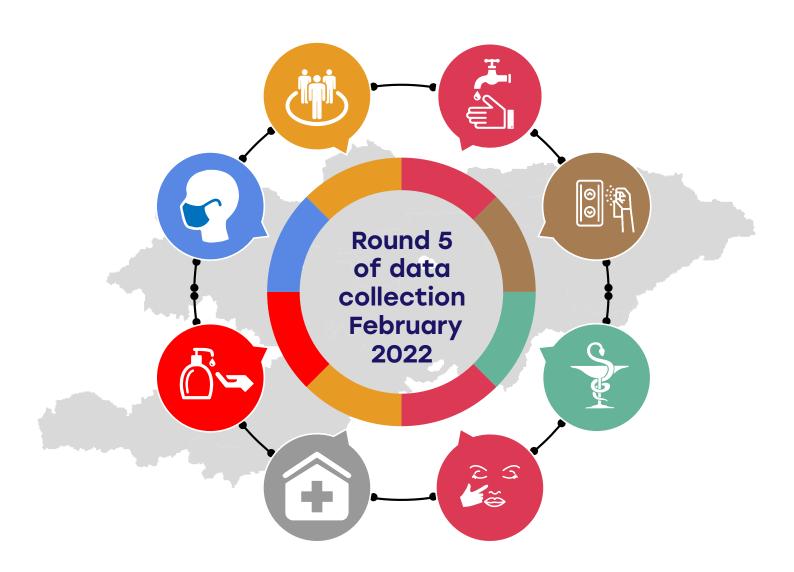






## Behavioural insights on COVID-19 in the Kyrgyz Republic

Monitoring knowledge, risk perceptions, preventive behaviours and trust to inform pandemic outbreak response



## Background and methodology

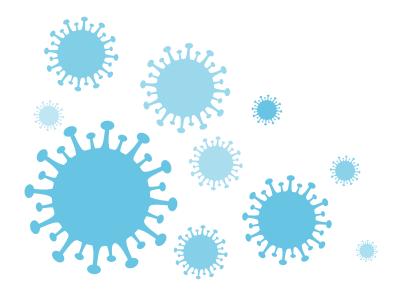


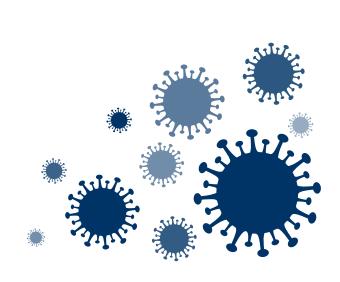
WHO Regional Office for Europe advises that comprehensive pandemic responses be informed by multiple sources of data, including behavioural insights (BI). To provide a tool for this, the Regional Office, supported by the University of Erfurt, Germany, launched a protocol and questionnaire for BI data collection in April 2020. As the COVID19 pandemic evolves, it is essential to continue monitoring public perceptions of risk, protective behaviors, trust, health literacy and vaccination intentions to enable health authorities and other stakeholders to implement appropriate responses.

This is a serial, cross-sectional study\*. Using a questionnaire adapted from the Regional Office, data are collected by computer assisted telephone interviews (CATI), computer assisted web interviews (CAWI) or a combination of both from a representative sample of 1000 adults over 18 years of age. Data are analysed using the R Framework.

The purpose of this study is to conduct rapid and adaptive monitoring of these factors over time and to assess the relations between them. Results contribute directly to the COVID-19 response in the areas of communications and messaging, interventions, programmes and policy – alongside epidemiological and vaccination uptake data and economic, cultural, ethical, structural, political and other considerations.

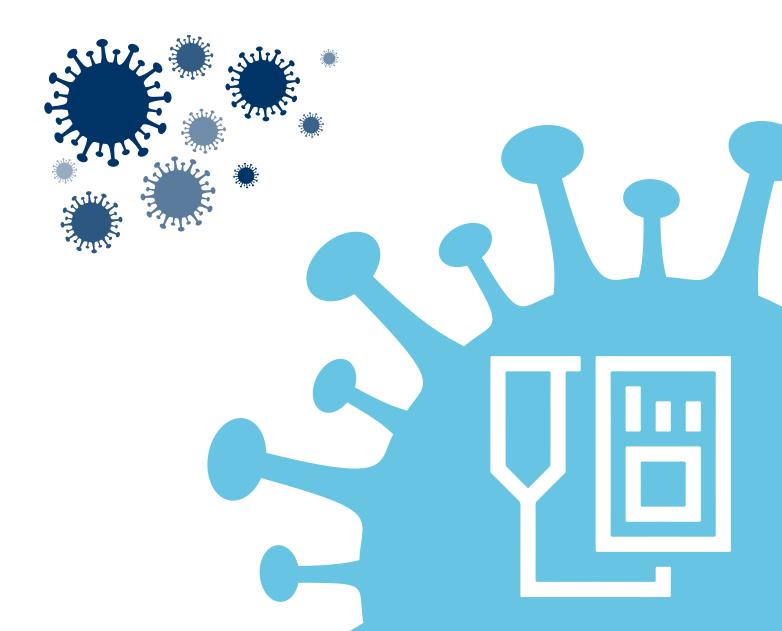
\* Note that the cross-sectional design will not allow the assessment of actual causal relations and will only be snapshots of a current state of the public perceptions and psychological crisis response.



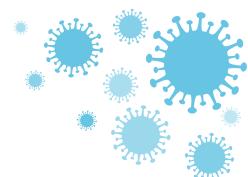


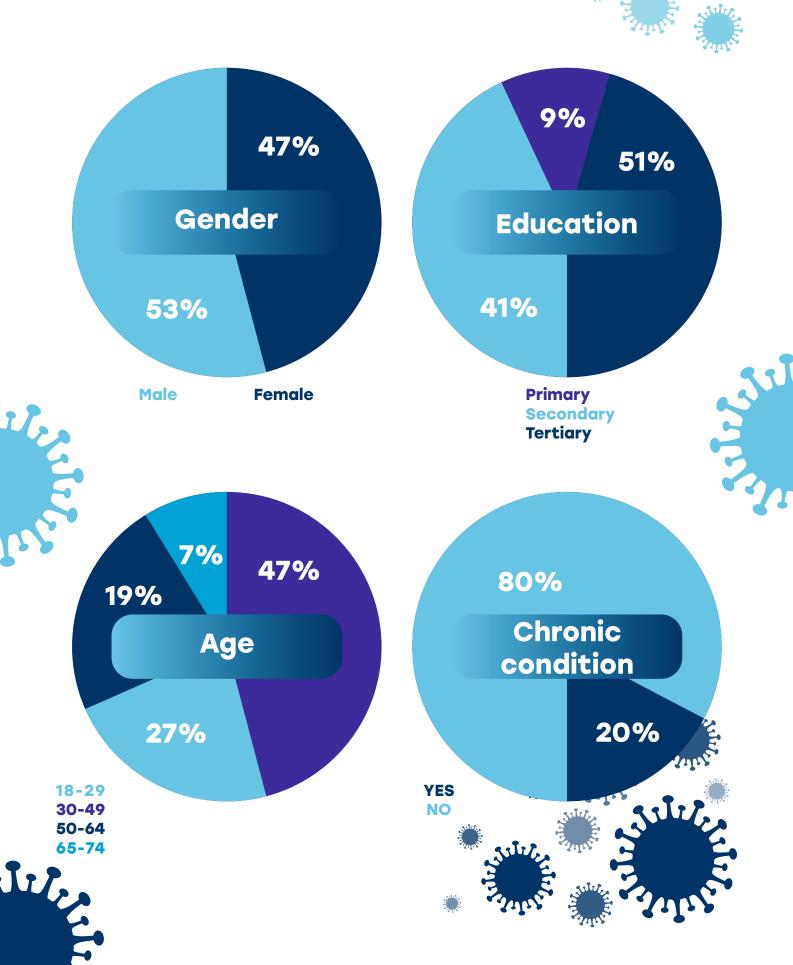
## **Data Collection**

Research Methodology	Quantitative: Telephone (CATI) interviewing (Computer Assisted Telephone Interview)
Time frame	February 11 to February 21, 2022
Population	Citizens of the Kyrgyz Republic, aged 18-74 years
Sample design	Nationally representative, multistage stratified sample of 1,009 respondents aged 18+. Households are distributed proportionally In urban and rural areas and by ethnicity.
Sample Size	1,020 respondents
Research Team	Online survey
Survey administered in	Kyrgyz and Russian

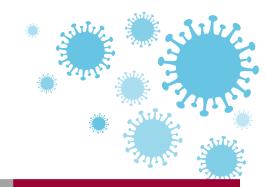


## Demographic structure of the respondents





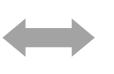
## **Summary statistics**















Find it EASY to understand recommendations about COVID-19 vaccination Worry very much about future financial consequences

Think decisions taken are fair

\*19 percentage point increase since March 2021

\* No change

\*11 percentage point increase since March 2021









Agree with mandatory masks in closed public spaces

Agree with COVID passports for visiting public places

\*20 percentage point decrease since March

\*not asked previously

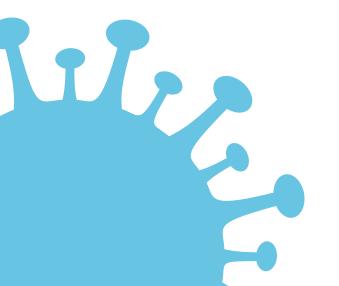


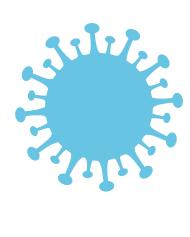




### **Key findings**

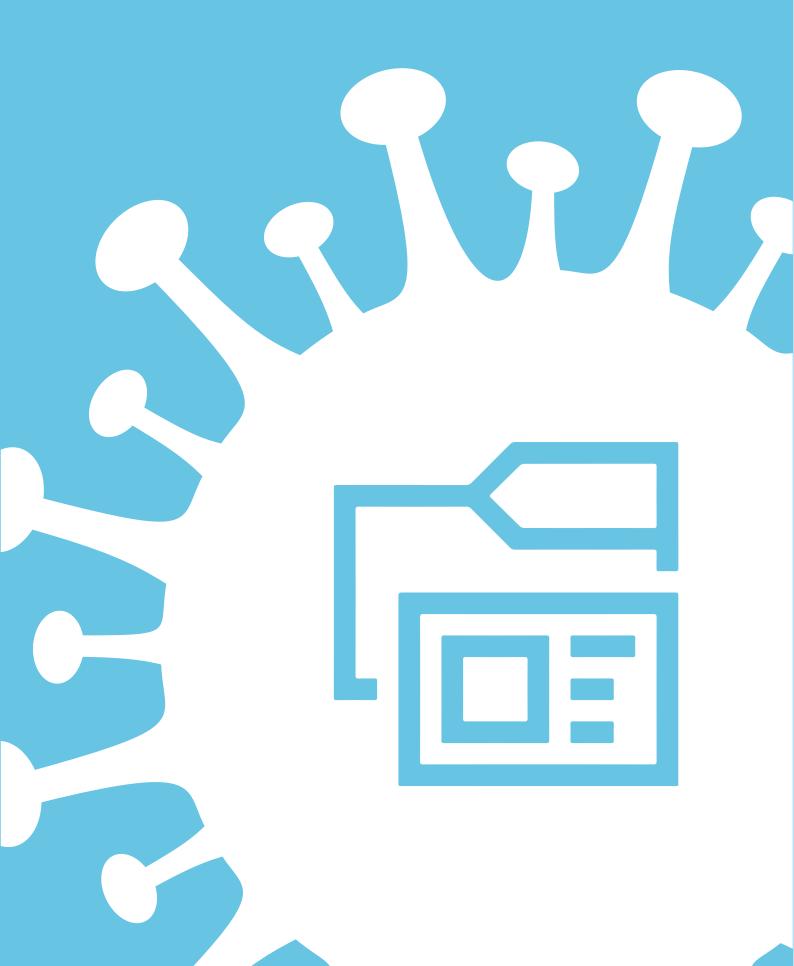
- Overall health literacy is greatly improved on all measures since March 2021.
- Information use has stayed very steady throughout the pandemic.
- Risk perception has remained steady as well, despite changes in epidemiology.
- Levels of **general wellbeing** remain fairly consistent, but a majority are very worried about the future economic impact of COVID-19.
- Nearly half of respondents feel the current regulations are exaggerated.
- **Health care workers** remain the most trusted source of information, with trust in most sources increasing slightly since 2021.
- Confidence in hospitals and the Ministry of Health have increased since 2021, with much of trust correlated to whether a respondent has a peer that has been infected.
- Among the unvaccinated, those with higher vaccination intention are more concerned over most matters risk and effectiveness than those with lower intentions.







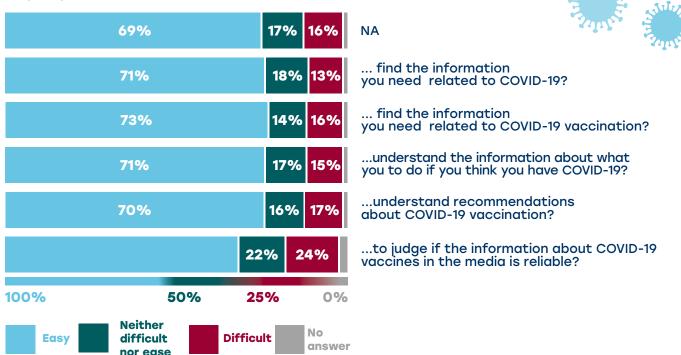
## Section 1: Health literacy and information use



#### **Health Literacy**

COVID19 healthy literacy: How easy or difficult would you say is it to...

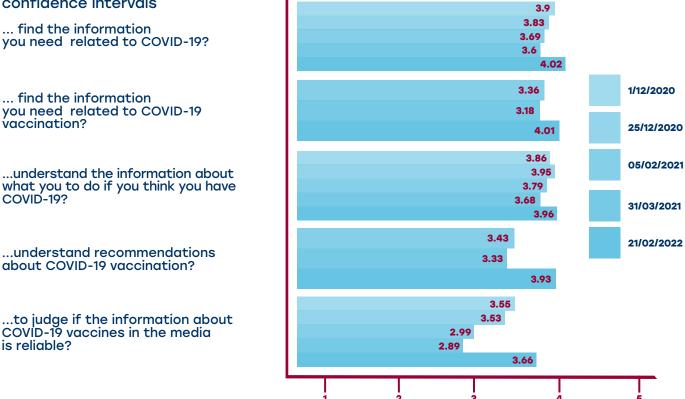
21/02/2022



COVID-19 health literacy: How easy or difficult would you say is it to ...

Rated on scales ranging from 1 (very difficult) to 5 (very easy). Mean values and 95%

confidence intervals

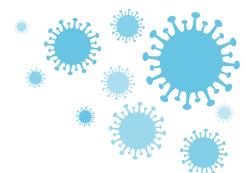


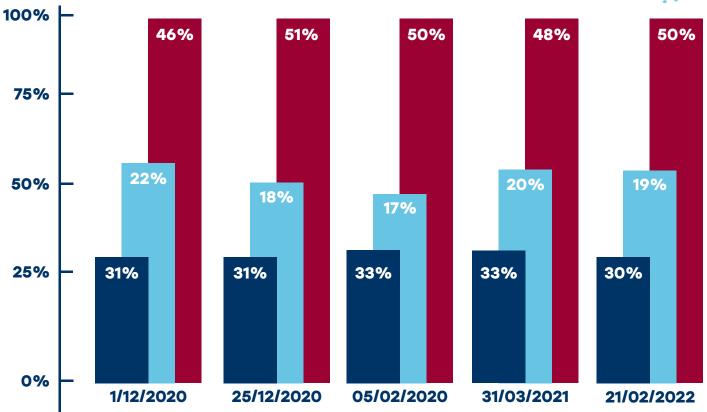
COVID-19 Health literacy is higher than in 2021; with an increase in the reported ease of understanding recommendations and finding information about vaccinations; judging the reliability of information in the media continues to be a challenge

Similar to predictors in 2021, health literacy correlates with trust in the national health **system**, as well lower perceptions of infection severity

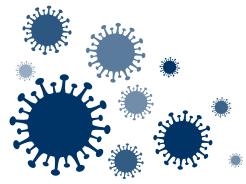
#### **Information Use**

How often do you seek information about COVID-19? Originally rated on scales ranging from 1 (never) to 5 (several times a day). Mean values and 95% CI

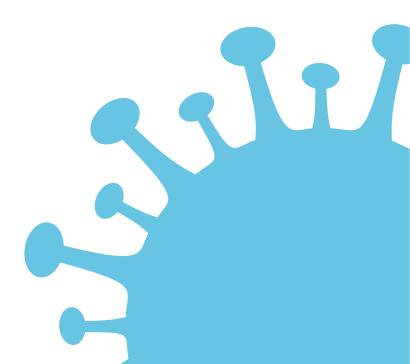








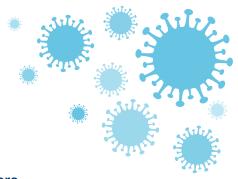
Frequency of searching for COVID-19related information has remained consistent since 2021: 30% seeking information frequently.

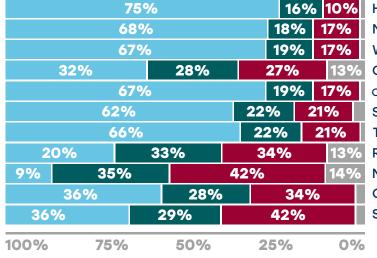


#### **Trust in Information**

#### How much do you trust information about COVID-19 from the following information sources?

Rated on scales ranging from 1 (very little trust) to 5 (very much trust ). Mean values and 95% CI.





**Healthcare workers** Ministry of Health **WHO** 

**COVID-19 Hotlines** 

Official reports of the Republican headquarters on coronavirus Sanitary and Epidemiological Station

TV Radio

**Newspapers** 

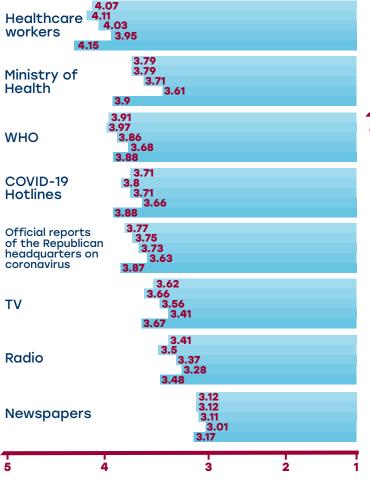
Celebrities and Social media influencers

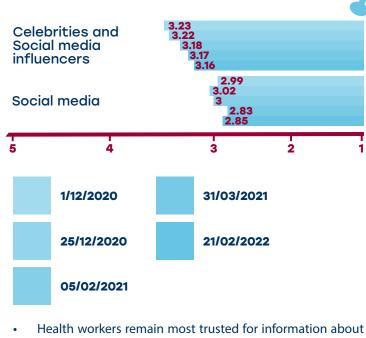
Social media

**Very much** Some Very little No trust trust trust answer

#### How much do you trust information about COVID-19 from the following sources

Rated on scales ranging from 1 (very little trust) to 5 (very much trust). Mean values and 95% CI.



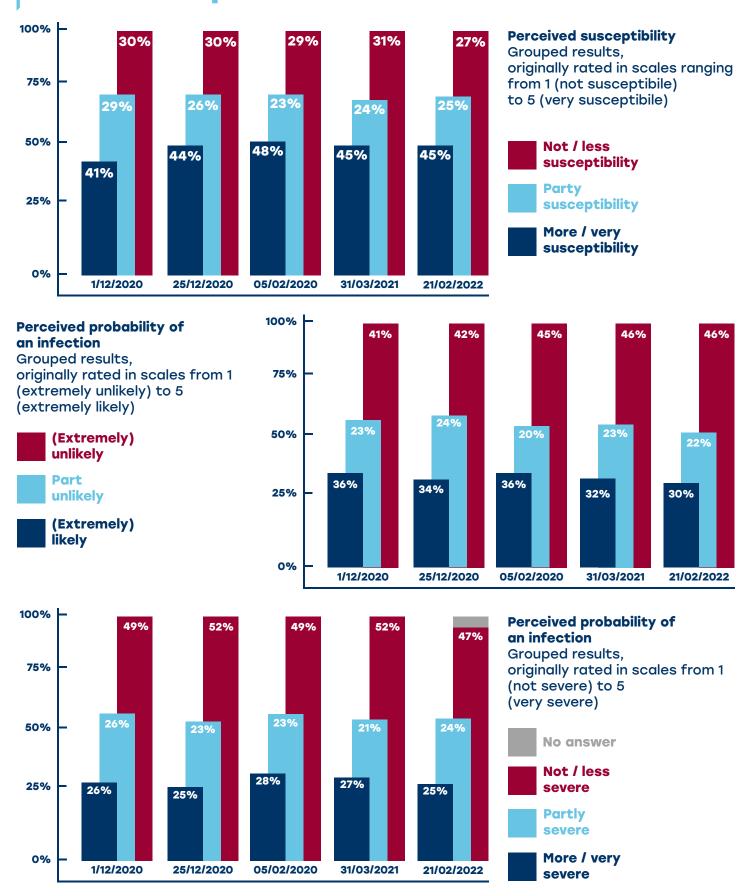


- COVID-19
- Trust in the health sector as an information source has generally increased since 2021, with a increase in levels of trust in healthcare workers, the Ministry of Health, reports from government offices, and COVID hotlines.

## Section 2: Risk perception, emotional affect and wellbeing

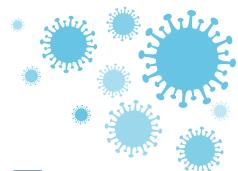


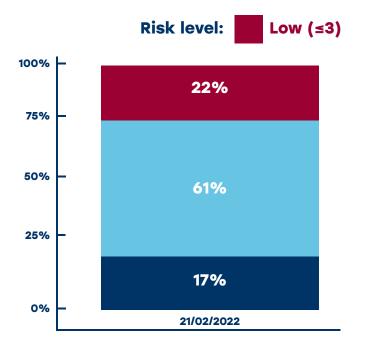
### **Risk Perception**

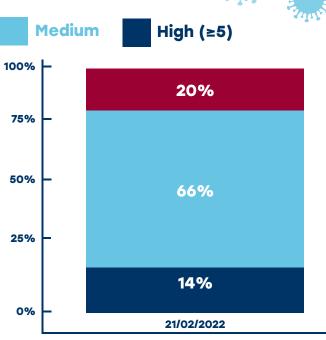


- Risk perceptions have remained fairly stable since 2021
- Women tend to have a higher overall risk perception than men
- Overall Risk perceptions are positively correlated with those who search for information more frequently
- Risk group members perceive higher potential severity of an infection
- People with lower education levels often have higher perceptions of susceptibility.

### Risk Perception based on vaccination status







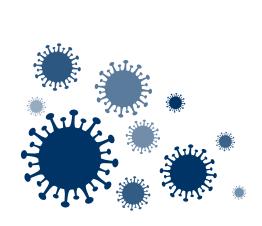
## Perceived risk of an infection : Unvaccinated

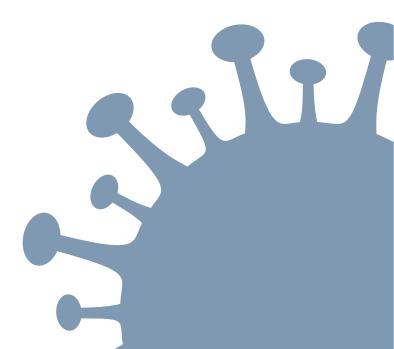
Mean score including susceptibility, probability perceptions, each originally rated on scales ra (high)

### Perceived risk of an infection : Unvaccinated

Mean score including susceptibility, probability perceptions, each originally rated on scales ra (high)

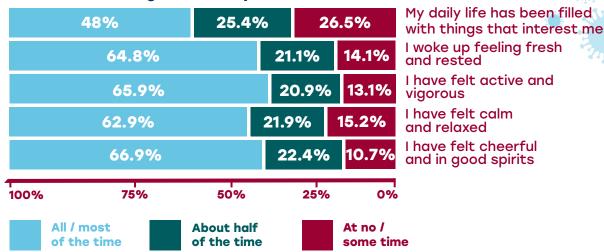
• **Risk perceptions** remain consistent regardless of vaccination status, with roughly two thirds of the unvaccinated population holding a medium risk perception.





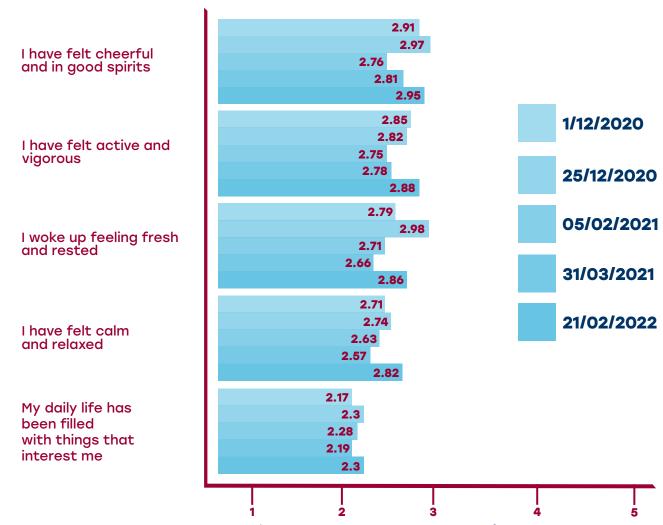
### Wellbeing

#### General wellbeing: Over the past 2 weeks ...



#### General wellbeing: Over the past 2 weeks ...

Rated on scales ranging from 1 (not at all) to 6 (all the time). Mean values and 95% confidence intervals.

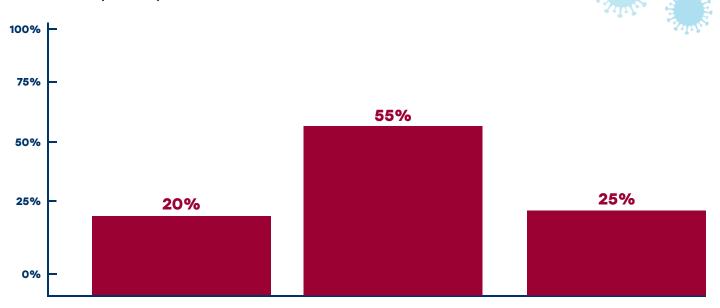


- Reported levels of general wellbeing have seen a modest uptick from 2021, but not always at levels that are statistically significant
- Wellbeing correlates positively with health literacy
- Wellbeing correlates negatively with being in a risk group
- Females and those in urban areas are tend to have lower general wellbeing than their counterparts

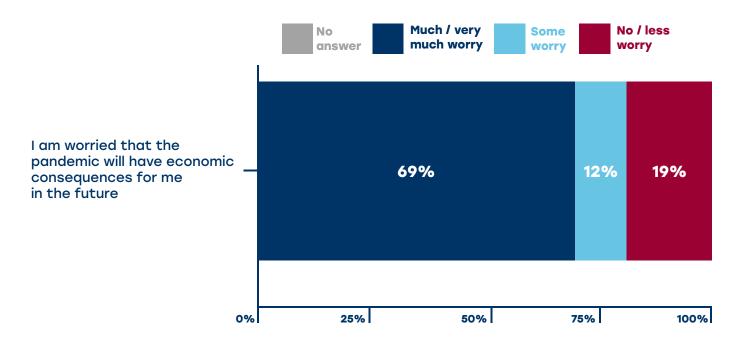
### **Financial Worry**

## Development of private financial situation over the past three months

Share of participants, 21/02/2022

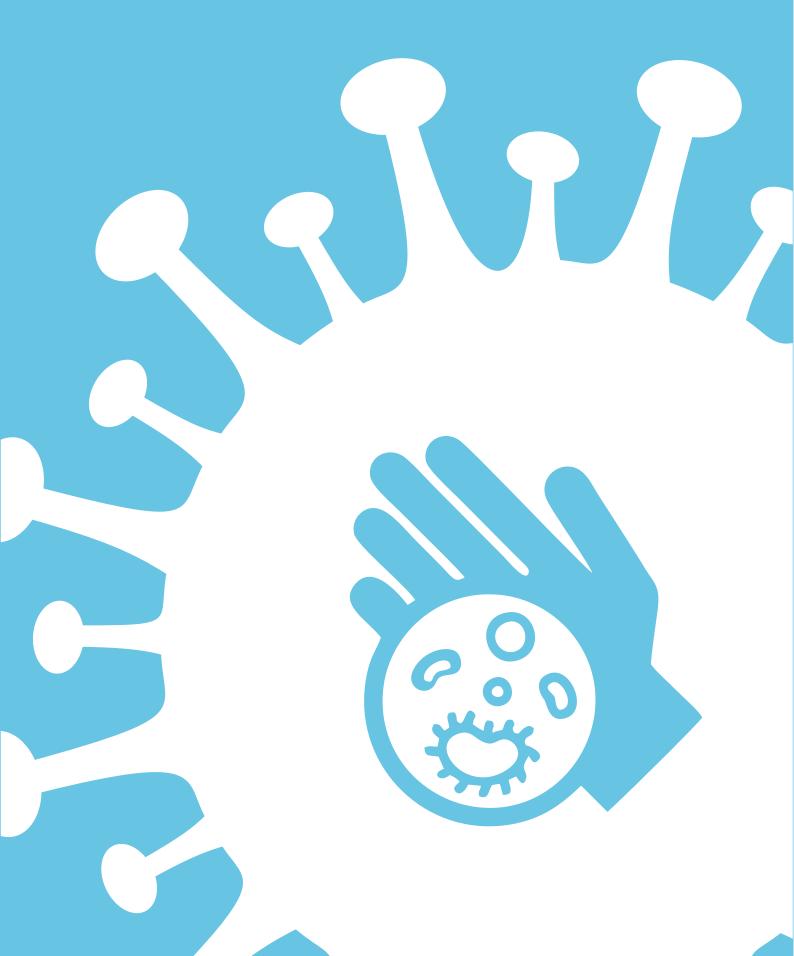


### **Worries about economic consequences** 21.02.2022



- In the past 3 months, the private financial situation has worsened for 25% or respondents (down from levels in 2021 where 35% experienced a worsening financial situation)
- Worries about the future economic consequences continue to be very common among respondents, with 69% who are very worried

Section 3:
Public health
and social measures



#### **Protective behaviors**

#### Uptake of protective measures

During the last 7 days, which of the following measures have you taken to prevent infe



I often washed my hands with soap and water for 20 seconds

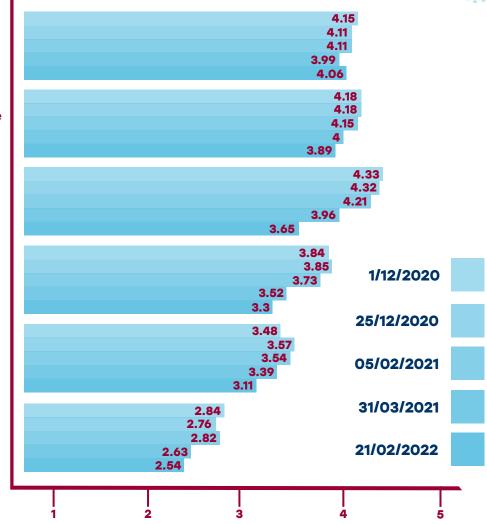
Used hand sanitizers in case of absence soap and water

Wore a mask in public places

Kept a distance in public places

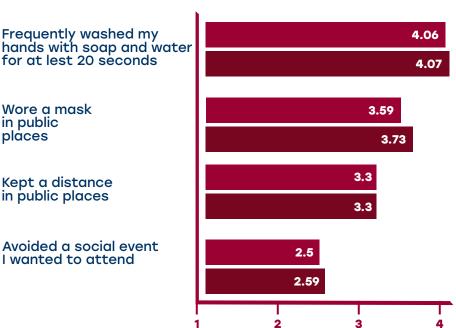
Treated surfaces

Avoided visiting social events that I wanted to attend



#### **Uptake of protective measures**

Rated on scales ranging from 1 (very difficult) up to 5 (very easy). Mean values and 95% CI. Data collection: 13.12.2021



**Not vaccinated** 

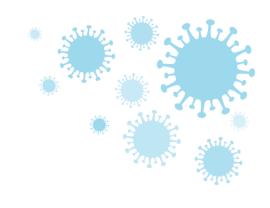
**Vaccinated** 

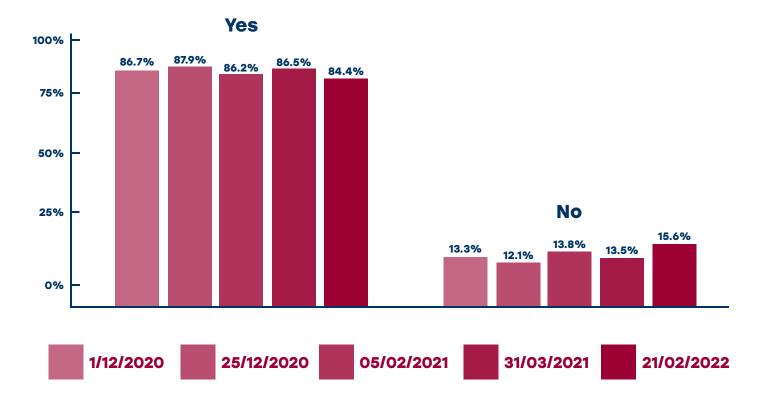
- Handwashing is the most frequently practiced protective behaviour
- There is no significant difference in uptake of protective measures between vaccinated and unvaccinated respondents
- Uptake of **protective** behaviours is higher among females
- Correlates **positively** with trust in the medical sector and having peers who were infected

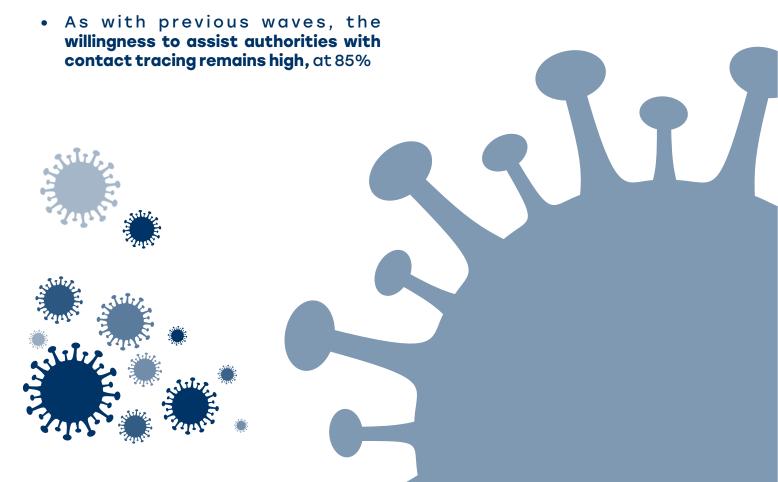
## **Contact Tracing**

Tracking: If you test positive for COVID-19 and are you asked to share with health authorities the names of people you have been in contact with - will you share all names?

Share of participants







#### **Policies**

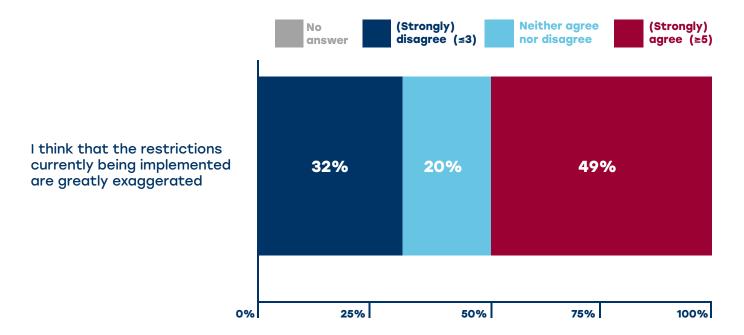
#### **Acceptance of measures**

Rated on scales ranging from 1 (strongly disagree) to 5 (strongly agree)

1/12/2020 25/12/2020 21/02/2022

I think that the restrictions currently being implemented are greatly exaggerated

#### Acceptance of measures 21.02.2022



The share of respondents that think **current restrictions are greatly exaggerated** has decreased slightly since 2020. Nonetheless, nearly half (49%) still strongly feel that restrictions are greatly exaggerated



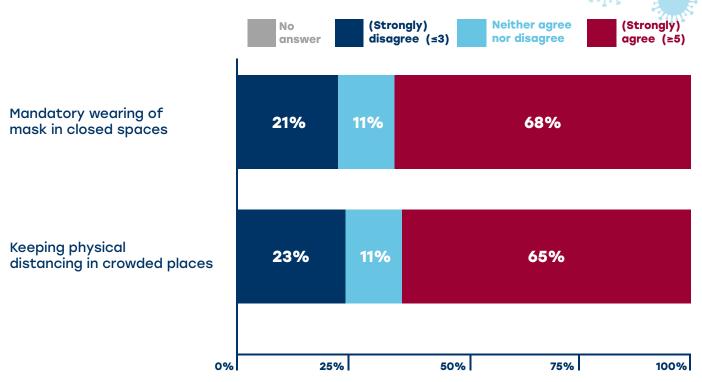






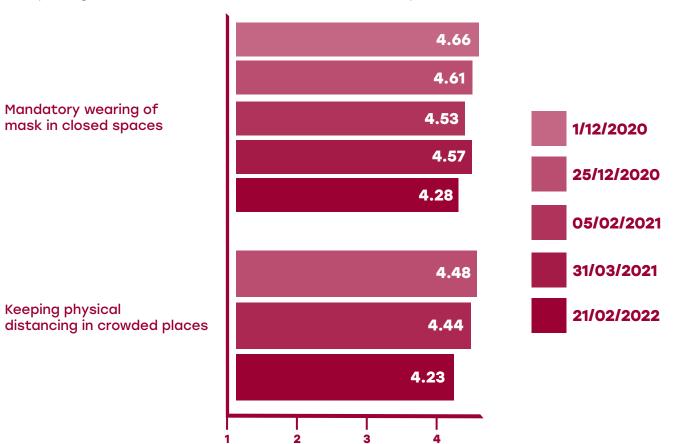
# Agreement With Specific Decisions Taken

#### Agreement with decisions taken



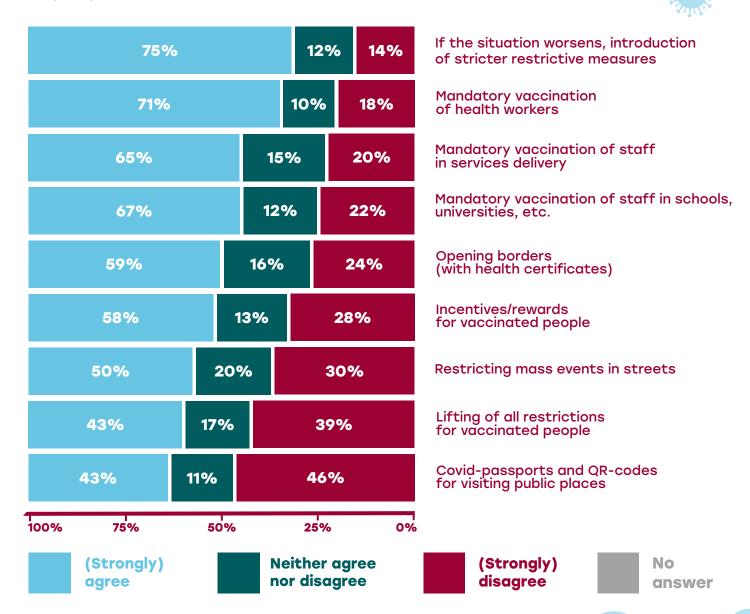
#### Agreement with decisions taken

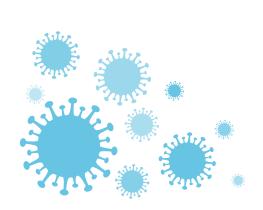
Rated on scales ranging from 1 (no support at all) to 5 (strong SL Mean values and 95% confidence intervals).

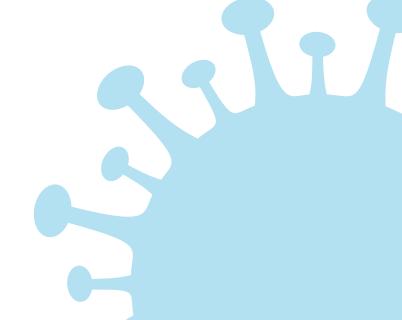


## **Agreement With Future Decisions**

### **Agreement with future decisions** 21/02/2022

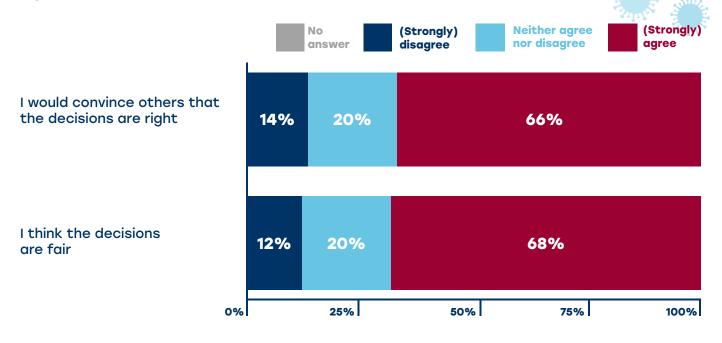


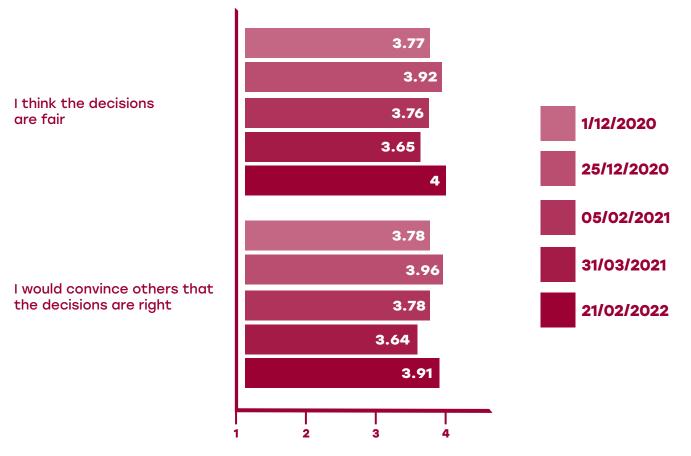




#### **Fairness**

#### Agreement with the decisions taken





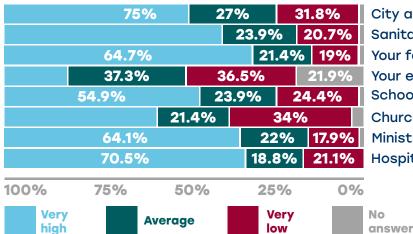
- Perceived fairness for COVID-19-related decisions has increased from 2021
- Fairness perceptions correlate **positively** with perceived susceptibility, trust in the medical sector, health literacy, and the frequency of searching for information
- Living in an urban area correlates with lower fairness views

### **Trust in institutions**

How much confidence do you have that the following can handle the COVID-19 challenge well?

Rated on scales ranging from 1 (very low confidence) to 5 (very high confidence).

Mean values and 95% confidence intervals.

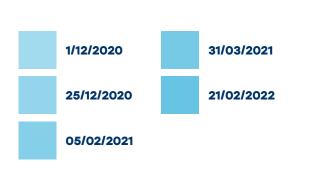




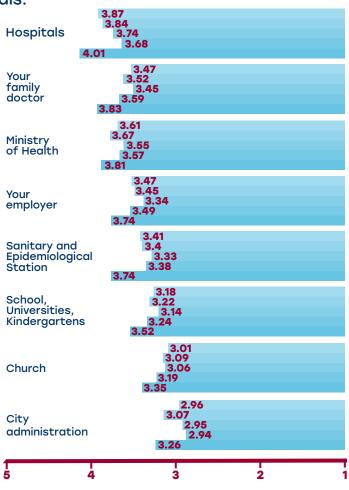


Rated on scales ranging from 1 (very low confidence) to 5 (very high confidence).

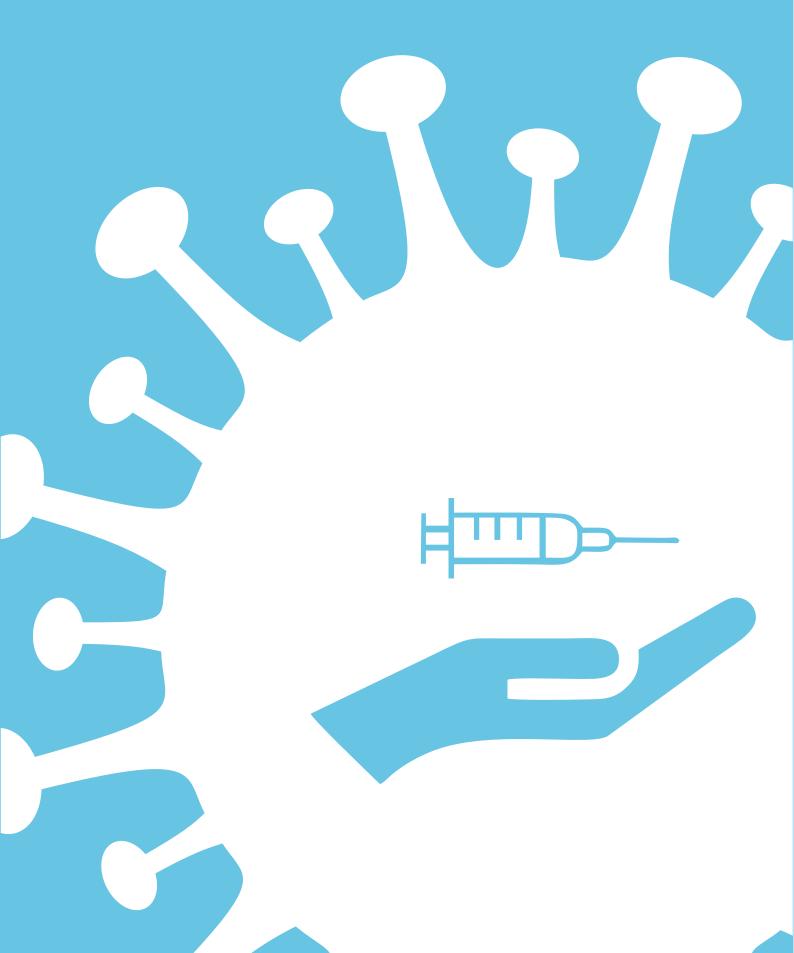
Mean values and 95% confidence intervals.



- Respondents are most confident in hospitals, a level which has increased from 2021
- Confidence in the Ministry of Health and the Sanitary and Epidemiological Station have also increased slightly
- Those who live in urban areas have lower confidence; female respondents tend to have higher confidence
- Having peers that have been infected correlate positively with confidence in family doctors, hospitals, and MoH

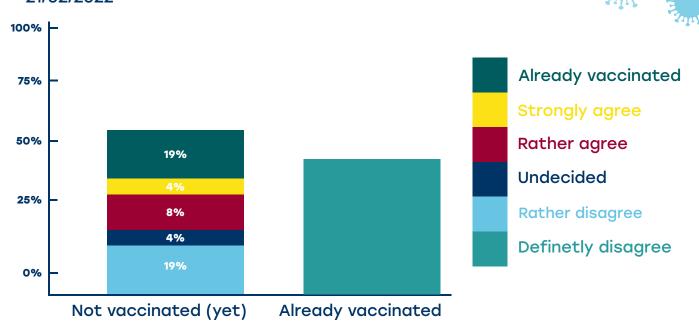


## Section 4: Vaccination behavior and intention



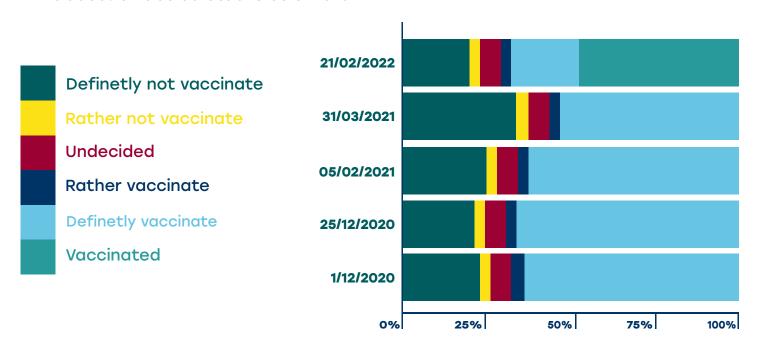
## **COVID-19 Vaccination Status and Intentions**

### **Vaccination intentions** 21/02/2022



#### Vaccination intentions for a COVID-19 vaccine:

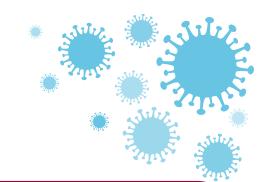
Intentions with already vaccinated participants included. Unlabeled Stacks below 5%



**40%** of respondents report having been fully **vaccinated** (Mar 2022), with another 6% who have received one dose

- Younger (18-29) males are more likely to be vaccinated than females in the same age group
- In the whole population, negative intentions toward vaccination remained decreased, but 19% still say they definitely would not vaccinate

## Behavioural and Social Determinants of Vaccination (BeSD)



Factors that affect vaccination uptake:

#### **Social processes**

Influential others support vaccination
Vaccination norms
\*Workplace norms
Decision and travel autonomy
Trust in vaccine providers
\*Self-confidence in answering
questions

What people think and feel
Confidence in vaccine benefits
Confidence in vaccine safety
Perceived risk - self
\*Perceived risk - others
Seeing negative information

#### **Motivation**

Intention to
get a COVID-19 vaccine
\*Willingness to recommend
a COVID-19 vaccine

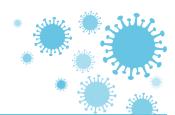
\*Construct is exclusive to health worker survey

#### **Practical issues**

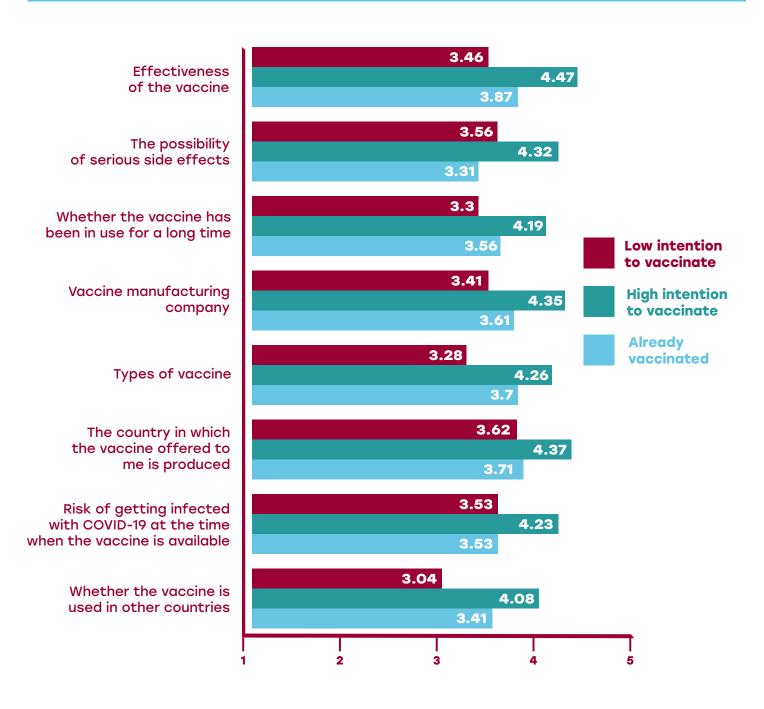
Know where vaccine is available
Previous uptake of adult vaccination
Ease of access
Preferred site
\*Availability of on-site vaccination

Vaccination
Recieves
recommended
vaccines

## What People Think and Feel: Overall Safety



- Many of those who are already vaccinated say their decision was affected by the effectiveness and type of vaccine.
- Those with low intention to vaccinate are generally less persuaded by common motivations to be vaccinated.
- Those with high intentions to vaccinate are generally more affected in their decision by almost all motivators.
- Those with higher vaccination intention are more concerned over most matters, risk and effectiveness than those with lower intentions.

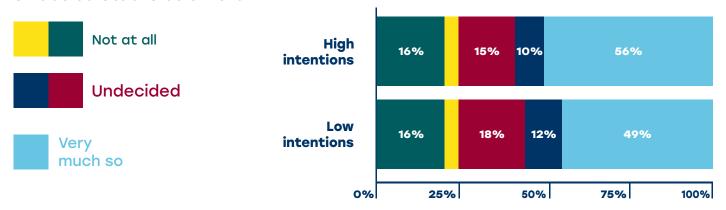


## What People Think and Feel: Side Effects and Trust

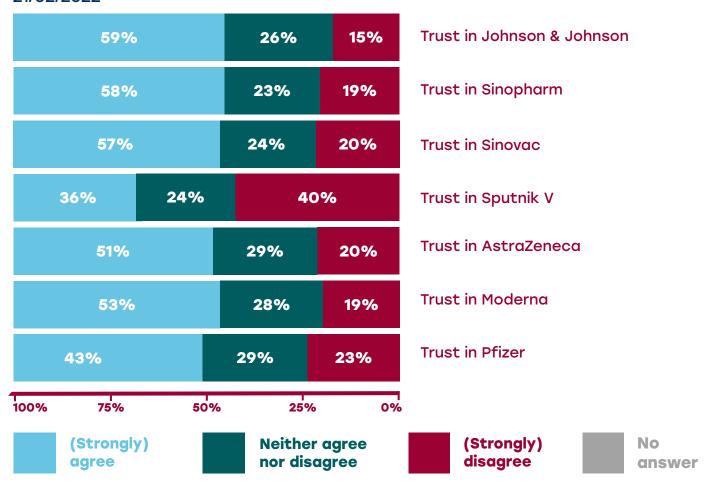


How concerned are (were you) you that a COVID-19 vaccine could cause you to have a serious reaction?

Share of participants with different concerns. Unlabeled Stacks below 5%



### Unvaccinated individuals: Safety and trust in vaccines 21/02/2022



- A substantial proportion of both high and low intention respondents have concerns about possible side effects of a vaccine.
- Among the unvaccinated, Sputnik is the most trusted vaccine producers, but the majority distrust producers such as Johnson & Johnson, Sinopharm, Sinovac, Moderna, and AstraZeneca.

## What People Think and Feel: COVID Risk and Vaccine Effectiveness

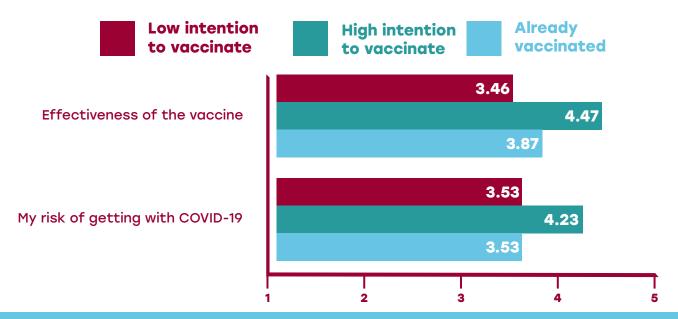


#### **Covid-19 vaccination context:**

#### Covid risk and vaccination effectiveness

Rated on my: "My decision to get vaccinated against COVID-19 was affected by:" 1 (not at all) to 7 (very much so).

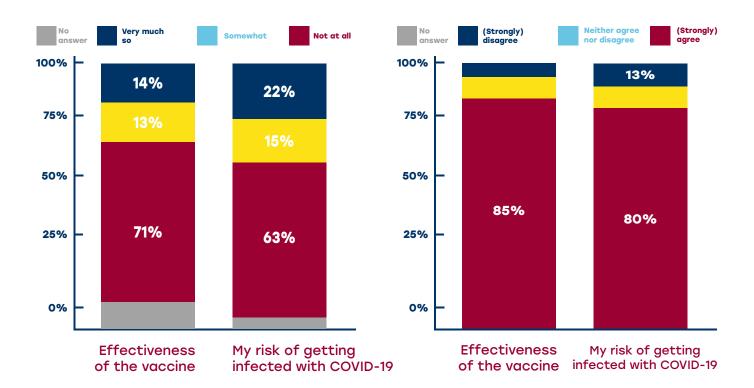
Mean values and 95% confidence intervals



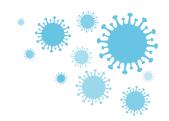
Those with high intention are more strongly influenced by both the perceived effectiveness of the vaccine and their own risk of infection than those with low intention.

#### COVID risk and vaccine effectiveness: Low intention 21/02/2022

#### COVID risk and vaccine effectiveness: High intention 21/02/2022



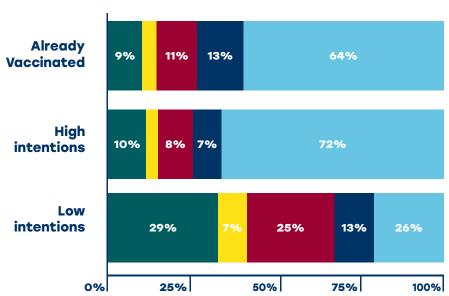
## What People Think and Feel: Importance of vaccination



I believe vaccination can help control the spread of COVID-19

Share of participants with different concerns Unlabeled Stacks below 5%



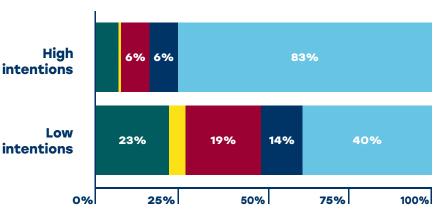


How important do you think getting vaccinated against COVID-19 is for your health?

Share of participants with different concerns. Unlabeled Stacks below 5%

Not at all
Undecided

Very much so



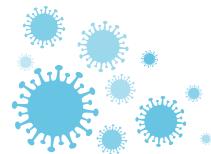
- Among the unvaccinated, those with low versus high intentions hold significantly different views on vaccination
- One third of the low intentioned believe that vaccination will NOT help control
  the spread of COVID-19, while approximately four-fifths of the high intentioned
  believe that it will control spread
- Nealy 30% of the low intentioned people say that getting vaccinated against COVID-19 is NOT important for their health, while the majority of those with high intentions feel it is important for their health

#### **Social Processes**

- Those already vaccinated were motivated in part by being able to travel and attend social events again, as well as visiting family and friends.
- A recommendation from MoH or from the family doctor was significantly more motivating for those unvaccinated but with high intention than for those already vaccinated or those unvaccinated with low intention.

Rated on: "My decision to get vaccinated against COVID-19 was affected by: 1 (not at all) to 7 (very much so). Mean values and 95% confidence intervals

Whether high vaccination 3.08 uptake would lift restricions on movement and gatheringin groups 3.82 Whether getting vaccination 3.28 would allow me to travel, 3.96 go to concerts and other social activities again 3.36 Whether getting vaccinated would allow me to see family 4.49 and friends again 4.18 3.32 Recommendation of 4.48 the Ministry of Health 3.77 3.41 Recommendation of 4.63 my family doctor 3.74 **Already** Low intention **High intention** to vaccinate vaccinated to vaccinate



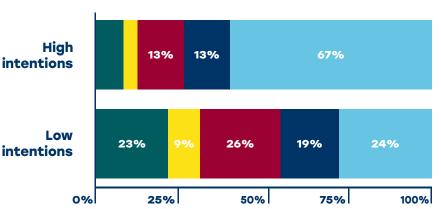
## Social Processes: Trust and Collective Responsibility

STATE STATE STATES

How much do you trust the health care providers who would give you a COVID-19 vaccine?
Share of participants with different concerns.

Share of participants with different concerns. Unlabeled Stacks below 5%

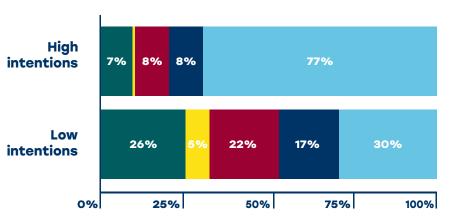




How much do you think getting a COVID-19 vaccine for yourself will protect other people in your community from COVID-19?

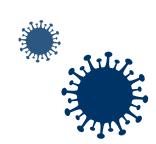
Share of participants with different concerns. Unlabeled Stacks below 5%





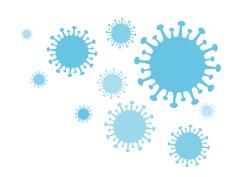
- Those with high intentions are more confident that a vaccine will protect themselves and others than those with low intentions, although nearly half of those with low intentions do believe it will protect people in their community
- Trust in health care providers who provide the vaccines is higher among those with high intentions than low



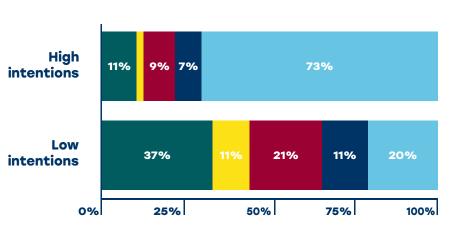


#### **Social Norms**

If a COVID-19 vaccine is a available and recommended for me, I think most of my family and friends would want my to get it Share of participants with different concerns. Unlabeled Stacks below 5%



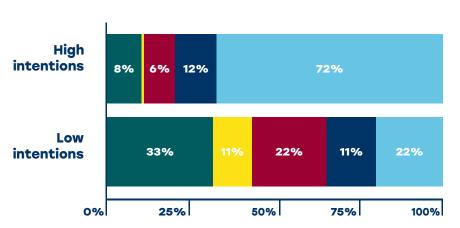




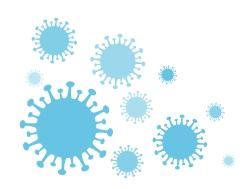
If a COVID-19 vaccine is available and recommended, I think that other people whose opinions I value would want me to get it

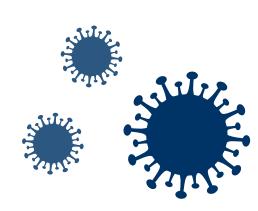
Share of participants with different concerns. Unlabeled Stacks below 5%





• Among the unvaccinated, those with high intentions are more open to normative dimensions of vaccination than those with low intentions

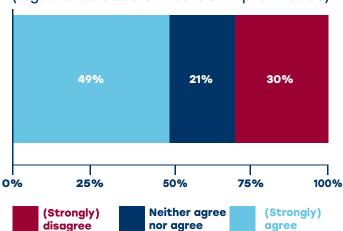




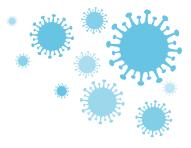
#### **Practical Issues**

#### Practical Issues: Low intention 21/02/2022

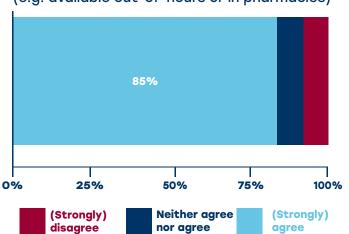
How easy it is to get the vaccine (e.g. available out-of-hours or in pharmacies)



Practical Issues: High intention 21/02/2022

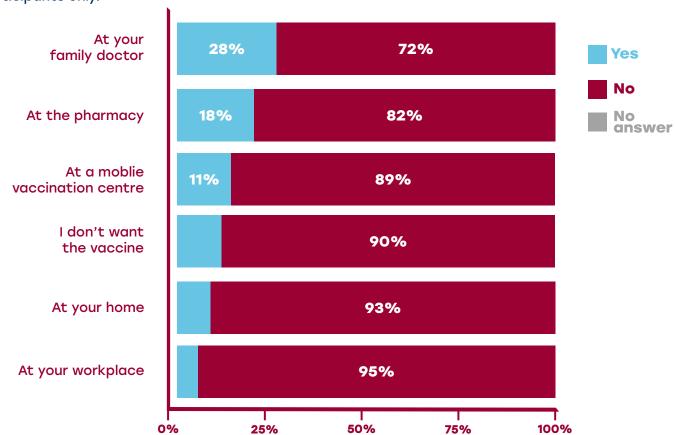


How easy it is to get the vaccine (e.g. available out-of-hours or in pharmacies)



#### Where would you prefer to get the vaccin?

Multiple answers could be selected. Unvaccinated participants only.



- Practical issues for obtaining a vaccine are of great interest for those with high intention.
- Roughly half of those with low intention say that practical issues of obtaining a vaccine are important to them, which may present an opportunity for outreach.

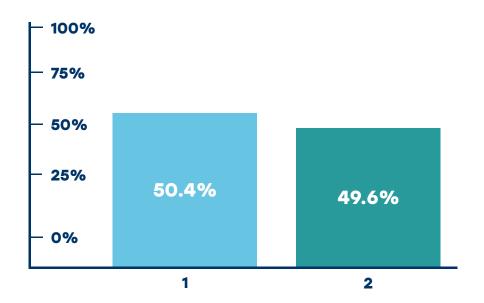
## Motivation: Agreement \*\* With Routine Immunization

1 = agree with routine immunization

2 = disagree with routine immunization

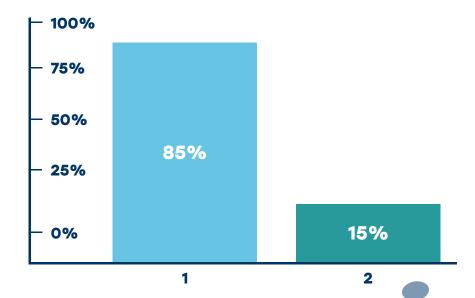
#### Vaccination according to the schedule:

Low intentions





**High intentions** 

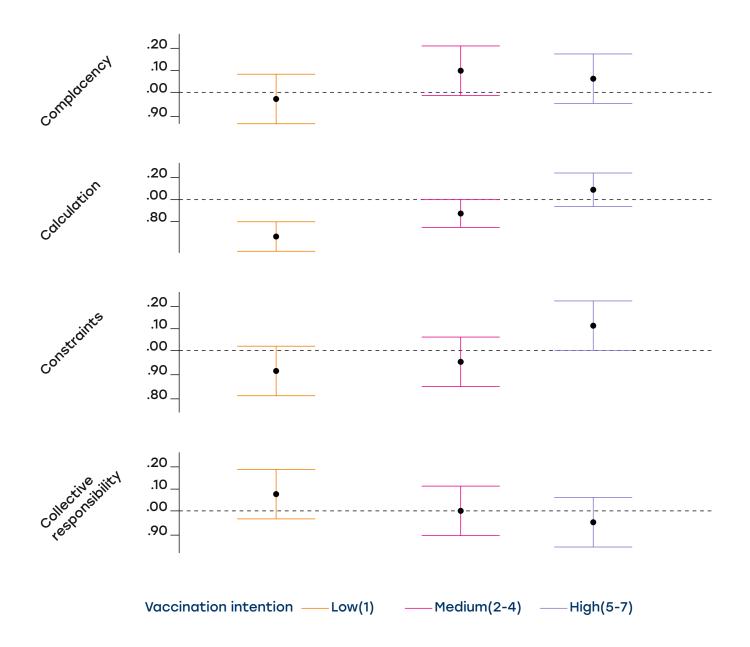


More people with high intention to vaccinate against COVID-19 support routine immunization.

## **5C comparison**



- 1. Confidence: safety, trust, knowledge and attitude towards vaccination
- 2. Complacency: COVID-19 risk perception, belief in the need for vaccine/that it can prevent the spread of the virus
- 3. Calculation: Efforts made to inform oneself, weighing pros and cons
- 4. Constraints: access and convenience of services
- 5. Collective **responsibility:** sense of protecting others, alignment with religious and other beliefs



- People with low intentions spend less effort to inform themselves and calculate pros and cons of vaccination.
- Those with high intentions tend to consider the constraints (access, convenience) more in their decision.
- There is no statistically significant difference among intention levels in regards to complacency or collective responsibility