

COVID-19

Perception Study

 IFRC

 GUYANA RED CROSS
SOCIETY

Summary of the analysis of findings

23/July/2022



09/September/2022



This social science applied research based on *quantitative and qualitative methods*, aimed at determining community perceptions on COVID-19 and its vaccination process. Its outputs include evidence-based CEA recommendations and strengthen:

- Risk Communication and Community Engagement's evidence-based decision making;
- National Society capacities to apply social science methods in future emergency response or rapid deployment scenarios.



The results of this survey have not only been analyzed but have also been schematized in a digital dashboard. [Click here to access to the dashboard.](#)

Focal Groups highlights (Qualitative data)



Between 27 and 31 July 2022, Guyana Red Cross Society, with IFRC support, run **six focus groups** in the regions 1 - Barima-Waini and 7 - Cuyuni-Mazaruni, composed of:

- migrant population;
- members of indigenous peoples on migration; and
- members of local indigenous peoples.

Perceptions on COVID-19 and vaccination

High level of trust in COVID-19 vaccine. As a result of:
i) Effective Comms Campaigns + ii) Communities detected an absence of side effects after vaccination - Learning based on observation

Receiving one dose of a vaccine that requires several doses brings a false sense of confidence that:

- Prevents people from completing the vaccination schedule.
- Affects the sense of protection on communities.



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Access to, and relevance of, COVID-19 information

- High level of trust on COVID-19 info received from health personnel.
- Main health risks (indigenous migrant women): Fevers - rashes. **Communication barriers.**
- Temporary: **Low supply of culturally sensitive COVID-19 content in indigenous dialects or other languages.**



Well-being and mental health during the pandemic



- Mental health concept was *diverse* across the focus groups.
 - Migrant population: Connected it with stress derived from life responsibilities.
 - Local indigenous communities: Appropriateness of one's own actions with respect to the social context.
 - Migrant indigenous communities: Did not provide answers.



- (In this scenario) **Western concept** of mental health did not have a **cultural or cosmological equivalent element** that would allow for this type of dialogue.



- Reduced mobility of indigenous peoples reduced access to:
 - Food products on which they have traditionally based their diet (river fish, eddo or malanga, taro or pituca, and yucca or manioc)
 - Traditional artefacts used during the preparation of their food



- Essential elements to their sense of well-being (Cultural survival).
- Also humanitarian impact derived from their migratory scenario.

Pandemic-related Socio-economic impact

- **Local economic complexity** precedes pandemic.
- Contractionary economic behaviour – *Challenge for Climate smart livelihoods programs.*
- Socioeconomic effects impacted **particularly vulnerable populations, such as the indigenous communities that have migrated.**



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COVID-19 Perceptions Survey highlights (Quantitative data)

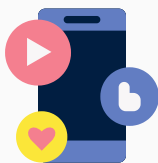


An **Online Survey** was applied between August 26 and September 9. Its format poses methodological restrictions such as:

- i) lack of statistical representativeness;
- ii) responses are limited to people with a degree of connectivity and digital knowledge, and
- iii) participants could have an interest in the topic analyzed.

Therefore, quantitative data cannot be extrapolated or generalized, and **only constitute a valuable indicative input.**

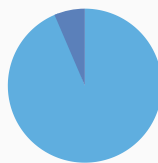
Demographics



31
responses
collected

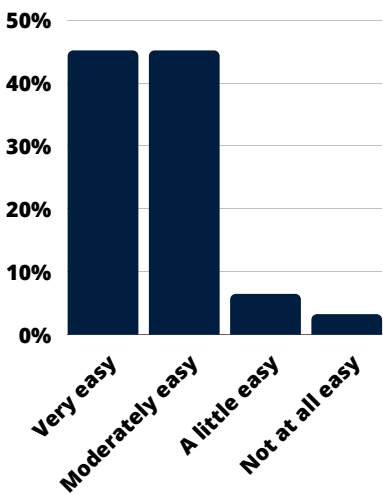


Higher participation of women (**77.42%**) and no non-binary (although the option was available)



93.55%
Guyanese nationals
6.45%
Venezuelan nationals

Community knowledge and perception of the COVID-19 vaccine



How easy is to get the vaccine?

However, triangulating this finding against the PAHO COVID-19 dashboard showed that while **more than 58%** of the Guyanese population had received **at least one dose** of COVID-19 vaccine, **only 48 out of every 100 persons were fully vaccinated.**

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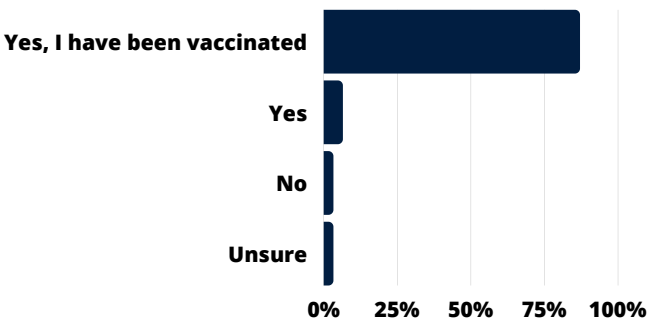
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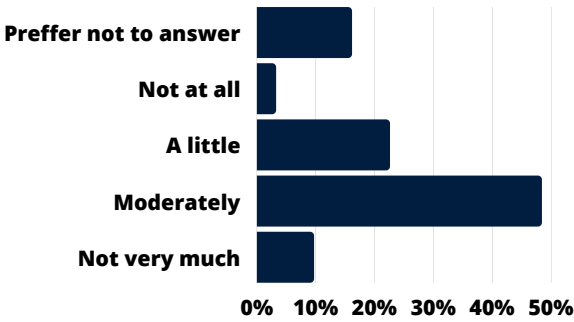
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Community knowledge and perception of the COVID-19 vaccine



Would you get the COVID-19 vaccine?

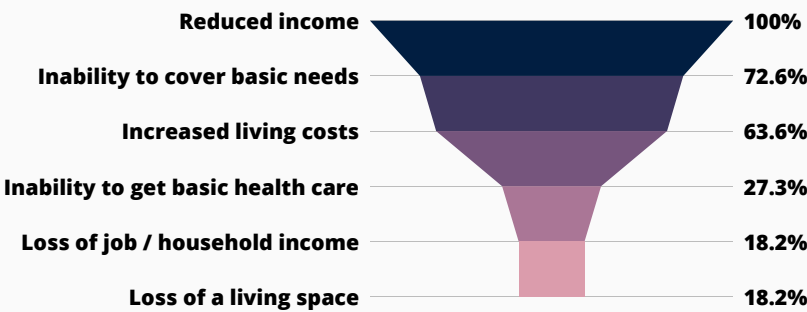
- Both campaigns to complete vaccination schedules and the promotion of vaccination **are still important** in the pandemic response.



How much do you trust the COVID-19 vaccine?

- **More than 58%** of respondents reported a level of trust in the COVID-19 vaccine.
- **More than 92%** stated that obtaining the COVID-19 vaccine is not difficult.

Economic impact of COVID-19



- 83.87% stated their economic situation as result of the pandemic.
- Increase of unemployment (6.45% before the pandemic to 20% during the pandemic)
- Income reduction and the inability to meet basic needs.

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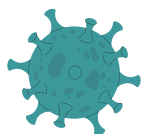
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Mental health and well-being during the pandemic



What does you worry the most?

- **Economic Concerns** (Job losses, business closures or inability to afford basic needs)
- **Emotional Concerns** (losing a loved one, not being able to visit them)
- Concerns regarding **access to health**.



What do you feel are the most major risks that have most impact on the health of your family?

- **COVID-19 and Monkeypox** are the greatest health risk to households.
- Concerns about **malaria persist**.
- WASH-related concerns such as **contaminated water, diarrhoea, fever and lack of access to water and drought** are perceived.



Accessibility and relevance of health information received



- 96.7% indicated the information received was applicable, realistic, and relevant to the local context. (Comms strategy)
- **All respondents found the information useful** to some degree (67.74% Very useful and 32.26% Somewhat useful).
- **Social Networks** such as Facebook, Instagram or Twitter were selected as the favorite source of COVID-19 information.
- People said they want to receive information (apart from COVID-19 and Monkeypox) about **malaria and immunization**.
- Opportunity to **promote vaccination against COVID-19** and other active diseases in Guyana.
- It is important to carry out studies regarding **vaccination schemes in adults and children**

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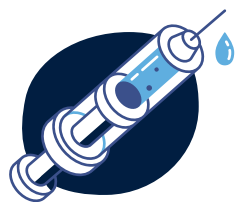
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Community Engagement and Accountability (CEA) recommendations



We suggest to the National Society to implement:

- **Regular surveys** with key informants in some targeted communities; and
- **Streamline feedback channels** to detect early on high-incidence rumours affecting COVID-19 vaccination efforts.
- Collect quantitative data to determine the concentration of people who have a **complete or incomplete vaccination schedule**.
- **Coordination with national and local authorities**, as well as with other humanitarian actors, to access to reliable data.
- Identify the local demand for information content **written in different languages or dialects**, to provide an offer aligned to the needs of the communities.
- Develop studies with a **high ethnic sensitivity** and respectful of the beliefs, uses, and traditions of Indigenous peoples.
- **Involve ancestral authorities** of these Indigenous peoples in the design of data collection instruments.

If you need support, please contact:

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