# **TRAINING - COVID-19 Community Insights - Round 02**

About the Survey  We would like to understand w	hat you already know and still want t	to know about COVID-19.	
	minutes, and includes questions abou o COVID-19 and communicate with yo	out health and communication. Your answers will help u you. Thank you for taking part.	S
For online survey: Start the survey: c.g. chat or email) to avoid dist		ete it with no interruptions. Please close other programr	nes
answers we receive, from you a organisations, might use the ar	and from many other participants, ar	ask you for your name or address. We will combine all th and we will store those answers securely. We, or our par l ever be able to identify your specific answers. 2. You ca	tner
How you can contact us?			
Email: Contact us			
Do you agree to answer a few	questions?		
Yes	○ No		
lf you are under 18 years old o	do your parents agree for you to a	answer the survey?	
Yes	○ No	Ooes not apply	
How did you find out about th	nis survey?		
Homepage			
Social media			
Somebody called me			
Somebody talked to me	on the phone		
Other			
Enumerator ID:			

### Location

#### Which country do you currently live in? Afghanistan Australia Bangladesh Bhutan Brunei Cambodia China **DPR** Korea Federated States of Micronesia Fiji India Indonesia Kiribati Japan Tonga Lao People's Democratic Republic ( ) Malaysia Maldives Mongolia Myanmar Nauru Nepal New Zealand Pakistan Palau Papua New Guinea The Philippines Marshall Islands Samoa Singapore Solomon Islands South Korea Sri Lanka Thailand Timor-Leste Tuvalu Vanuatu Viet Nam What area do you live in What city do you live in? Are you currently living in the country where you were born? Yes No Don't know If no, where were you born? Bangladesh Afghanistan Australia Bhutan Brunei Cambodia China **DPR** Korea Federated States of Micronesia Indonesia Fiji India Kiribati Japan Tonga Lao People's Democratic Republic Malaysia Maldives Nauru Mongolia Myanmar Nepal New Zealand Pakistan Palau Papua New Guinea The Philippines Marshall Islands Singapore Samoa

South Korea

Timor-Leste

Viet Nam

Solomon Islands

Thailand

Vanuatu

Sri Lanka

Tuvalu

Please briefly describe the reason you are currently outside of your country of birth.

d are you?		
12 and under 30 - 39 60 - 69	13 - 17 40 - 49 70 - 79	18 - 29 50 - 59 80 and over
ender do you identify as?		
Female Prefer not to say	Male	Other
identify as LGBTIQ+?		
I am pregnant or breastfeeding		
None of the above  explain:		
Yes, I was tested and the result was I had CIVD-19 symptoms but it was No I was tested and the result was	s positive s not confirmed by a test	
	ender do you identify as?  Female  Prefer not to say  identify as LGBTIQ+?  Yes  No  Prefer not to say  of the following applicable to your lam pregnant or breastfeeding  I have a chronic disease (i.e. cance)  I have a mental health condition  Other  None of the above  explain:  currently have COVID-19 or had  Yes, I was tested and the result was  I had CIVD-19 symptoms but it was  No I was tested and the result was	and any any and any

### **Education**

What is your highest level of education?
No formal education Elementary school or similar (about five years of school)
High school or similar (about 13 years of school) University degree (e.g. BA)
Advanced university degree (e.g. MA, PhD, MD)
Language
What main language do you speak at home?
Which other language?
Which other languages do you speak?
Knowledge of COVID-19
What do you think about the following statement? "I feel well informed about the steps I can take to keep myself and others safe from COVID-19"
I strongly agree I agree Neutral I disagree I strongly disagree
don't know
How dangerous do you think COVID-19 is?
A little dangerous
Very dangerous
Not dangerous
Why do you think COVID-19 is not dangerous?
I am not in a risk group
I don't believe COVID-19 is real
I stay home and am not exposed
I am taking herbal medicine that is keeping me safe
My religion is keeping me safe
Other
Please explain:
How do you think COVID-19 is spread?
Blood transfusion Droplets from infected people It is air-borne
Direct contact with infected people Touching contaminated objects/surfaces
Mosquito bites Eating contaminated food Drinking unclean water
Don't know Other, please specify

Other, please specify:

## **Protecting Yourself**

What a	are the measures you use most to protect you and your family from COVID-19?
	Washing hands regularly using hand sanitizer with 70% alcohol or soap and water for 20 seconds
	Covering mouth and nose when coughing or sneezing
	Avoiding close contact with anyone who has a fever and cough
	Avoiding touching your eyes, nose, and mouth
	Staying indoors
	Following the recommendations of authorities in my country to prevent the spread of COVID-19
	Using traditional herbal remedies
	Wearing a facemask
	Not meeting with other people
	I cannot protect myself
	Praying or other religious ceremonies
	I don't believe that the virus exists
	I have not taken any of these protective measures
	Other, please specify
Other:	
How of	ften did you do these protective measures last week?
	Once a week
	Every other day
	Several times a day
	Once a day
	Less often than weekly
	Other

at are some of the reasons preventing you from taking measures to protect yourself against the virus?
I cannot afford soap or sanitiser
I don't have access to running water
I live in crowded conditions
My work means I can't keep distance to other people
I cannot afford face masks
It's too much effort
I have other priorities
I don't think it is dangerous
Other
ner, please explain:
w likely are you to continue protective measure if your Ministry of Health or the World Health Organisation (WHO) commend them?  Likely
Unlikely
Undecided
Don't know
Other
ner, please explain:
wash your hands frequently. Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them th soap and water. Why? Washing your hands with soap and water or using alcohol-based hand rub kills viruses that may on your hands
Maintain physical distancing. Maintain at least 1 metre (3 feet) distance between yourself and anyone who is coughing or eezing. Why? When someone coughs or sneezes they spray small liquid droplets from their nose or mouth which may ntain the virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus if the person coughing is the disease.
<b>Avoid touching eyes, nose and mouth.</b> Why? Hands touch many surfaces and can pick up viruses. Once contaminated, ands can transfer the virus to your eyes, nose or mouth. From there, the virus can enter your body and can make you sick.

	nctice respiratory hygiene. Make sure you, and the people around you, cover your mouth and or or tissue when you cough or sneeze. Then throw the used tissue in a bin immediately. Why? Dr	_
fever, autho in adv	<b>You have fever, cough and difficulty breathing, seek medical care early.</b> Stay home if you feet cough and difficulty breathing, seek medical attention and call in advance. Follow the directions brity. Why? National and local authorities will have the most up to date information on the situation and an arrange of the right health facility. This will not spread of viruses and other infections.	of your local health ion in your area. Calling
your r	y informed and follow advice given by your healthcare provider. Follow advice given by your national and local public health authority or your employer on how to protect yourself and other nal and local authorities will have the most up to date information on whether COVID-19 is spreast placed to advise on what people in your area should be doing to protect themselves.	rs from COVID-19. Why?
<b>Sourc</b> false	es: WHO, UNICEF, IFRC	
false  Know	wledge of Treatment g COVID-19, have you sought essential health care services?	
false  Know	wledge of Treatment g COVID-19, have you sought essential health care services? etenatal care, immunisation, HIV, diabetis, hypertension)	
false  Know	wledge of Treatment g COVID-19, have you sought essential health care services?	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? estenatal care, immunisation, HIV, diabetis, hypertension) Yes	
Knov During (e.g. an	wledge of Treatment  g COVID-19, have you sought essential health care services?  stenatal care, immunisation, HIV, diabetis, hypertension)  Yes  No	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? stenatal care, immunisation, HIV, diabetis, hypertension) Yes No ain barrier for me to seek a health care provider is:	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? stenatal care, immunisation, HIV, diabetis, hypertension) Yes No ain barrier for me to seek a health care provider is: It is too expensive	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? stenatal care, immunisation, HIV, diabetis, hypertension) Yes No ain barrier for me to seek a health care provider is: It is too expensive It is too far away	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? stenatal care, immunisation, HIV, diabetis, hypertension) Yes No ain barrier for me to seek a health care provider is: It is too expensive It is too far away I am not satisifed with the quality of health care services	
Knov During (e.g. an	wledge of Treatment g COVID-19, have you sought essential health care services? Intenatal care, immunisation, HIV, diabetis, hypertension) Yes No ain barrier for me to seek a health care provider is: It is too expensive It is too far away I am not satisifed with the quality of health care services I am afraid of getting infected with COVID-19	

Select all that apply.	?		
Hydroxychloroquine			
Existing vaccine			
Drinking or applying disinfectants to	your body		
Traditional herbal remedies or foods	s, such as: garlic, ginger, lemo	on, and honey	
Steam treatment			
Remdesivir			
There is no cure at the moment			
Don't know			
Other, please specify			
Other:			
			_
Fears and Worries Thinking about the past two weeks, how often have you felt the following because	Not at all	Sometimes	Every day
of COVID-19? Sad, anxious or worried			
Lonely	0		
•	$\bigcirc$		
Happy, hopeful	$\bigcirc$	$\bigcirc$	$\bigcirc$
Motivated	$\bigcirc$	$\bigcirc$	
Stigma			
Do you think a specific group of people is	the cause of COVID-19 spre	eading to your community	1?
Yes	No	A little	
Oon't know	Other, please specify		
Which group of people do you think is the	e cause of COVID-19 spread	ing?	

Do you think other people would treat yo	ou badly if they kne	w you had CO	VID-19?		
Yes					
Maybe					
No					
On't know					
Anyone can get COVID-19 during a global p suffering from COVID-19 have done nothin to work together to prevent and address st	g wrong and shou <b>l</b> d r	not be treated	differently. Colle		•
Media Frequency					
» Trust					
How often do you use the following channels to find information about COVID-19?	Daily	Weekly	Monthly	Never	l don't know that channel
<b>Television</b>	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	
Printed newspapers	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Radio stations	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Nebsites or online news pages	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social media (e.g. Facebook, Twitter, YouTube, WhatsApp, Line)	$\circ$	$\bigcirc$	$\bigcirc$	$\circ$	$\circ$
Search engines (e.g. Google)			$\bigcirc$		
Other, namely:					
Media and Social Media How much do you trust information about COVID-19 from the following sources?	I trust them a lot	l trust the little	m a I don't	trust them	l don't know that source
Conversations with family or friends				$\bigcirc$	
Community health workers				$\bigcirc$	
Community or religious leaders				$\bigcirc$	
Traditional healers	$\bigcirc$	$\bigcirc$		$\bigcirc$	$\bigcirc$
Government					
Ministry of Health					
Red Cross Red Crescent volunteers					
JNICEF					

World Health Organization (WHO)	$\bigcirc$	$\bigcirc$	$\bigcirc$
Other community volunteers, namely:			
Other trusted sources, namely:			
Do you feel governments and organisation	ns who are respond	ling to COVID-19 are	listening to you?
Yes, a lot			
Yes, a little			
No, not at all			
Oon't know			
Other, please specify			
How do you like to receive information?  Don't prompt			
Face-to-face from another person			
Through listening (audio)			
Through watching a video (visual)			
Through looking at a poster/picture (	(visua <b>l</b> )		
Reading a text			
Other			
Other, please specify:			
What are your three preferred ways of sha	aring your opinion	or feedback with us	?
Face-to-face to a humanitarian worke	er		
Face-to-face to a government official			
Through an existing representative o	of my community (co	mmunity leader etc.)	
I would like to chose a representative	e from my communit	y to give my feedbacl	k
Through a messenger service (Whats	sApp, Line etc.)		
Through social media (Facebook, Twi	itter etc.)		
Through a feedback box			
Through calling a hotline			
Through E-Mail			
Other			
Other, please specify:			

### **Information Requirements**

Don't pi	rompt
	What my community can do
	Symptoms of COVID-19
	Personal stories from others about how they cope
	Information about development of new vaccine against COVID-19
	Information about development of treatment for COVID-19
	How I can personally prevent spread of the disease in my country
	How I can take care of a person who is in the risk group
	What I can do if me or my family member have symptoms
	How I can best take care of my children's school education
	Details on travel restrictions
	Information on returning to work
	Information on COVID-19 testing
	Other
	other information would you like to know about COVID-19?  other information would you like to know that is NOT about COVID-19?
Vacc	ines
If there	
	e was a vaccination against COVID-19 available and approved, would you get vaccinated?
$\bigcirc$	Yes
0	Yes Maybe
0 0 0	Yes Maybe No
	Yes Maybe
O O What a	Yes Maybe No
O O What a	Yes Maybe No Don't know
What a	Yes  Maybe  No  Don't know  are your concerns about a vaccine?
What a	Yes  Maybe  No  Don't know  are your concerns about a vaccine?  I don't trust that it's safe
What a	Yes  Maybe  No  Don't know  Are your concerns about a vaccine?  I don't trust that it's safe  It will be too expensive for me
What a	Yes  Maybe  No  Don't know  Are your concerns about a vaccine?  I don't trust that it's safe  It will be too expensive for me  I don't believe vaccinations work

Which quest	ions do you have about potential vaccines against COVID-19?
Don't prompt	
Who	will get the vaccine
Will it	be safe for children
How	will the vaccine be tested
How	long will the vaccination last
Are th	nere any health risks in getting vaccinated with a new vaccine
Which	h countries are working on the vaccines
How	long will it take until there is a vaccine
How	can I get the vaccine
Doll	nave to get vaccinated
How	much will a vaccine cost
Othe	r
Please expla  Many potent	in:  tial vaccines for COVID-19 are being studied, and several large clinical trials may report results later this year. If a
vaccine is pr distributed. effective vac	oven safe and effective, it must be approved by national regulators, manufactured to exacting standards, and WHO is working with partners around the world to help coordinate key steps in this process. Once a safe and cine is available, WHO will work to facilitate equitable access for the billions of people who will need it. More about COVID-19 vaccine development is available here. (Source: WHO)
-	<b>k</b> thing else you'd like to share with us? This can include your expectations or ideas on how we should r needs and worries better
uaaress you	- Heeds did Worries seece
	more information on the website of your ministry of health and WHO you can also reach out to your local Red rescent to find out more information.
Thank you fo with useful i	or taking part in this survey. Your answers help us react more effectively to COVID-19 and to reach more people nformation.