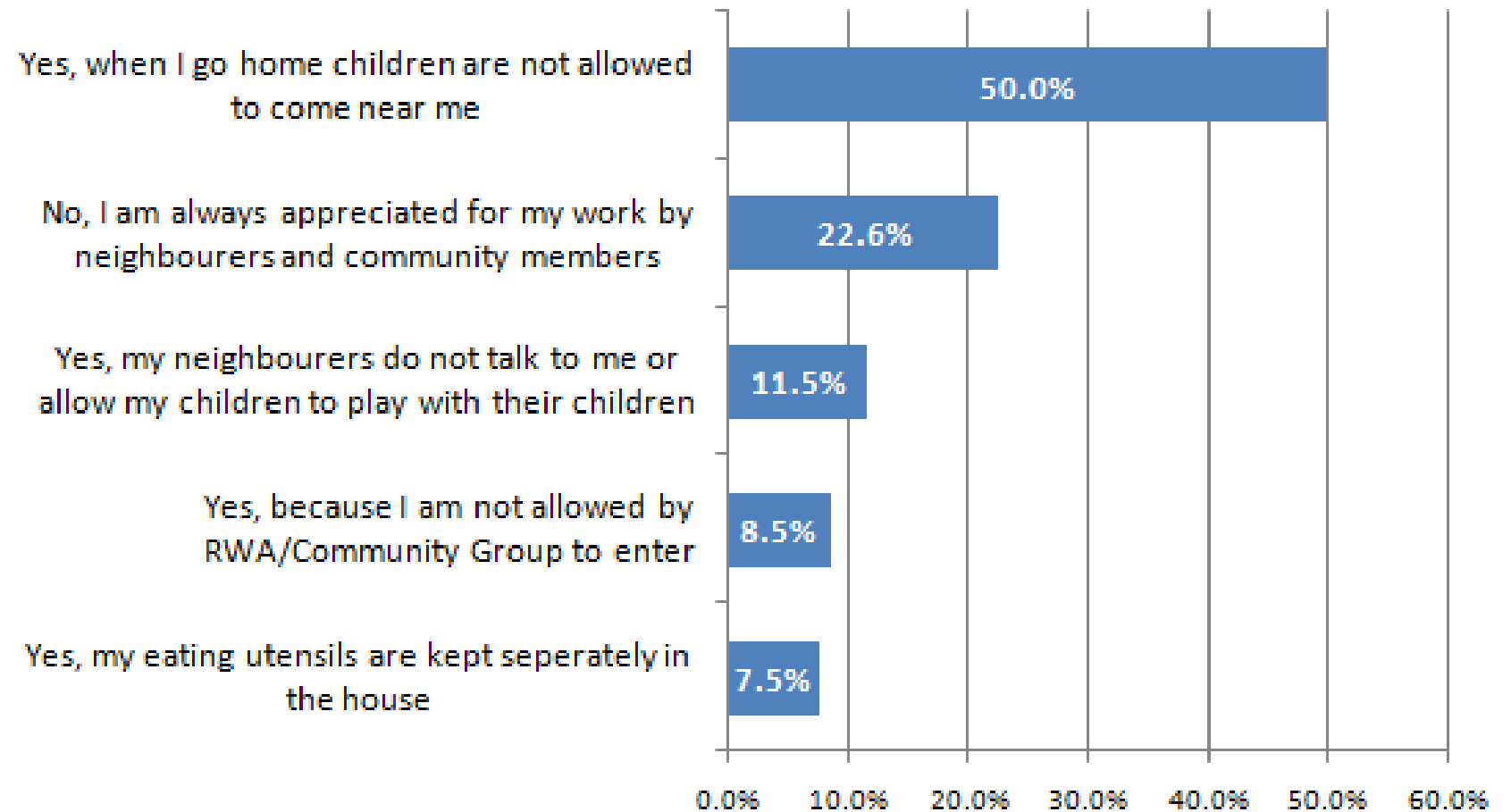
Are there stigma/discrimination issues in any of the following groups (N=2492)



STIGMA AND DISCRIMINATION BY FAMILIES OR COMMUNITY

Though they are appreciated for their contribution but they still face stigma and discrimination.

Does family/community discriminates against you as you are COVID-19 worker (N=1701)



“Initially, there was stigma and people were afraid to come near us or bring their children, but now with time and awareness, people are not panicking.”

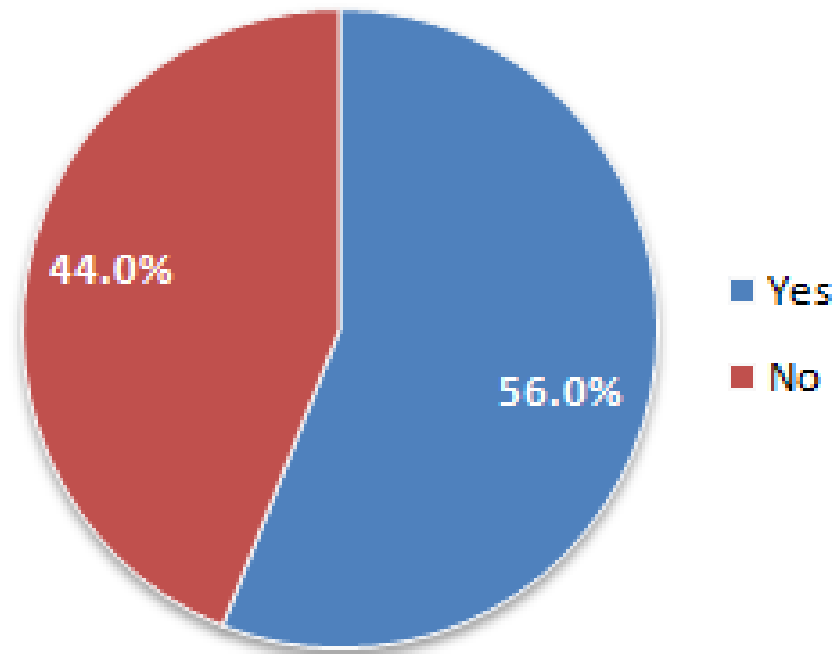
ASHA, Medhu, Daman
District



SCENARIO BASED- SANITATION WORKERS ARE BEING STIGMATISED

Healthcare and allied service providers are being stigmatized . However community sensitization and behavioural change seen in the community.

If Sanitation worker at neighbourhood clinic is not allowed in community? Is this stigma issue (N=1128)



KEY FINDINGS AND RECOMMENDATIONS



Major Observation	Key Recommendation
<p>We observed that majority of the survey respondents had fewer number of years of work experience.</p>	<p>This could indicates that the younger group of the health workers participating more in the survey is more receptive to receiving new information and involve in dialogue related to COVID-19 prevention and management. This aspect should be leveraged in programme design as this younger group could be effective champions for change in the fight against COVID-19.</p>
<p>Though 79% of the health workers said that they had received any training on COVID-19 management, another 21% said that they hadn't received any such training.</p>	<p>This aspect needs consideration and attempts should be made to train all frontline health workers in COVID-19 prevention and management.</p>
<p>Respondents felt that other health care services are being affected including essential immunization and other pertinent services, such as the national programmes.</p>	<p>Strategic Planning and effective implementation is required to ensure other pertinent health services are not disrupted due to predominant emphasis on COVID-19 management.</p>

Major Observation	Key Recommendation
<p>Majority of health workers feel that increased responsibilities due to COVID-19 duty is adversely affecting their personal lives, including the stigma and discrimination they are facing at their home and neighbourhood. This could have long term psychological impact on health workers and may deter their COVID-19 duty and may have attendant adverse effect on their other duties related to other health programmes.</p>	<p>This aspect needs policy consideration. Programmes for psychological support of health workers should be developed to prevent any adverse impact on health services delivery due to psychological impact on the large health workforce at the peripheral level.</p>
<p>People not sharing information or sharing misleading information is another discouragement faced by the health workers.</p>	<p>Targeted IEC programmes are needed to educate the community in this direction.</p>
<p>Though health workers did enumerate and respond to some of the key preventive behaviours essential for COVID-19 prevention, we found that this response was not uniform across the respondents.</p>	<p>There is a need of regular refresher trainings for health workers for their capability enhancement in this direction.</p>

Major Observation	Key Recommendation
<p>Interestingly, majority of health workers (29%) said that security by police personnel is what they require the most before visiting hotspot for COVID-19. This was followed by Transportation support (20%)</p>	<p>Community's possible hostile behaviour towards health workers has the potential to impede COVID-19 prevention and management. This concern needs policy consideration and effective programme development in this direction.</p>
<p>Another interesting finding from this study was that majority (30%) of health workers perceive that there are stigma/discrimination issues faced by allied service providers such as Police/Civil Defense/Sanitation Workers.</p>	<p>There is a need for community level behaviour change through effective IEC.</p> <p>There is also a pertinent and emerging need to develop and implement programmes for psychological support of the work force of allied service providers such as Police/Civil Defense/Sanitation Workers.</p>

ANNEXURE

OPTION -WISE RESPONSES



Community and Health Workers' Concerns & Coping Mechanism	
1. What are some of the major community concerns as if now? a. Fear of getting affected/ dying due to COVID-19 b. Stigma & discrimination issues from neighbourhood c. Livelihoods/income d. Access to Food and essential supplies e. Adjusting to the new changes in life due to COVID-19 f. Difficulties in seeking other health care services	1 response: 976 2 responses: 216 3 responses: 177 4 responses: 113 5 responses: 57 6 responses: 197
1. How are you supporting/advising families to cope with the current COVID-19 crises? a. About physical coping routine and b. activities that can be in the house c. Relieving mental stress through yoga or physical exercise d. Practicing mindfulness/ meditation/ prayers e. Being digitally connected to family members/ friends	1 response: 919 2 responses: 263 3 responses: 247 4 responses: 220
How would you describe the impact of COVID-19 on your own mental and emotional well-being? a. Loss of contact with friends, family, and/or community b. Increased anxiety c. Increased concern about their well being d. Inability to pursue personal interests due to increased care giving responsibilities e. Feeling overwhelmed f. Minimal impact	1 response: 968 2 responses: 266 3 responses: 105 4 responses: 144 5 responses: 23 6 responses: 29
What are the likely challenges you are facing at home? a. Feeling exhausted/ tired b. Mental exhaustion due to over work/death of patients c. Anxious due to personal safety of self or family members d. Having to stay away from family in fear of spreading infection e. Difficulty in taking care of children/elders f. Lack of domestic help	1 response: 822 2 responses: 216 3 responses: 142 4 responses: 98 5 responses: 58 6 responses: 146

Continued...

Effect on Health Workers' Tasks	
<p>According to you, which are the most appropriate behaviour about COVID-19 prevention that you should impart? (click all relevant options) TBC</p> <ul style="list-style-type: none"> a. Wearing mask/ face cover b. Maintaining physical distance at least 2 metre c. Hand washing for soap with 20 secs d. Respiratory hygiene e. Maintaining cleanliness in the house/ surroundings by using disinfectant 	<p>1 response: 374</p> <p>2 responses: 83</p> <p>3 responses: 173</p> <p>4 responses: 223</p> <p>5 responses: 437</p>
<p>Which of your routine activities are being affected due to COVID-19 duty?</p> <ul style="list-style-type: none"> a. New Born Care programme b. Distribution of nutritional supplements from workers/especially after lockdown c. Essential immunization services d. Ante-natal care programme e. Adolescent health programme f. HIV/ TB/ other programmes 	<p>1 response: 547</p> <p>2 responses: 168</p> <p>3 responses: 116</p> <p>4 responses: 84</p> <p>5 responses: 102</p> <p>6 responses: 250</p>
<p>As community health workers, what are your additional needs before visiting the community hotspot for COVID-19? (Tick all relevant options)</p> <ul style="list-style-type: none"> a. Additional Training on managing COVID-19 patients b. Personal protective equipment (PPE) like gloves, mask, gown, cap etc. c. Health Insurance d. Monetary incentives from the government e. Security by police personnel f. Transportation support 	<p>1 response: 487</p> <p>2 responses: 149</p> <p>3 responses: 120</p> <p>4 responses: 133</p> <p>5 responses: 145</p> <p>6 responses: 208</p>

Continued...

COVID-19 related stigma	
<p>Are you aware of stigma and discrimination issues in any of the following groups in your community?</p> <p>a. People affected by COVID-19</p> <p>b. People in quarantine</p> <p>c. Those who are recovering from COVID-19</p> <p>d. Essential health care providers (Doctors/ Nurses)</p> <p>e. Other allied service providers (Police/ Civil Defence/ Sanitation Workers etc.)</p>	<p>1 response: 655</p> <p>2 responses: 196</p> <p>3 responses: 108</p> <p>4 responses: 49</p> <p>5 responses: 185</p>
<p>Do you think that your family/community discriminates against you as you are supporting COVID-19 interventions?</p> <p>a. Yes, when I go home the children are not allowed to come near me</p> <p>b. Yes, my eating utensils are kept separately in the house</p> <p>c. Yes, my neighbours do not talk to me or allow my children to play with their children</p> <p>d. Yes, because I am not allowed by RWA/Community Group to enter</p> <p>e. No, I am always appreciated for my work by neighbours and community members</p>	<p>1 response: 837</p> <p>2 responses: 153</p> <p>3 responses: 83</p> <p>4 responses: 41</p> <p>5 responses: 29</p>

THANKYOU

