

May 2021

Perceptions of a pandemic: Africa Red Cross / Red Crescent volunteer perceptions

About this report

This report presents highlights from the Covid-19 perceptions survey of Red Cross / Red Crescent (RCRC) volunteers across the Africa region. The goal is to gain insights into how the pandemic and the RCRC’s response are perceived and experienced across Africa by both citizens of affected communities and valuable members of the Movement. This will enable the International Federation of the Red Cross and Red Crescent Societies (IFRC) and National Societies to use evidence-based decision making to inform local, national, and regional Covid-19 response strategies and ensure activities are effective and relevant. The IFRC will share results and send country-level data to National Societies to engage specifically with their volunteers’ feedback, critique, and ideas.

Aims of the Covid-19 perception survey

- Identify the motivations, challenges, and suggestions of Red Cross / Red Crescent volunteers during the pandemic;
- Explore community perceptions of Red Cross / Red Crescent National Societies across Africa;
- Assess whether volunteers feel safe, supported, equipped, and adequately trained during these challenging times;
- Reflect on whether volunteers can provide feedback to the Red Cross / Crescent, and feel their opinions are taken into consideration;
- Assess levels of trust in vaccinations for the virus;
- Identify community ideas for managing the crisis.

Key findings

- The majority of volunteers surveyed feel well equipped, informed, and trained by the Red Cross / Red Crescent during the pandemic (72% positive). Those who need additional support mention that equipment, insurance, and greater visibility in terms of clothing, jackets, and identification would make them feel better supported.
- Most respondents (72%) have felt safe carrying out their Red Cross / Red Crescent activities during Covid-19 and report that communities are still willing to talk to them about the virus (78%). Those who do not feel safe need more and better-quality masks.
- Volunteers think communities are very concerned about the educational and economic impacts of Covid-19, but less concerned about the health and social impacts.
- Only 58% of volunteers surveyed would get the vaccine if it was recommended to them, worrying it would be dangerous or ineffective. They predict similar reluctance in their communities, less than half (47%) believing that people in their communities would get the vaccine.

Overview of methodology¹

This report summarises the responses of 2,628 Red Cross / Red Crescent volunteers across the Africa region who took part in a perceptions survey in February and March 2021.

An online survey was shared with National Societies in 49 countries, primarily via WhatsApp and email. WhatsApp was chosen as it is the medium through which many National Societies stay in contact with volunteers. Perceptions from 21 National Societies are included in the aggregate analysis.

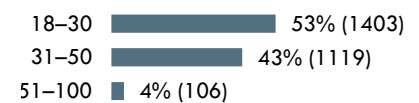
The results below are indicative rather than representative due to the nature of convenience sampling. Results should not be considered representative of the entire Africa region, nor of a ‘general’ volunteer experience.

Overview of volunteer demographics²

Gender



Age



Country

Nigeria	551	22%
Burkina Faso	328	12%
Kenya	301	11%
Cameroon	202	8%
Uganda	139	5%
Tanzania	125	5%
Rwanda	108	4%
Benin	104	4%

¹ More detailed methodology on page 10.

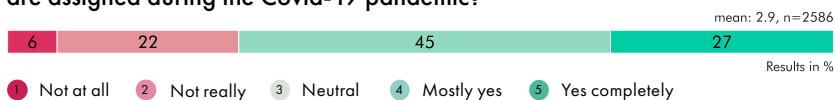
² More detailed breakdowns on page 10.

- Most respondents (78%) say their opinions have been considered in activity planning and implementation during the Covid-19 response. Volunteers who do not feel their opinions are taken into account say there is no system in place to provide input, they are not consulted for Headquarters' (HQ) planning, and that feedback given is ignored.
- Almost all volunteers (96%) surveyed say that they plan to remain a volunteer following their experience during the pandemic.

Note: in the following analysis, responses which were answered on the Likert scale as 1 or 2 (i.e., "not at all" or "not really") are treated as negative, and 4 or 5 (i.e., "yes, mostly" or "yes, completely") as positive.

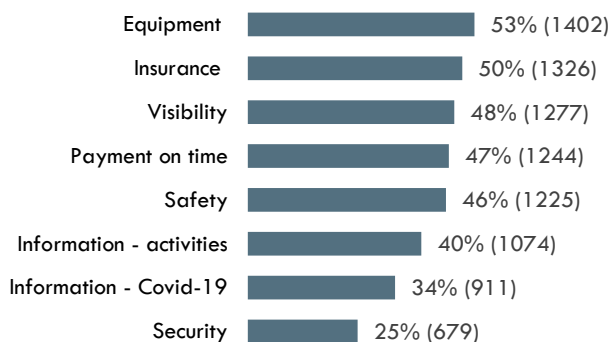
Volunteer experiences during Covid-19 pandemic are generally positive

Have you felt well equipped, informed, and trained to undertake the tasks you are assigned during the Covid-19 pandemic?



- Most volunteers (72%) feel well equipped, informed and trained to undertake their assigned tasks during the Covid-19 pandemic.

In what areas do you need more support as a volunteer with the Red Cross / Red Crescent?*



* Percentages do not total 100 because respondents could choose multiple options.

- Volunteers would feel better supported if provided with equipment such as phones, laptops, or mobile phone data, greater visibility (through t-shirts or other means of identification), and protective clothing such as jackets and boots for their activities.
- Many volunteers across a range of countries mention a lack of insurance cover, which contributes to them feeling unsafe.
- Volunteers also expressed a wish for further training for personal development. Receiving certificates from training and capacity building exercises was identified as important to show respect for volunteers and build motivation.
- Payment delays for per diem or allowances are demotivating. Some volunteers testify to delays of several months, with volunteers having to pay for their own transport to communities, as well as other expenses.
- Respondents also call for safety equipment such as personal protective equipment (PPE), information on Red Cross / Red Crescent's (RCRC) Covid-19 response, on Covid-19 more generally, and on security (citing issues such as tensions with communities not wanting to work with the RCRC). They stressed the importance of awareness-raising in communities to increase acceptance of RCRC volunteers. Some suggested advertising on TV, radio and in print.

Ivory Coast	96	4%
Burundi	84	3%
Botswana	83	3%
Togo	78	3%
Gabon	78	3%
Democratic Republic of Congo	57	2%
Cape Verde	50	2%
São Tomé and Príncipe	47	2%
Central African Republic	46	2%
Mozambique	46	2%
Guinea	38	1%
Mali	35	1%
Lesotho	32	1%



"Make boots and coats available to volunteers to protect them when it rains" – 25 year old male volunteer from Central Africa

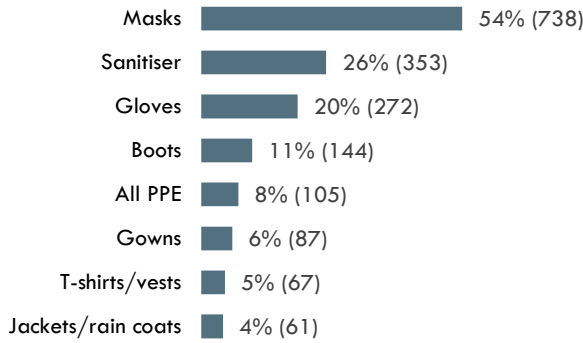


"A regular seminar and mentorship program should be organised for Red Cross Volunteers" – 31-year-old female volunteer from West Africa



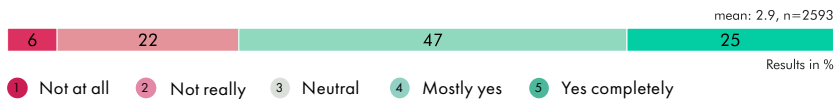
"Most of the people do not really know what the Red Cross stands for" – 26-year-old female volunteer from West Africa

What additional protective equipment do you need?*



* Percentages do not total 100 because respondents could choose multiple options.

How safe do you feel in your volunteer activities during the Covid-19 pandemic?



- Most volunteers surveyed (72%) reported feeling safe in their volunteer activities.
- However, over one-quarter of volunteers reported feeling unsafe, with 6% reporting that they did not feel safe at all during their activities.

Follow-up question to those who feel unsafe:

Why do you feel unsafe?*



* Percentages do not total 100 because respondents could choose multiple options.

- Volunteers are concerned over both the quantity and quality of facemasks provided, as well as a lack of access to handwashing facilities. Some say they experience aggression or threats from the communities they serve in, or are not properly informed about how to conduct activities in a safe way.
- Smaller numbers say that other National Society staff or volunteers do not follow preventative measures, and that they are also not enforced in the office or when conducting activities.
- Many volunteers feel that these risks are heightened by a lack of adequate insurance cover.



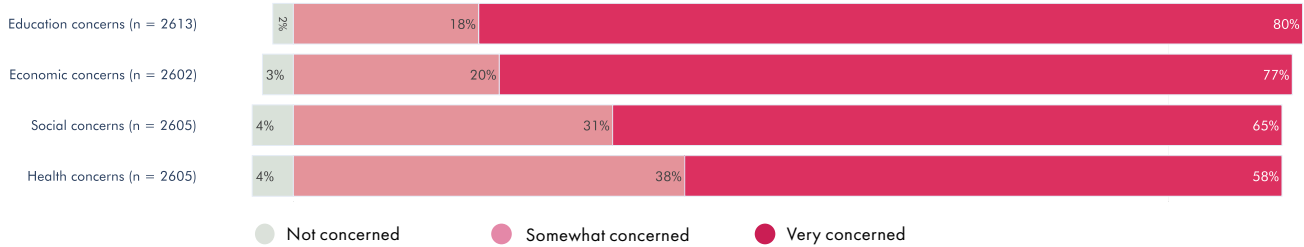
“We have not been tested since we have no test kits, thus we don’t know if we are positive or negative among ourselves” – 25-year-old male volunteer in East Africa

Educational and economic impact of Covid-19 most concerning to communities

Volunteer concerns about Covid-19



Community concerns about Covid-19 according to volunteers



- Volunteers say they are very concerned about the impact of the virus on education, the economy, health, and social relations. Relative to education and economic concerns, they seem less concerned about the impacts on health and social relationships.
- They also see the economic, social, health, and education impacts of the pandemic as a cause of concern for their communities but indicate a lower percentage of community members being “very concerned” over the health implications of the virus.

Vaccine hesitancy high in most countries

Would you get a Covid-19 vaccine if it is recommended to you?



- Over half (58%) of the volunteers indicate that they would get the Covid-19 vaccine if recommended to them, 17% say they would not and 19% say they are undecided.
- Male volunteers tend to be more willing to take the vaccine, with 61% saying they would, compared to only 51% of female volunteers. A similar difference exists between volunteers in rural (63%) and urban (53%) areas.
- Volunteers in Uganda, Guinea, and São Tomé and Príncipe are most willing to get a vaccine, with over 80% of volunteers in these countries saying they would.
- In the West Coast and East Africa, volunteers report being more open to vaccines, while less than half in Central Africa say they would be vaccinated.
- This will be explored further in the second round of surveys, where we will aim to get a better sense of volunteer knowledge of the vaccine and possible gaps in information provision.

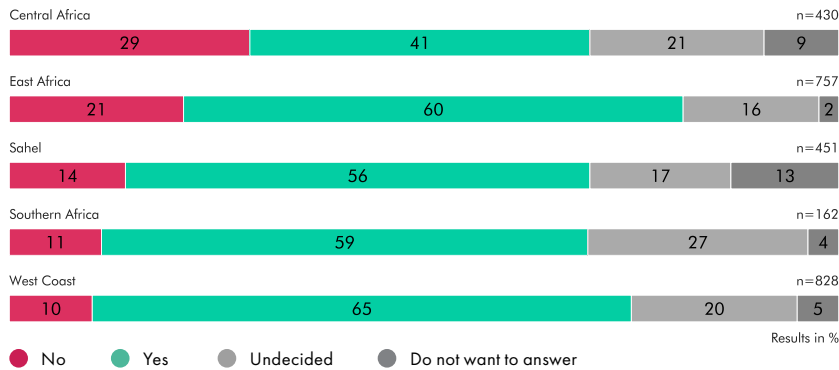


“I believe Covid-19 is a ‘plandemic,’ not a pandemic” – 30-year-old male volunteer from West Africa



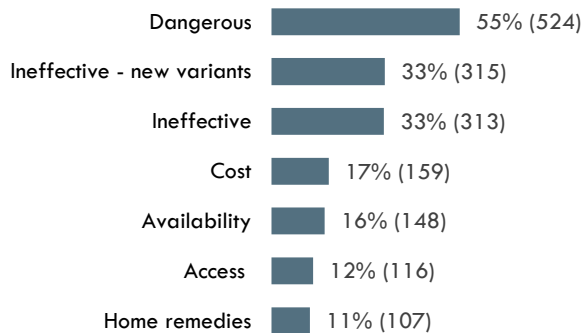
“The vaccine clinical studies were done overseas. I haven’t heard of any done to study the effect on Africans within our climate, or immune system and response, so I am not sure how the vaccine will react to us here” – 36-year-old female volunteer from Central Africa

Regional breakdown³: Would you get a Covid-19 vaccine if it is recommended to you?



Follow-up question to those who answered “no” or “undecided”:

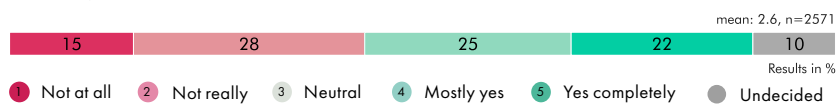
What are your main concerns surrounding a vaccine?*



* Percentages do not total 100 because respondents could choose multiple options.

- Volunteers commonly say they fear the vaccine is dangerous or ineffective (whether against new strains of the virus or just in general). Less frequently mentioned concerns include the cost, availability, and access to vaccine services.
- When asked for further details, many respondents mentioned concerns about side effects, particularly considering the quick development time in comparison to other vaccines.

In your opinion, do you think communities you work in would get a Covid-19 vaccine, if it is recommended to them?



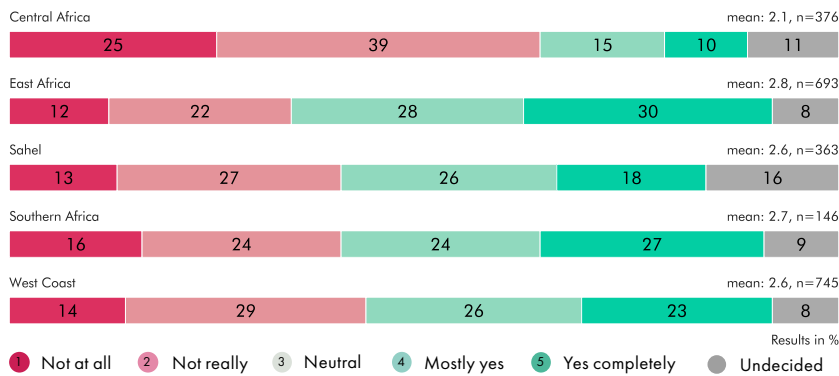
- Less than half (47%) of the volunteers surveyed believe that people in their communities would get a vaccine. Rates were lower in urban settings, where 42% of volunteers answered positively, compared to 53% in rural areas.
- Volunteers from the Central African region were least likely to accept a vaccine, and they were also least optimistic about community members willingness to be vaccinated.



“The concern about the vaccine is that it has not undergone the normal timeframe for vaccines under testing, which is 10 years. So it’s an honest concern at the possibility of a reaction” – 26-year-old female volunteer from West Africa

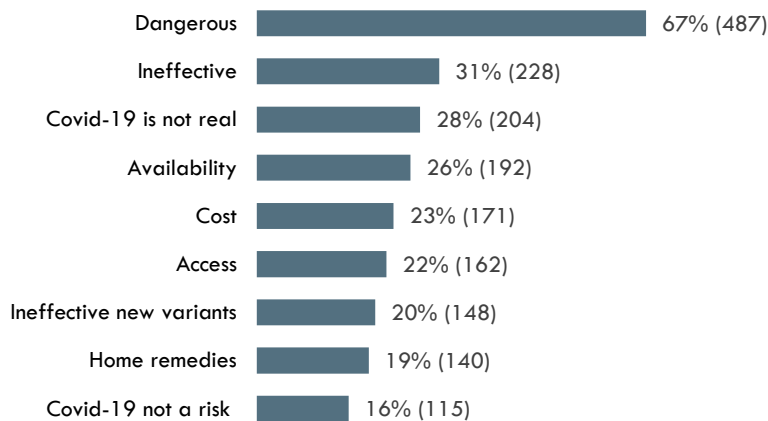
³ Countries in the Central Africa breakdown include Cameroon, The Democratic Republic of Congo, Central African Republic, Gabon, and São Tomé and Príncipe. Countries in the East Africa breakdown include Burundi, Kenya, Rwanda, Tanzania, and Uganda. Countries in the Sahel breakdown include Burkina Faso, Cape Verde, Guinea, and Mali. Countries in the Southern African include Botswana, Mozambique, and Lesotho. Countries in the West Coast include Benin, Cote d’Ivoire, Nigeria, and Togo.

Regional breakdown: In your opinion, do you think communities you work in would get a Covid-19 vaccine, if it is recommended to them?



Follow-up question to those who answered “no” or “undecided”:

What are your community’s main concerns surrounding a vaccine?*

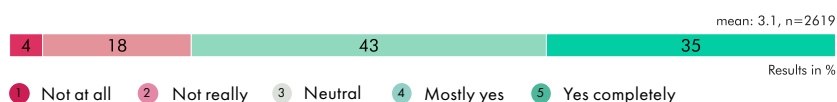


* Percentages do not total 100 because respondents could choose multiple options.

- Volunteers in Rwanda (86%), Uganda (75%), and the Central African Republic (67%) say people in their communities would likely get vaccinated.
- A fear that the vaccine could be dangerous, that it is ineffective, and that the virus is not real were the top three reasons volunteers think communities would be hesitant to get a vaccine.
- Other reasons why community members would not get vaccinated include concerns over the availability of the vaccines, the associated costs, and access issues.
- When asked for further details, some volunteers mentioned rumours about vaccines, such as that Covid-19 is a myth, that the vaccine is intended to depopulate Africa, or that the vaccine makes you infertile.

Relations between volunteers and their communities remain strong

In general, are communities willing to talk to you regarding Covid-19?



- According to most volunteers (78%), community members are still willing to talk to them about Covid-19. Almost 90% of volunteers in Cape Verde, Central African Republic, Rwanda, and Uganda answer this question positively. However, some say communities are sick of receiving information on Covid-19, that they were willing to talk to volunteers at the beginning of the pandemic but not anymore, and that they feel they are sufficiently well informed.



“The concern about the vaccine is that it has not undergone the normal timeframe for vaccines under testing, which is 10 years. So it’s an honest concern at the possibility of a reaction” – 26-year-old female volunteer from West Africa



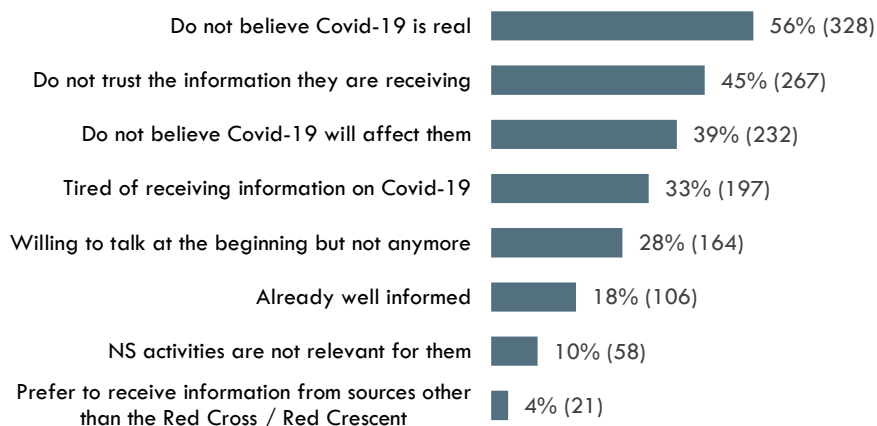
“Most people say that it makes you infertile” – 27-year-old male volunteer from Central Africa



“Others have concerns about vaccine side effects, especially about it depopulating Africa; this has been trending on social media for a while so communities have noted it seriously” – 25-year-old male volunteer from East Africa

Follow-up question to those who answered “not at all” or “not really”:

If not, why not?*



* Percentages do not total 100 because respondents could choose multiple options.

- Those who say communities are no longer willing to engage with volunteers on issues around the pandemic point to community beliefs that the virus is not real or will not affect them, or the fact that communities do not trust the information they receive.
- When asked for details, some volunteers mentioned that Covid-19 is not seen as risky in comparison to the poverty communities are currently facing. According to IFRC’s community feedback data from 40 National Societies,⁴ the most common rumours from communities about Covid-19 include the beliefs that the virus does not exist, that it is being used by individuals and institutions for profiteering, and that only certain groups are affected.

Communities have developed their own methods for dealing with Covid-19

- In response to the question “Have communities introduced solutions to prevent the spread of Covid-19 themselves?”, the majority of volunteers mentioned that communities were following standard hygiene measures, setting up hand washing stations at well-frequented locations, quarantining visitors, and isolating those who are sick. This is a good indication that messaging on how to prevent the spread of Covid-19 is reaching communities and being followed.
- Many volunteers reported the use of herbal or traditional medicines to treat or prevent Covid-19. The most frequently cited remedy was steaming the face with a mixture of ginger, lemon, and garlic. Others include:
 - Drinking hot drinks, such as ginger tea, hot water and lemon;
 - Consuming garlic, onions, ginger, and turmeric;
 - Steaming with Zumbani (a woody shrub found in Zimbabwe),⁵
 - Consuming more Vitamin-C rich foods;
 - Homemade herbal remedies;
 - Alcoholic drinks.
- Many volunteers mentioned that communities have been installing their own hand washing facilities, such as Tippy Taps.⁶
- Some volunteers mentioned that people wash their hands with ash where soap is not available, or have been making their own soap and facemasks.



“Persons with disabilities shouldn’t be left behind. I have witnessed this; all the campaigns lack a sign language interpreter and braille reading material” – 24-year-old male volunteer from East Africa



“Some who were actual victims of Covid-19 are not willing to talk about the experience due to the stigma that comes with it” – 25-year-old female volunteer from East Africa



“Dying from Covid-19 is better than dying from hunger, and staying home without food is challenging” – 27-year-old male volunteer from East Africa



“They said drinking hot water with turmeric, garlic, and ginger will go a long way to curing Covid-19” – 37-year-old female volunteer from West Africa



“Using homemade treatments and keeping sick people at home helps to avoid hospital facilities where decent follow-up of patients isn’t guaranteed” – 20-year-old female volunteer from Central Africa

⁴ IFRC. 2021. ‘Africa Region: COVID-19.’ Accessed 9 April 2021. <https://go.ifrc.org/emergencies/4583#-details>

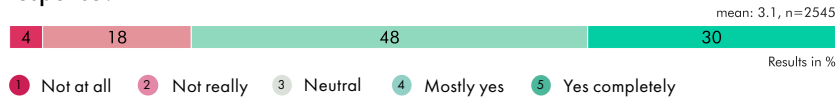
⁵ Moyo, J. 2021. “Zimbabweans pin hopes on woody shrub to beat COVID-19.” Anadolu Agency. <https://www.aa.com.tr/en/africa/zimbabweans-pin-hopes-on-woody-shrub-to-beat-covid-19/2147791>

⁶ A Tippy Tap is a hygienic device assisting hand-washing with soap and water which reduced bacteria transmission. See <https://www.tippytap.org/>

- Some reported communities establishing their own by-laws regarding distancing and quarantine, before government regulations were in place.

Volunteers feel heard by the Red Cross / Red Crescent and want to continue working for the Movement

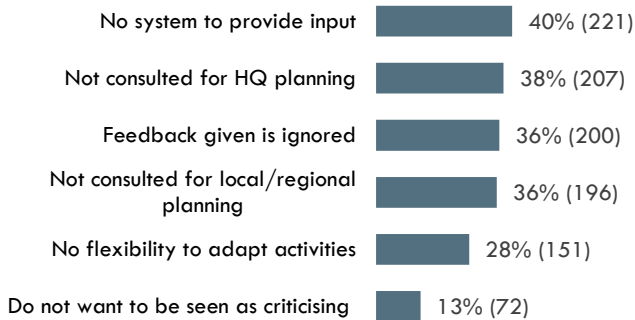
Do you feel like your opinions are taken into account in the planning and carrying out of Red Cross / Red Crescent activities during the Covid-19 response?



- The majority of volunteers (78%) are positive that their opinions during the Covid-19 response have been taken into account by the Red Cross / Red Crescent.
- Volunteers in Mozambique, Rwanda, São Tomé and Príncipe, and Cape Verde are most positive about their views being taken into account by the Red Cross / Red Crescent, with over 90% answering positively.

Follow-up question to those who answered “not at all” or “not really”:

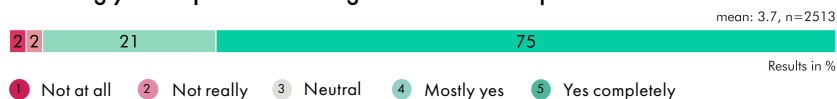
Why do you feel like your opinions are not taken into account?*



* Percentages do not total 100 because respondents could choose multiple options.

- Volunteers who do not feel their opinions are considered generally mention there is currently no system in place to provide input to their knowledge, that they are not consulted for Headquarter (HQ) planning, and that feedback given is ignored. Other reasons mentioned include the fact that volunteers are not consulted for local/regional planning, there is no flexibility in activities to adapt based on feedback, and that they do not want to be seen as being critical.

How likely are you to remain a volunteer with the Red Cross / Red Crescent following your experience during the Covid-19 response?



- Virtually all volunteers (96%) say they plan to continue volunteering with the Red Cross / Red Crescent following their experience during the Covid-19 response.
- While volunteer retention may be high, volunteers suggested the following areas for improvement:
 - Training for volunteers for their own personal development, as well as providing badges or certificates to recognise training. Suggestions included first aid training for new volunteers, and online training on how to explain Covid-19 vaccines to communities.



“I am proud of being a Red Cross volunteer here in my country and look forward to doing more volunteer engagement both within and outside my country. Keep up the good work”
– 36-year-old female volunteer from Central Africa

- Provision of transportation so that volunteers can reach very rural communities. Volunteers mentioned motor boats and bicycles as possible options.
- Provision of insurance cover for volunteers.
- Timely payment of per diem or allowances.
- In the final comments, volunteers proposed the following ideas:
 - Regional exchange visits to learn from other National Societies and share experiences, especially for younger volunteers or community members.
 - Setting up a feedback system for Red Cross / Red Crescent volunteers.



“Being a volunteer comes with a great deal of responsibilities... But it’s always a thing of great joy helping those in need” – 29-year-old male volunteer from West Africa



“I am really happy to be a Red Cross volunteer, because in my work I have got over my fear of talking to people I don’t know; heartfelt thanks” – 20-year-old female volunteer from Central Africa



“I am in need of a bicycle to help me reach community members farthest away” – 32-year-old male volunteer from East Africa

Sampling methodology

A Kobo survey link was shared with National Societies in 49 countries across the Africa region, primarily via WhatsApp and email. WhatsApp was chosen because it is the medium through which many National Societies stay in contact with volunteers. Volunteers from 21 National Societies submitted more than 30 responses, which was the threshold to be included in the aggregate analysis.

Participants

All participants were over the age of 18, almost all (95%) self-report interacting with communities regularly in their volunteering activities, and almost half (45%) say they have been volunteering with the Red Cross / Red Crescent for over five years.

Language of the interviews

Surveys were offered in Arabic, English, French, Hausa, Portuguese, and Swahili.

Weighting

In order to be included in the aggregate analysis, a cut-off of 30 responses per country was decided in advance.

Due to the nature of the sample (convenience sample), the sample achieved should not be considered representative of the entire Africa region. Indeed, considering such different political, cultural, and social contexts, a 'general' volunteer experience does not exist and this report does not attempt to generalise in this way.

For this reason, data in this report was not weighted, neither by population size, nor by the total number of RCRC volunteers in each country. It is worth noting that the total number of RCRC volunteers in each country does not always relate to the country's population size – many smaller countries have very large National Societies. Comparing both of these weighting methods to the unweighted data, the results differed by a maximum of six percentage points. Since neither option of weighting provided a convincing theoretical basis over the unweighted data, the decision was made to analyse the unweighted data. This method has the benefit of including all countries that achieved more than 30 responses; the other two weighting methods involved the loss of a handful of countries with either small populations or small numbers of volunteers.

Where generalisations across countries are made in this report, we refer to the percentage of survey respondents expressing a certain opinion. This should be treated as indicative of general sentiment only, and as a potential signpost to further exploration.

Dates of data collection

The survey was open between 24 February–12 March 2021.

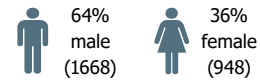
Challenges and limitations

- **Gender balance:** despite estimates indicating that around 55% of RCRC volunteers are female, only 36% of survey respondents were female. Although results do not indicate vastly different responses between male and female volunteers, efforts should be made in future to capture the specific experiences of women and encourage more female volunteers to voice their opinions.
- **Selection bias:** due to the nature of a convenience sample, the views of only those volunteers who actively decide to participate are captured. This may lead to the under- or over-representation of certain groups or views. For example, those with strong ties to their National Societies, or those with particular grievances to voice, may have been more motivated to respond.
- **Smart phone access:** the survey was distributed over WhatsApp and by email to volunteers, meaning those without internet access or a smart phone were likely unable to complete the survey. Some National Societies offered volunteers a central location with internet access to complete the survey, and others offered printed versions which were then uploaded, as alternatives to mitigate these issues.
- **Regional aggregation:** in presenting a broad indication of volunteer preferences across the Africa region, volunteers from larger countries dominate the sample. For this reason, countries with over 100 responses were offered tailored support to analyse their data specifically, and as such gain more actionable and relevant findings for their country and context.

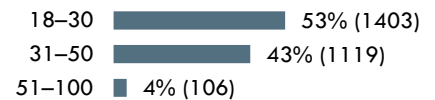
Volunteer demographics

The graphs below show breakdown demographic information of the 2,628 Red Cross / Red Crescent (RCRC) volunteers who took part in the survey.

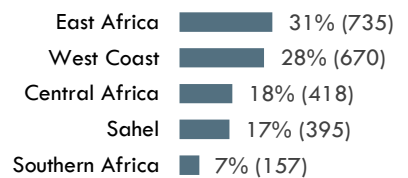
Gender



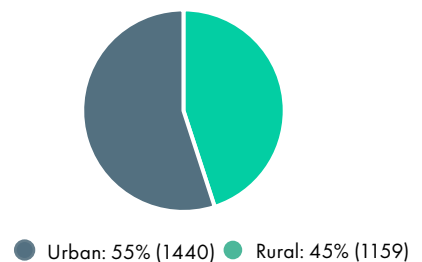
Age



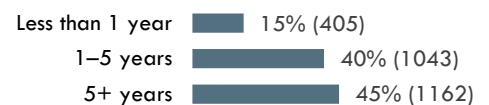
Region



Rural/urban



Length of time volunteering



⁷ IFRC. "Federation-Wide Databank and Reporting System." <https://data.ifrc.org/fdrs/societies>