

BEHAVIOURAL INSIGHTS ON COVID-19 IN THE KYRGYZ REPUBLIC

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



Summary: General Findings

For discussion and further analysis and interpretation



Knowledge and Perceptions

- Levels of health literacy were lower than in Round 2, and only around half of respondents have high health literacy regarding the vaccinations
- Risk perceptions remain largely unchanged with many perceiving infection neither likely nor severe
- The perceived distance from the virus has grown since December, but levels of fear and stress remain similar

Individual Behaviours

- The uptake of protective behaviours remains below desirable levels and reported levels of masking and physical distancing are lower than in December
- The percentage of respondents that express high vaccination willingness is lower than in December
- Safety and effectiveness concerns remain important reasons for vaccine hesitancy

Support for Policies

- The acceptance of policy measures continues to vary strongly between each policy, but there is majority support for most
- The majority of respondents support strict further bans if cases start rising again
- Younger respondents continue to see policies as more unfair
- Trust in institutions remains low, but the medical sector continues to be the most trusted

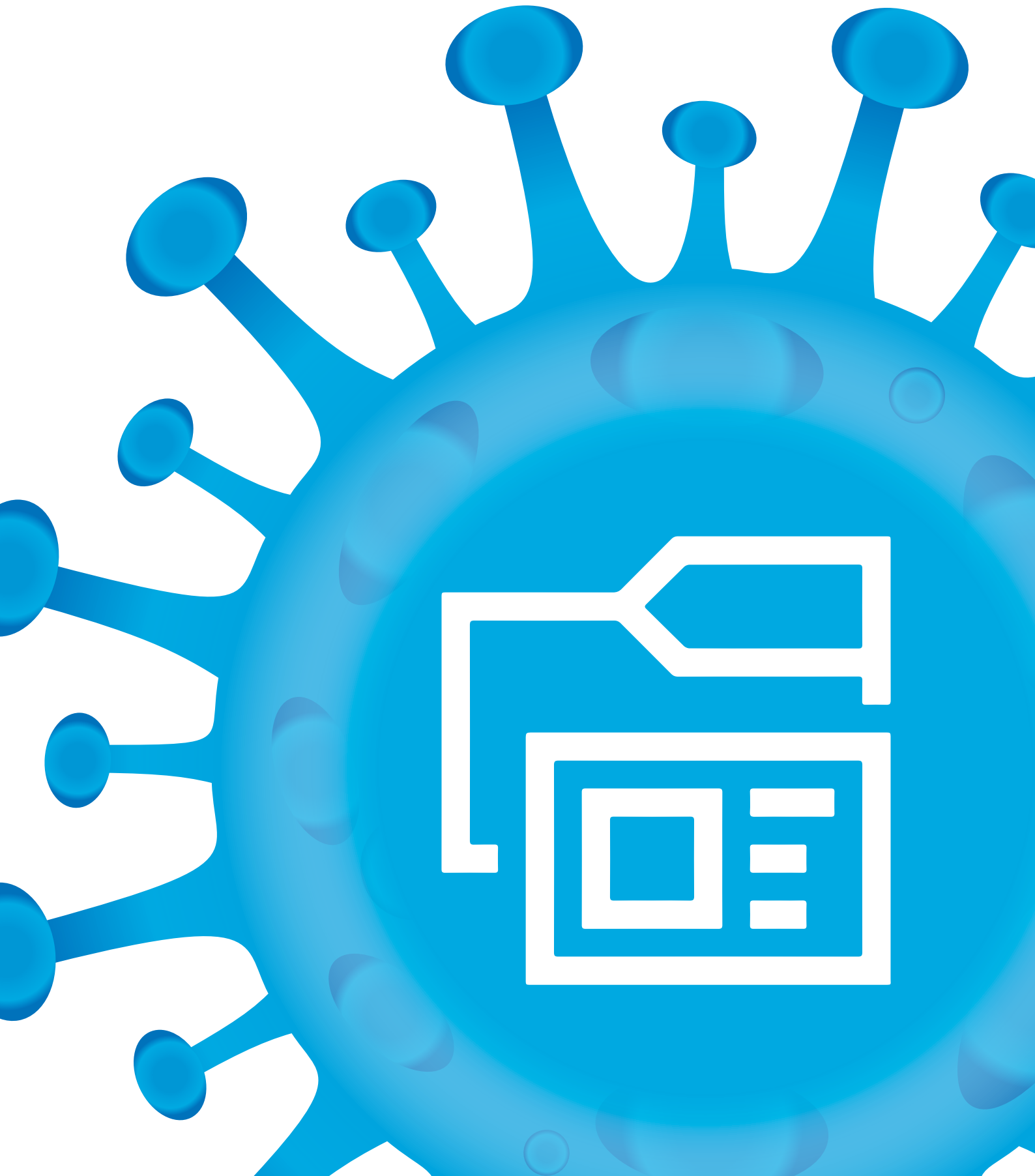
Economy and Wellbeing

- Negative economic impacts and worries about future finances continue to be common among the respondents at similar levels as rounds 1 and 2
- The pandemic has had a detrimental impact on lifestyles, particularly exercise and diets, but also smoking and drinking
- Avoiding health-care continues to be at similar levels as in rounds 1 and 2
- Avoidance of people by ethnicity remains common

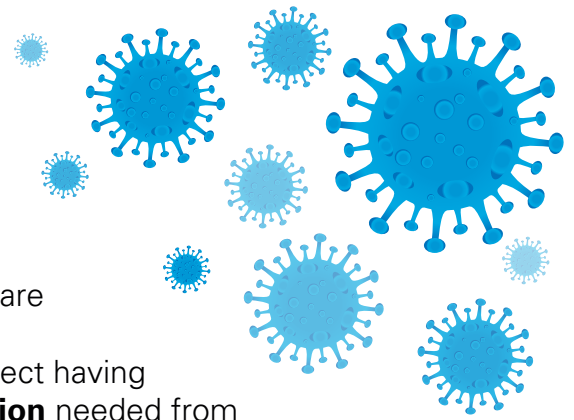
Методология

Данные собирались посредством компьютерного телефонного интервью (Computer-assisted telephone interviewing, CATI), в ходе которого было опрошено 1000 человек из всех семи областей Кыргызстана и двух основных городов - Бишкека и Оша. Сбор данных осуществлялся под руководством Министерства здравоохранения и социального развития КР и все данные, собранные в рамках этого проекта, принадлежат данному министерству.

SECTION 1: Knowledge and Perceptions



Knowledge



Findings

- There levels of **health literacy** for comparable questions are **lower** than in round 2
- Those who report understanding **what to do** if they suspect having COVID-19 reduced from 69% to **63%**, and **finding information** needed from 64% to **59%**
- Just over half feel **well-informed** about the **vaccine (52%)** and **understand vaccine recommendations (54%)**
- As with COVID-19 generally in the past, judging **media reliability** regarding the **vaccine** was the **most challenging** aspect (**40%**)

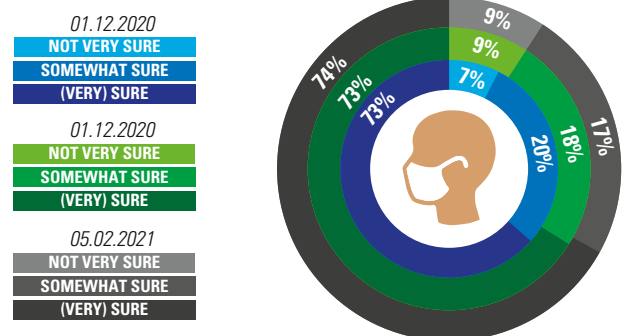
The lower levels of health literacy measured since Rounds 1 and 2 are significant and their causes are important to understand. Additional efforts into communicating about the vaccine is advisable.

Predictors

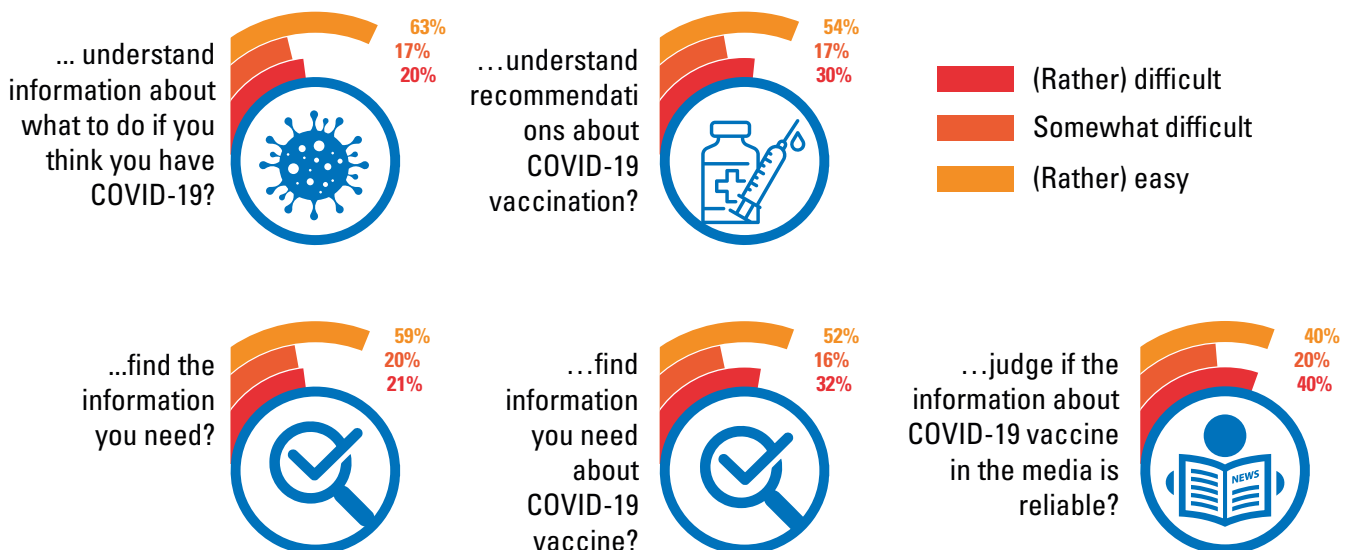
- **Health literacy** is **higher** among **male** and **highly educated** respondents
- Health literacy correlates with **higher trust** in **government** and **lower** perceptions of **infection severity** and **viral closeness**
- Perceptions of **media hype** around COVID-19 correlate with **lower** health literacy

FEELING SURE ABOUT PROTECTIVE MEASURE TO AVOID AN INFECTION

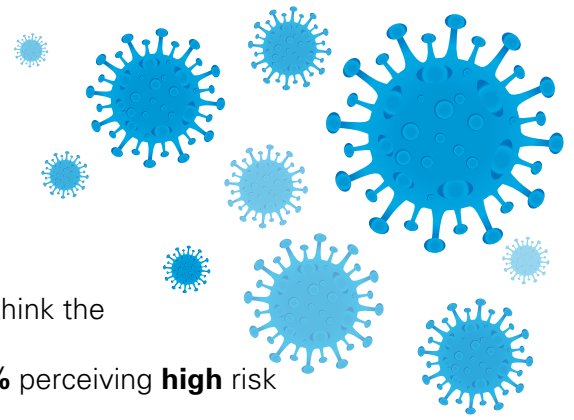
Rated on scales ranging from 1 (very unsure) to 5 (very sure).
Mean values und 95% confidence intervals.



HEALTH LITERACY



Risk perceptions



Findings

- Risk perceptions **overall** continue to be **largely unchanged** since the start of data collection
- A **small increase** was measured the proportion of those who think the **probability of getting infected is low** (from 42% to **45%**)
- Perceptions of **infection severity** are **slightly higher** with **28%** perceiving **high risk** (25% in December)

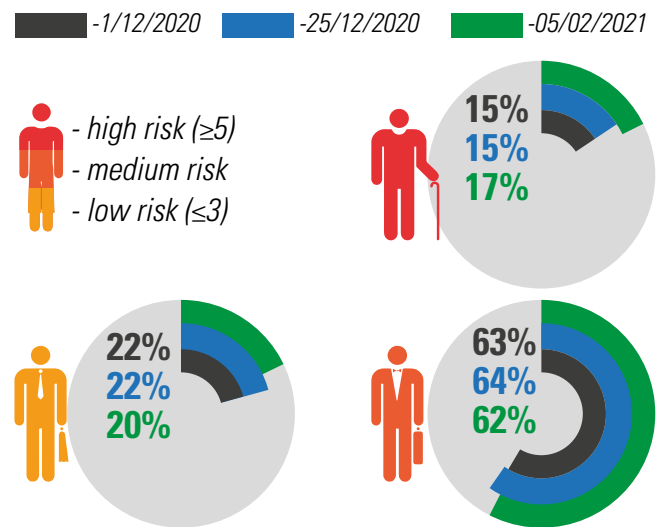
There are no significant changes in risk perceptions and almost half of the respondents continue to think infection is not likely and/or not severe. The reason for lower severity perceptions among healthcare workers is important to understand better as they often act as information sources and influencers to the population in general.

Predictors

- Respondents who are a part of **risk groups** perceive their **susceptibility and severity** of infection as **higher**
- **Highly educated** respondents view the infection as **less severe**
- **Older** respondents think they are **more likely** to get infected
- Perceptions of **viral closeness** and **frequency of media consumption** correlate with **higher** risk perceptions

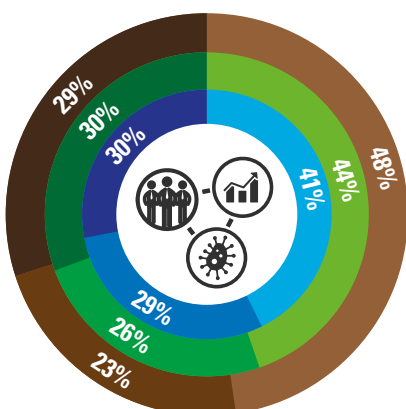
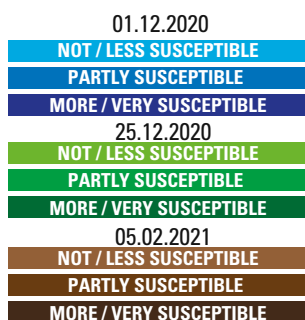
PERCEIVED RISK OF AN INFECTION

Mean score including susceptibility, probability and severity perceptions, each originally rated on scales ranging from 1 (low) to 5 (high)



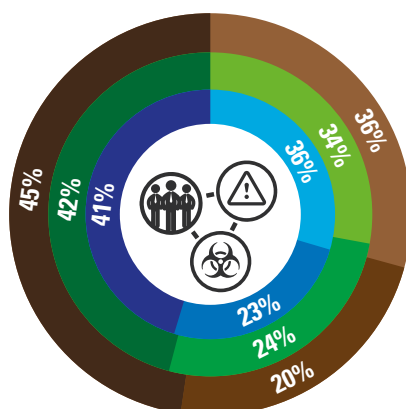
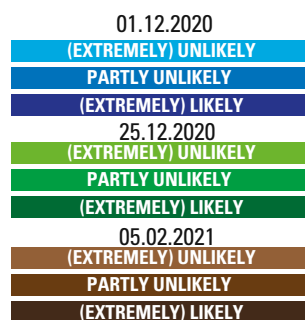
PERCEIVED SUSCEPTIBILITY

Grouped results, originally rated on scales ranging from 1 (not susceptible) to 5 (very susceptible)



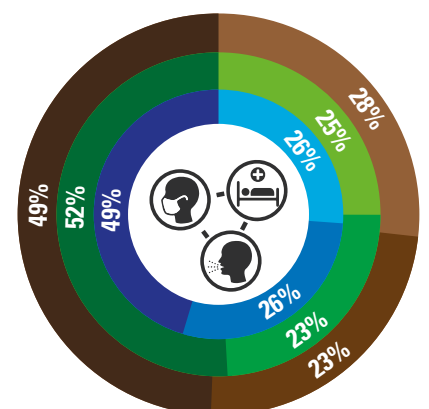
PERCEIVED PROBABILITY OF AN INFECTION

Grouped results, originally rated on scales ranging from 1 (extremely unlikely) to 5 (extremely likely)

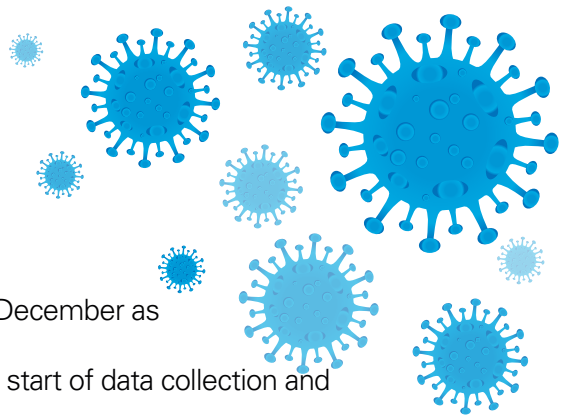


PERCEIVED SEVERITY OF AN INFECTION

Grouped results, originally rated on scales ranging from 1 (not severe) to 5 (very severe)



Perceptions and emotions



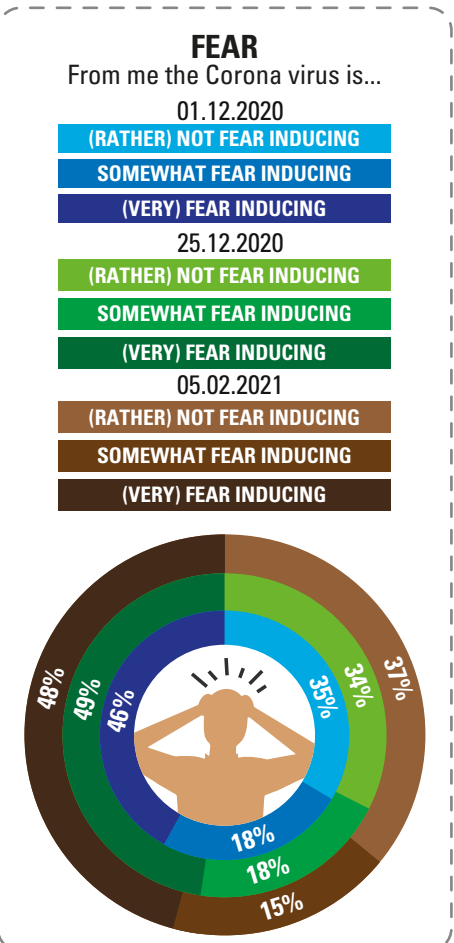
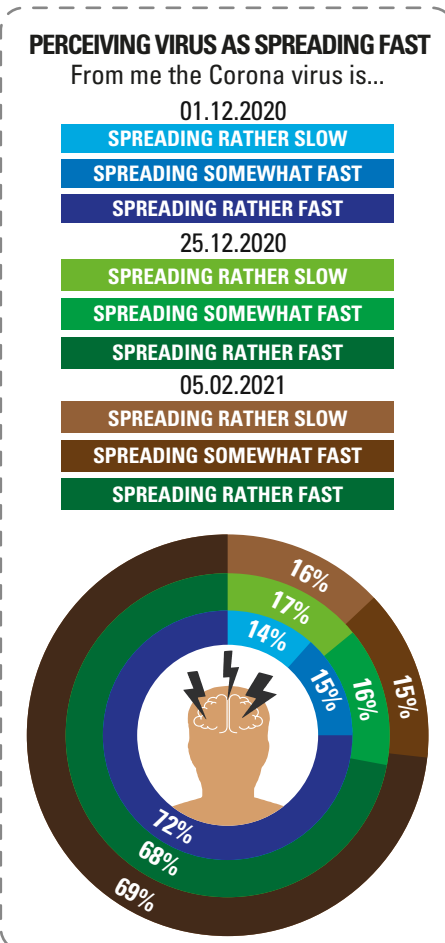
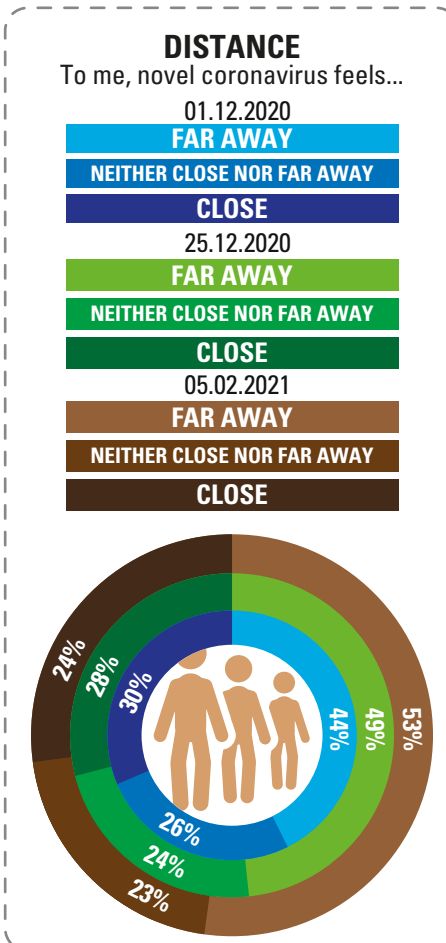
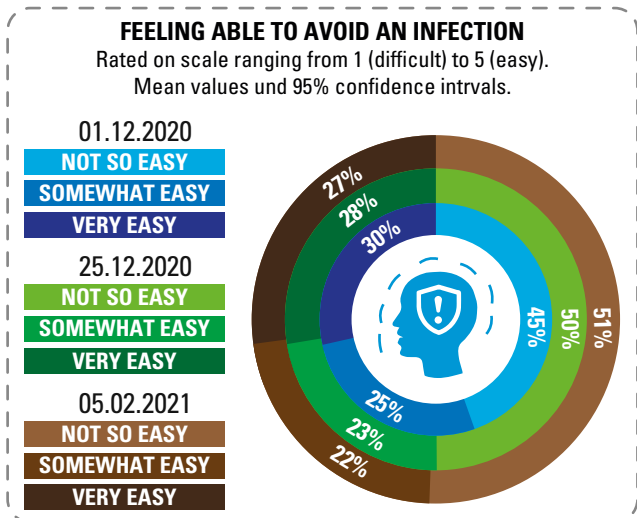
Findings

- The level of **self-efficacy** towards avoiding COVID-19 is **similar** to December as **51%** think it's **easy** to **avoid an infection** (50% in Dec)
- The perceptions of **closeness to COVID-19** has **reduced** since the start of data collection and **53%** of respondents now feel the virus is **far away**
- The vast majority of respondents still think that the **virus is spreading very fast (69%)**
- The level of **fear** COVID-19 causes among respondents is **similar** to previous rounds (**48% high ly fearful**)

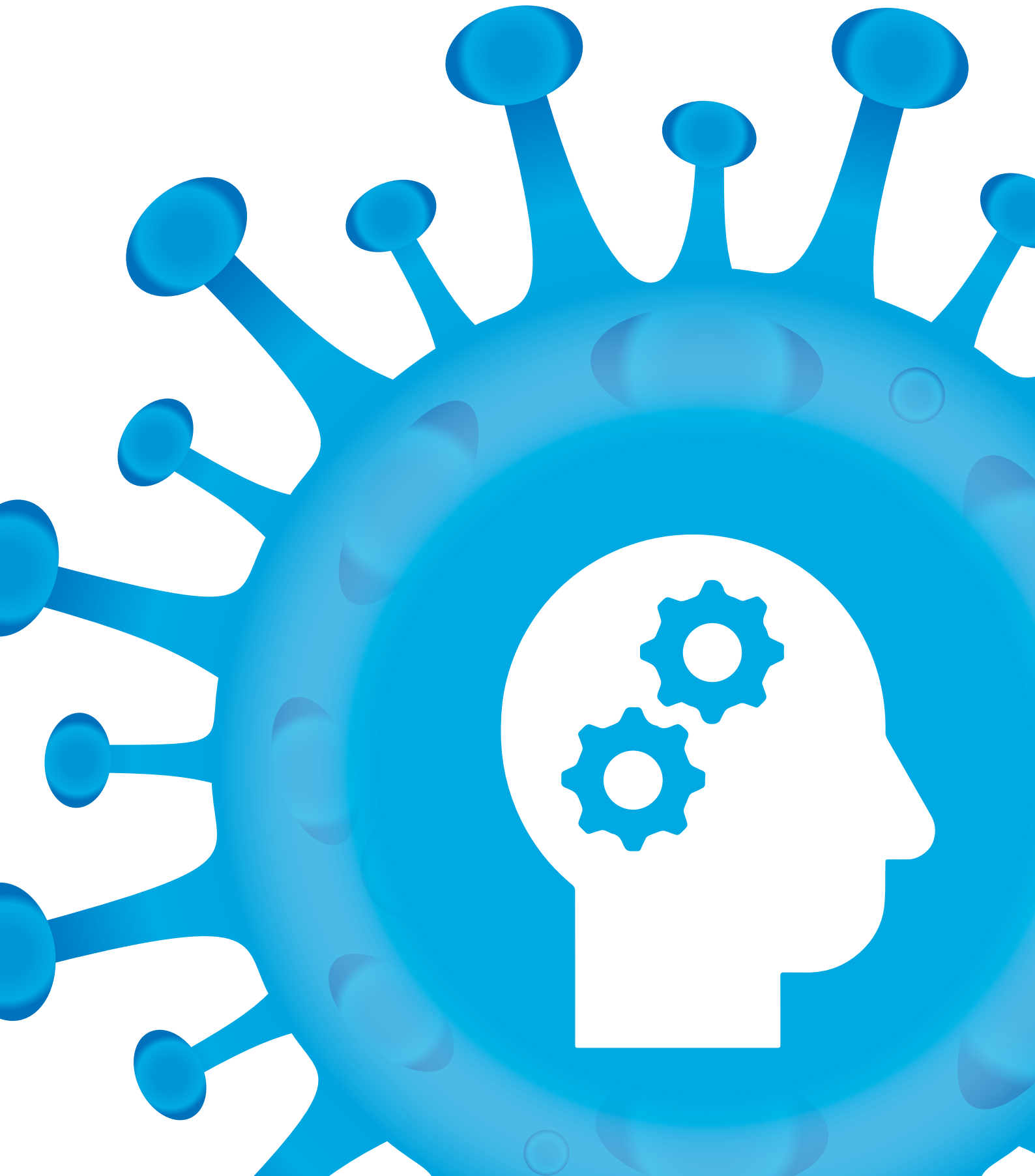
The degree emotional affect among respondents has not changed greatly since Round 2 of data collection. Despite the perceived distance to the virus growing, other aspects such as stress and fear remain similar, which suggests that not only immediate physical/medical threats are considered.

Predictors

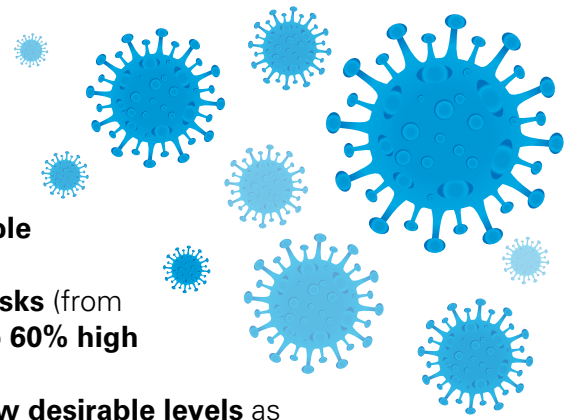
- Negative emotions are felt more by respondents who are **female** or **older**
- People **living with children** report **higher** levels of **stress**
- Perceptions of **closeness** and **negative emotions** are **higher** with those who have **infected peers**
- The frequency of **media consumption** correlates with **higher negative emotions** whereas **trust in government** with **lower**



SECTION 2: **Individual Behaviours**



Protective Behaviours



Findings

- The **majority** of protective behaviours **remained at comparable levels** to the two previous rounds of data collection
- However, **small reductions** were measured on the use of **masks** (from 79% to **75% high uptake**) and **physical distancing** (from 64% to **60% high uptake**)
- The adoption of protective behaviours in general remains **below desirable levels** as even the most adhered to behaviours (**masking, disinfectants, and hand sanitation**) are **not** applied by a **quarter** of the respondents
- **Staying home when sick** and **avoiding social events** continue to **not** be applied by the majority (**49%/36%**)
- Up to **18%** of respondents say they have **used antibiotics** to **prevent** or **treat** COVID-19 (same as rounds 1/2)

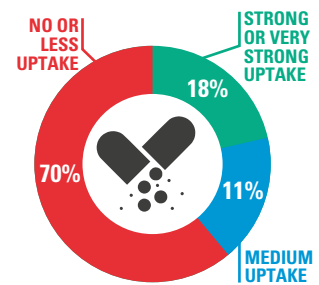
The uptake of protective behaviours remains below desirable levels and are a risk factor for a resurgence of COVID-19 cases. Reductions in the level of mask wearing and physical distancing are particularly concerning given the low costs associated with uptake in them.

Predictors

- Uptake of protective behaviours is higher among **female** and **older** respondents
- Frequency of **media consumption**, trust in the **medical sector**, and perceptions of **viral spread** correlate with **higher** uptake
- Maladaptive **antibiotic** use is more common among **risk group member** and respondents with **lower educated**

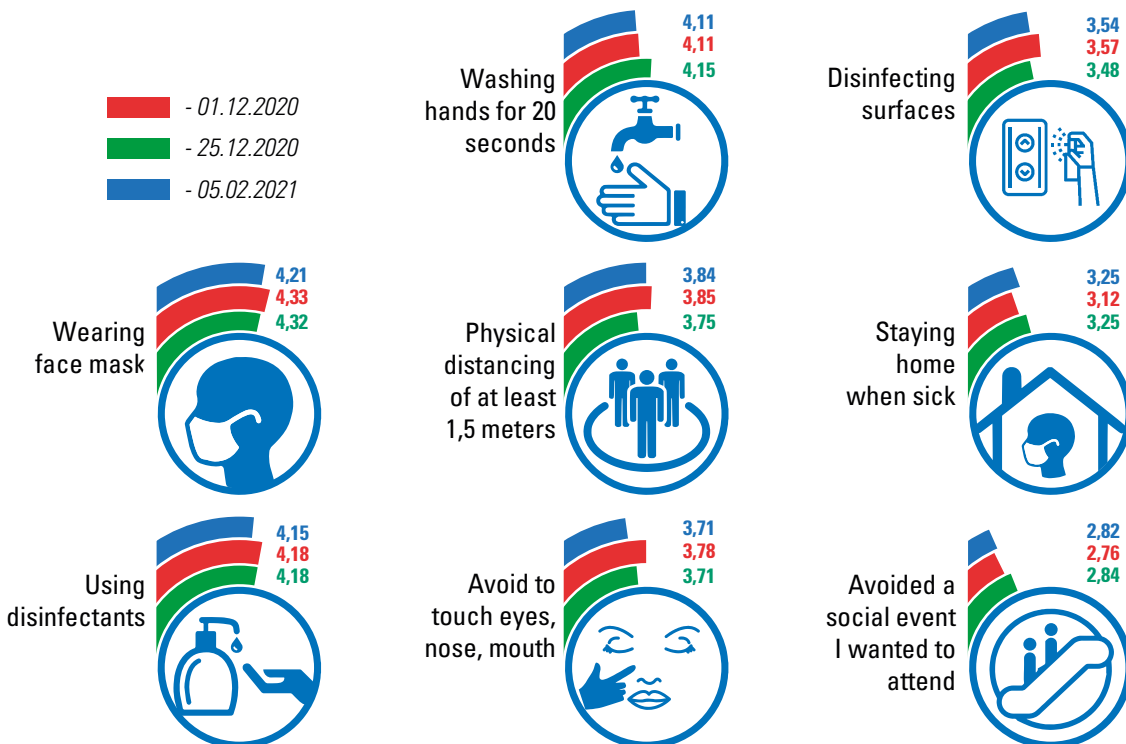
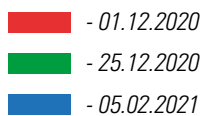
MALADAPTIVE USE OF ANTIBIOTICS

Used antibiotics to prevent or treat COVID-19

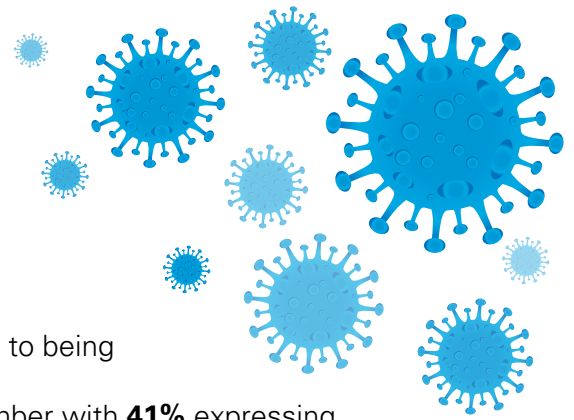


UPTAKE OF PROTECTIVE MEASURES

Rated on scales ranging from 1 (not at all) to 5 (very much). Mean values and 95% confidence intervals



Vaccinations



Findings

- **Vaccine hesitancy** is higher than in previous rounds of data collection with **less than half** of respondents expressing **definite vaccine willingness (49%)**
- The proportion of respondents expressing **definite opposition** to being vaccinated was **29%** (26%/23% in December)
- Belief in the vaccine's **effectiveness** also **reduced** from December with **41%** expressing at least some levels of **doubt** (36% in December)
- **61%** think that their **friends and family** would want them to be vaccinated
- The proportion of respondents expressing **negativity** towards the **national vaccination schedule** was also **higher** than in December (**26%** vs 17%)

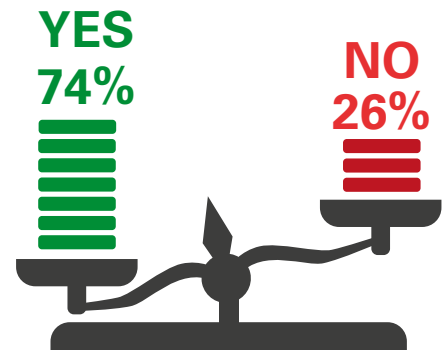
The higher levels of vaccine hesitancy and lower levels of belief in its effectiveness and support for the national vaccination schedule are concerning and should be further studied.

Predictors

- **Women, younger people,** and **urban residents** are more **negative** towards the vaccination
- Higher **trust** in the vaccines **safety** and higher **risk perceptions** correlate with **higher** vaccine intentions
- Vaccination willingness correlates **positively** with **trust in government,** worries about future **economic consequences, health literacy,** and the perception that the virus is **spreading fast**

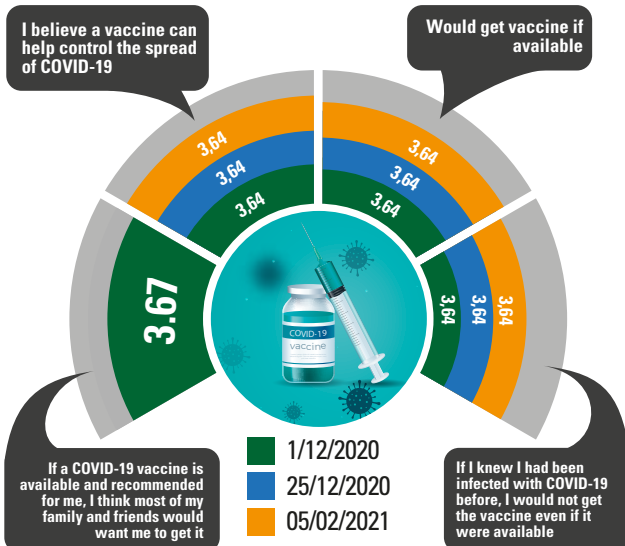
REASONS FOR FUTURE COVID-19 VACCINE ACCEPTANCE

Apart from COVID-19, I think everyone should be vaccinated according to the national vaccination schedule



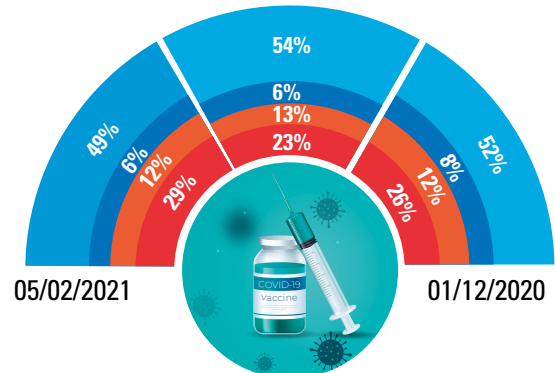
PLEASE SHARE YOUR POSITION ON A POTENTIAL FUTURE COVID-19

Current data collection. Scale 1 (strongly disagree) - 5 (strongly agree)



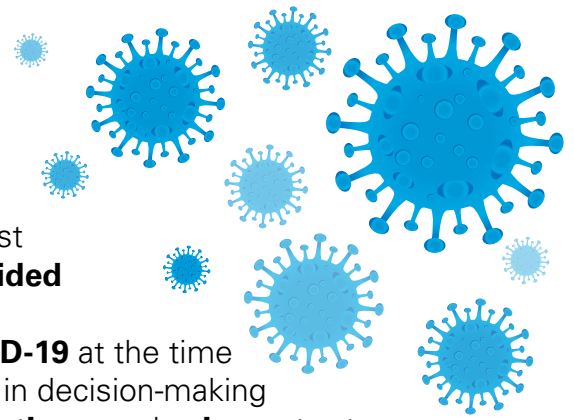
WOULD GET VACCINE IF AVAILABLE

25/12/2020



- Definitely not vaccinate
- Undecided
- Rather vaccinate
- Definitely vaccinate

Vaccination concerns



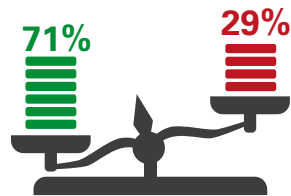
Findings

- The **desire to see friends and family safely** is the highest **driver** for **vaccine acceptance** for those who remain **undecided (87%)**
- Proven **safety, ease of access, and risk of getting COVID-19** at the time are all listed by **82%** of undecided respondents as important in decision-making
- **Recommendations** from the **MoH** or other **public institution** are also **important (85%)** and **more highly valued** than those from the **family doctor (78%)**
- **Travel, concerts, and other social activities** were the **least cited concern**, but were nonetheless mentioned as important by the **vast majority (71%)**

Predictors

- **Recommendations** are **more important** for those with **trust in government** and the **medical sector, high media consumption frequency, and higher perceptions of viral closeness and spread**
- **Family doctor recommendations** are **more** important to **female** and **older** respondents

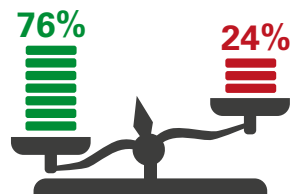
Whether getting vaccinated would allow me to travel, go to concerts and other social activities again



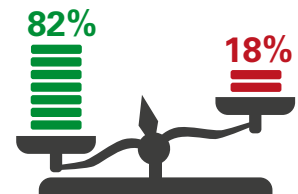
REASONS FOR FUTURE COVID-19 VACCINE ACCEPTANCE

● YES ● NO

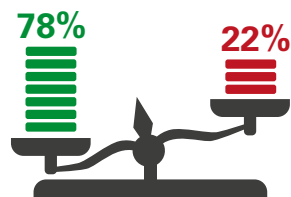
Country in which the vaccine is produced



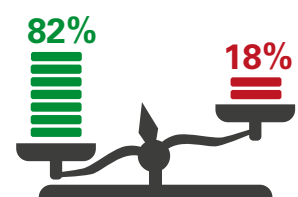
How easy it is to get the vaccine (e.g. available out-of-hours or in pharmacies)



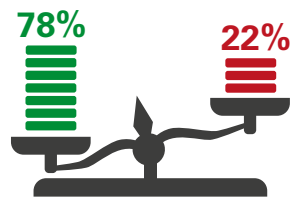
Whether the vaccine is used in other countries



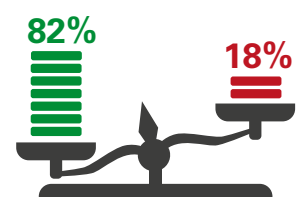
Risk of getting infected with COVID-19 at the time when the vaccine is available



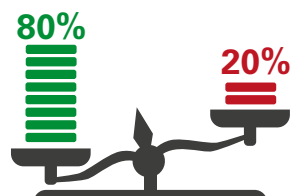
Recommendation from my family doctor



Whether the vaccine has been in use for a long time with no serious side-effects



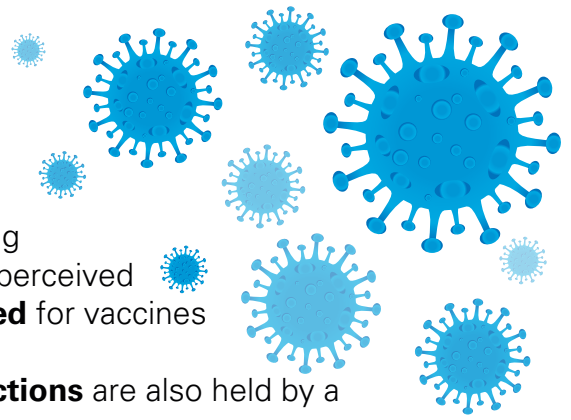
Whether the vaccine is free of charge



Recommendation of the Ministry of Health; labour and Social Protection/National Agency for Public Health

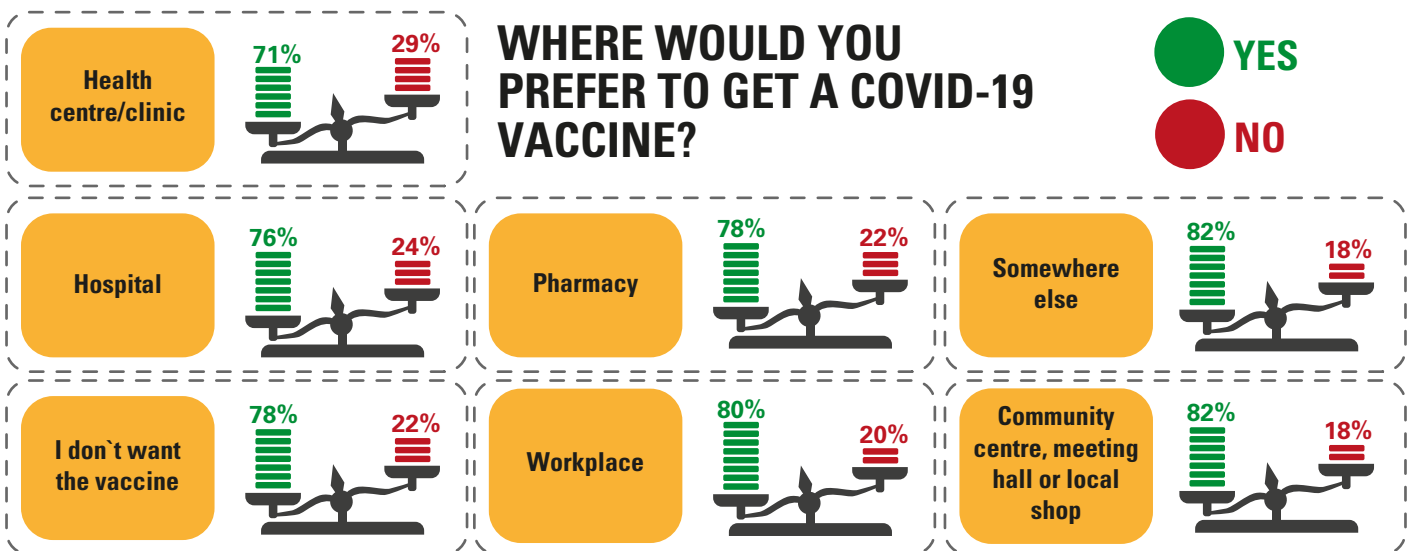


Vaccination continued

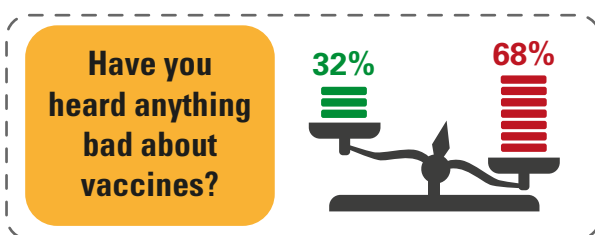


Findings

- The perception of the vaccinations against COVID-19 being **necessary due to the virus being common (3.88)** and the perceived **importance to health (4.03)**. As such, it seems that the **need** for vaccines is accepted by the majority.
- However, concerns regarding **potential side effects/reactions** are also held by a **clear majority (3.75)**
- A **smaller**, though still **majority**, proportion is fully confident that the **vaccine is safe (3.3)**
- **Everyday stress** is **not** a common reason for not planning to get vaccinated (**2.61**)
- Up to a **third of respondents** had **heard something negative about vaccines (32%)**
- Only a **quarter of respondents** would **prefer to get the vaccine** at a **medical facility**
- **Community centres, meeting halls, or local shops** were the **most preferred vaccine location (92%)**

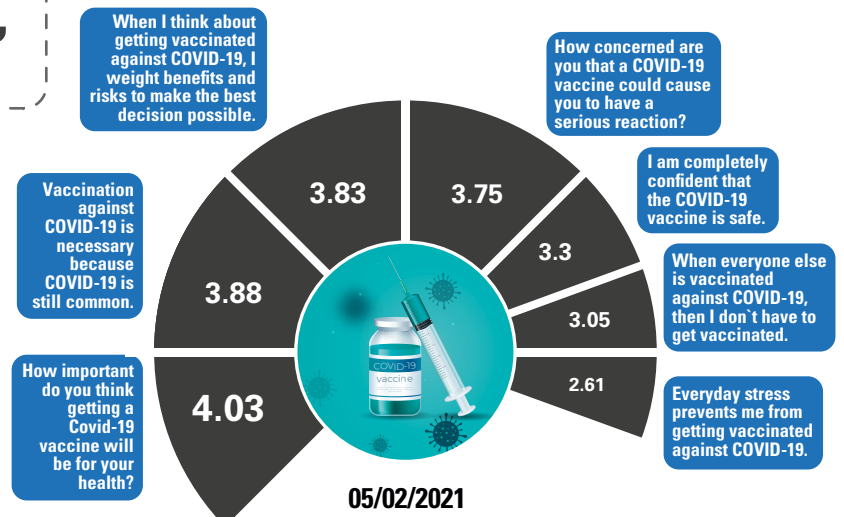


PLEASE SHARE YOUR POSITION ON A POTENTIAL FUTURE COVID-19 VACCINE:

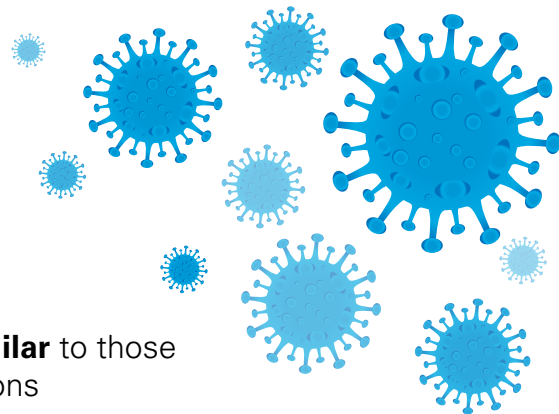


PLEASE SHARE YOUR POSITION ON A POTENTIAL FUTURE COVID-19 VACCINE:

Current data collection. Scale 1 (strongly disagree) - 5 (strongly agree)



Vaccination continued



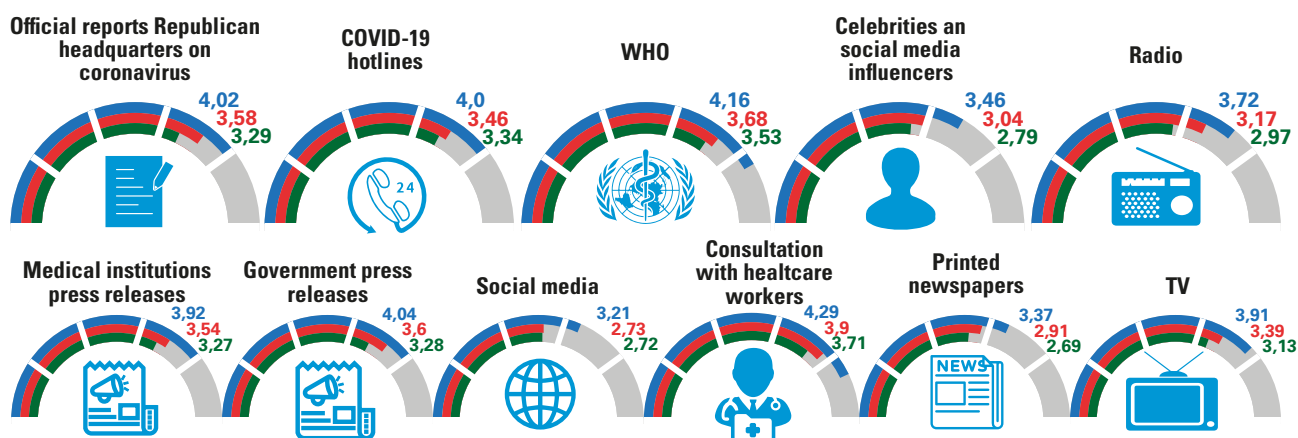
Findings

- Those with **higher intentions** to get **vaccinated** have **higher trust** in **institutions** as well as **media**
- Those who are **undecided** have **levels of trust** more **similar** to those **negative towards** vaccinations than those with high intentions

TRUST IN INSTITUTIONS

Rated on scales ranging from 1 (very low confidence) to 5 (very high confidence).
Mean values and 95% confidence intervals.

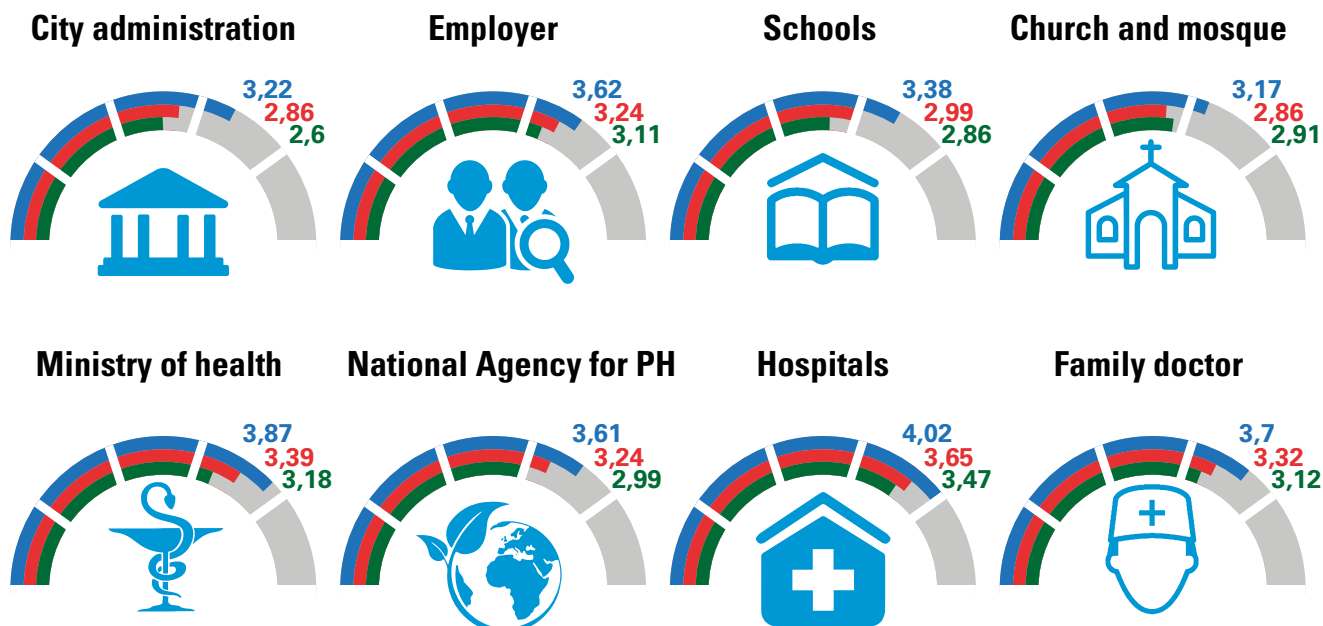
■ (rather) hesitant ■ undecided ■ (high) intention



TRUST IN INSTITUTIONS

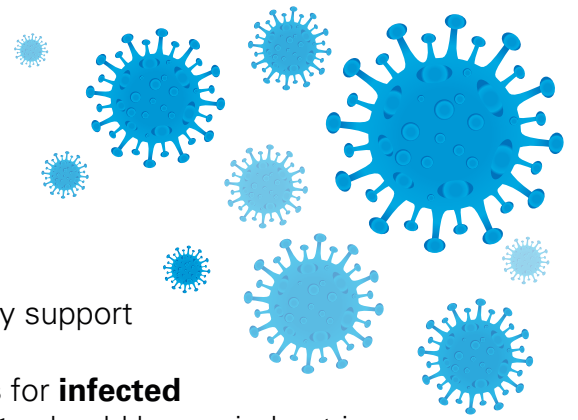
Rated on scales ranging from 1 (very low confidence) to 5 (very high confidence).
Mean values and 95% confidence intervals.

■ (rather) hesitant ■ undecided ■ (high) intention



SECTION 3: **Support for policies**





General policy perspectives

Findings

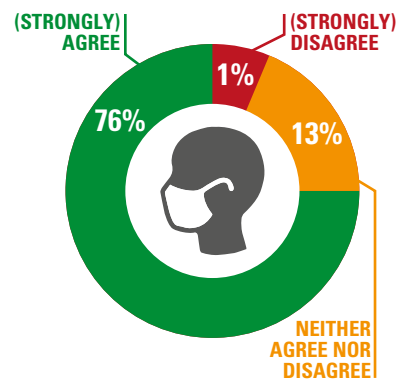
- There are **no substantial differences** in the general policy support since December
- The **majority** continues to think that **enforced isolations** for **infected individuals** should be allowed (**4.2/76%**) and that **more tests** should be carried out in the population (**4.08/72%**)
- A smaller majority thinks that the current **restrictions** are **not sufficient** (**3.67/60%**)
- **68%** of respondents accept **avoiding people** based on their **ethnicity**
- **75%** of respondents would continue to **comply with measures** even if they were **lifted**

There are no substantial changes in the general policy perspectives in the sample. Support for named measures continues to be strong. Avoidance based on ethnicity continues to be common and it would be good to understand who this is most affecting.

Predictors

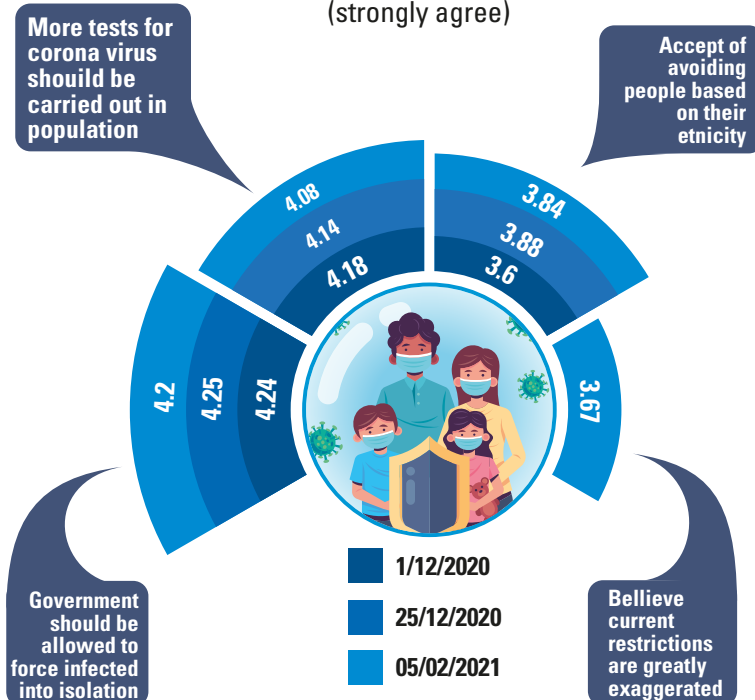
- **Older** respondents as well as those **living with children** are **more likely** to support **enforced isolations** for infected people
- Support for **enforced isolations** correlates positively with **frequency of media consumption, trust in government,** and perceptions of **fast viral spread**
- **Older** respondents and those **living with children** are more likely to report **continuing to adhere** to **measures**

VOLUNTARY COMPLIANCE

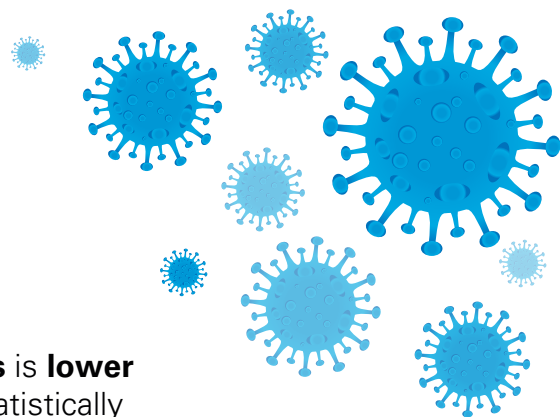


ACCEPTANCE IF MEASURES

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



Support for specific policies



Findings

- The support for **mask mandates** in **closed public spaces** is **lower** than in December (**4.53** vs 4.61), but the difference is **not** statistically significant and supporters remain the vast majority
- Support for **distance learning** in some classes at **educational facilities** is **higher** than in December (**3.81** vs 3.58)
- The majority of respondents support reintroducing the **state of emergency (3.5)** if case levels rise again

Support continues to vary strongly by policy, which suggests a good level of consideration respondents to individual policies. This can support the success of communicating reasoning for policies and restrictions.

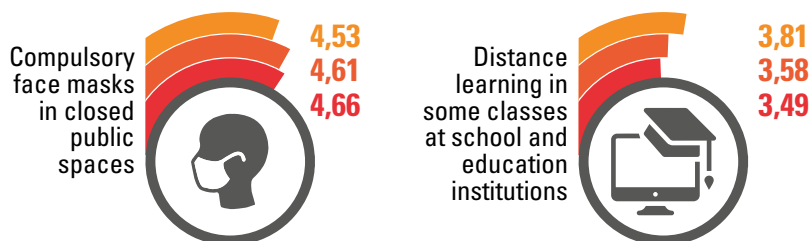
Predictors

- **Mask mandates** in **closed public spaces** are more likely to be supported by **women**, as well as those who perceive **infection severity** to be **higher**, think the virus is **spreading fast**, and **trust the government**
- **Reopening schools** is supported more by **older** respondents, and those who **feel the virus is close** and **trust the government**

AGREEMENT WITH DECISIONS TAKEN

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

01/12/2020 25/12/2020 05/02/2021



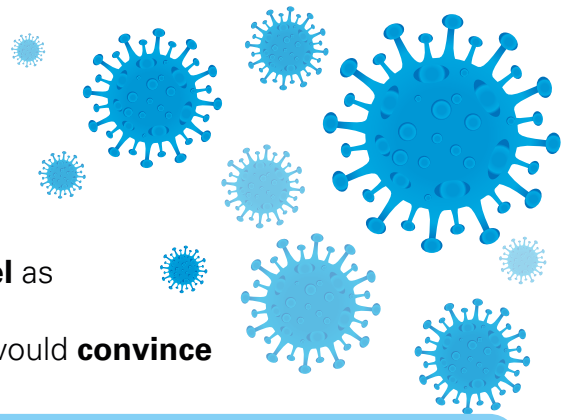
ACCEPTANCE FOR FUTURE RESTRICTIONS

Level of agreement (Scale 1 not at all - 5 strong support)

01/12/2020 25/12/2020 05/02/2021



Fairness



Findings

- Perceptions regarding the **fairness** of policies are **slightly lower** than in **Wave 2**, but roughly at the **same level** as **Wave 1**
- **60%** of respondents consider the policies to be **fair** and would **convince others** of this

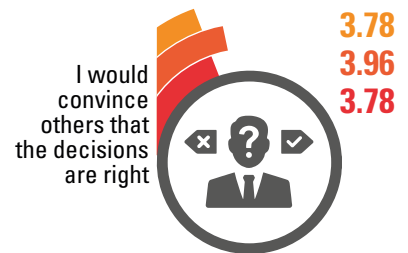
The perceptions on fairness continue on comparable levels to prior rounds. The lower levels of fairness among younger respondents continues to be significant and understanding their concerns may be useful.

Predictors

- **Fairness** perceptions are **lower** among **younger** respondents
- Perceptions of **fairness** correlate **positively** with perceived **susceptibility to infection**, as well as **trust in government** and the **medical sector**
- Those who perceive **media hype** around COVID-19 have **lower fairness** perceptions

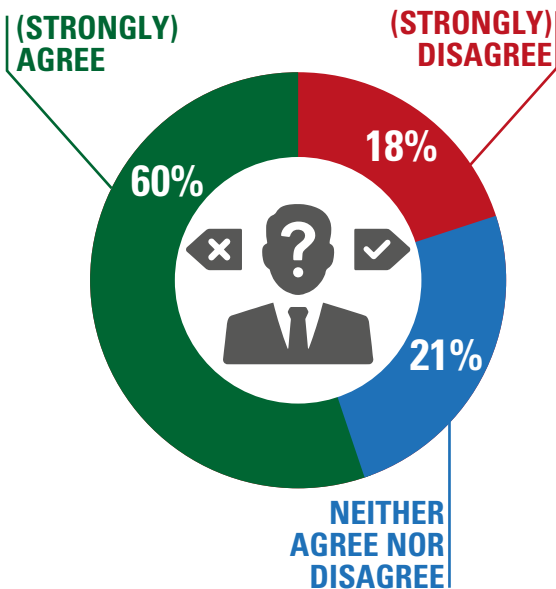
FAIRNESS

Rated on scales ranging from 1 (strongly disagree) to 5 (strongly agree). Mean values and 95% confidence intervals

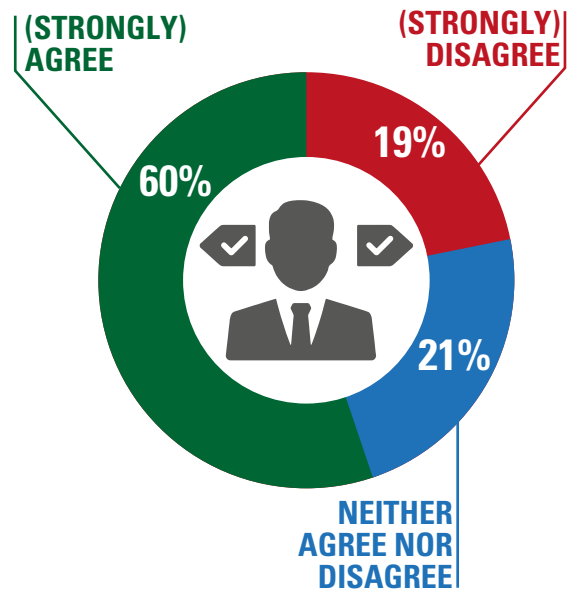


FAIRNESS

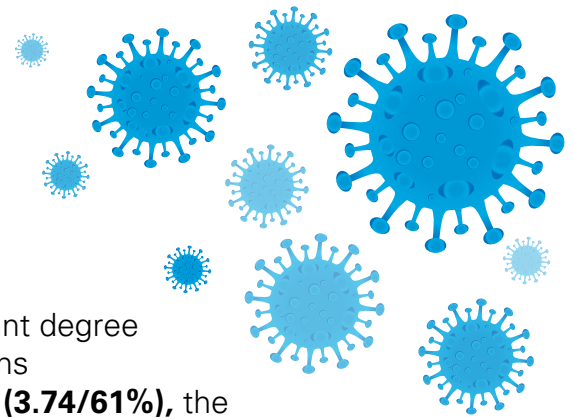
I WOULD CONVINCE OTHERS THAT THE DECISIONS ARE RIGHT



I THINK THE DECISIONS ARE FAIR



Trust in institutions



Findings

- There are **no statistically significant changes** in trust towards institutions to handle COVID-19 well, and a significant degree of distrust continue to be expressed towards most institutions
- The **medical sector** is **most trusted**, including **hospitals (3.74/61%)**, the **MoH (3.55/54%)**, and **family doctors (3.45/51%)**
- **City administrations** are **least trusted (2.95/36%)**

Trust in institutions overall remains quite low. The low trust expressed towards city administrations may be significant as it may be indicating lacking capacities at those levels.

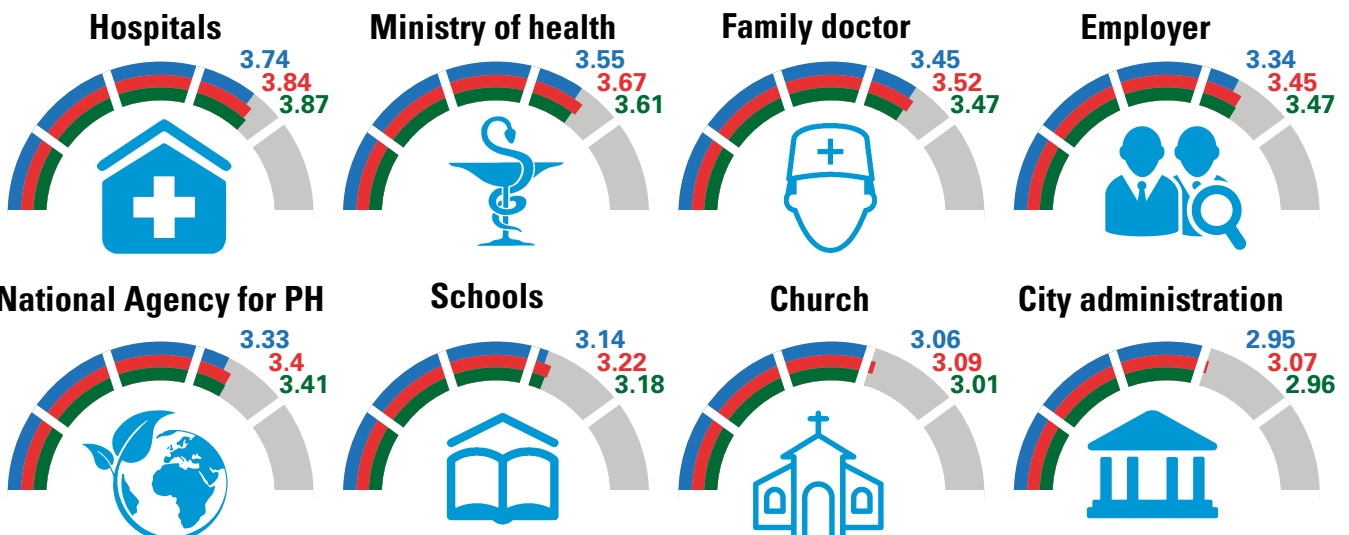
Predictors

- Trust in the **medical sector** and **city administrators** is **lower** among **highly educated** respondents
- Trust in **family doctors** is **lower** for respondents who are **younger** and know an **infected peer**
- Trust in the **medical sector** correlates with **lower infection severity** perceptions
- **Media consumption frequency** correlates **positively** with **trust in institutions**

CONFIDENCE IN INSTITUTIONS

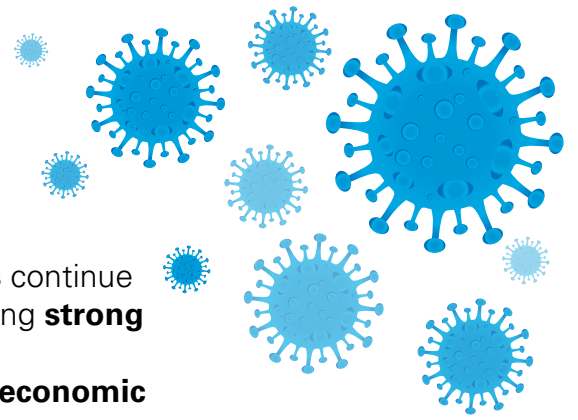
Rated on scales ranging from 1 (very low confidence) to 5 (very high confidence).
Mean values and 95% confidence intervals

■ 1/12/2020 ■ 25/12/2020 ■ 05/02/2021



Section 4: Economy and wellbeing





Economic impacts

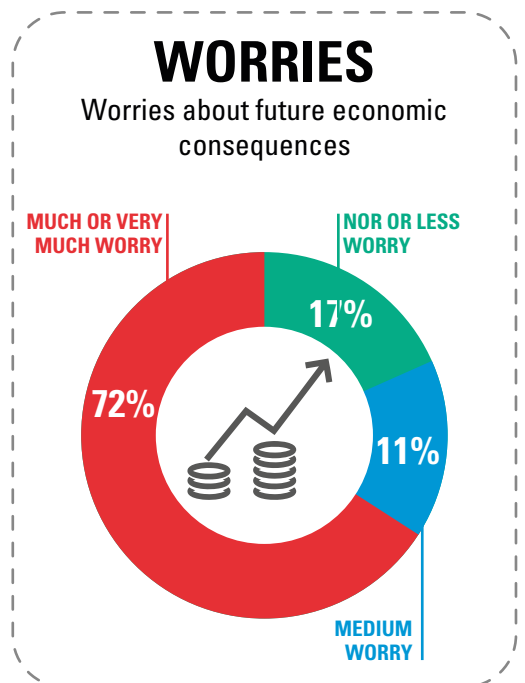
Findings

- The **worries about the future economic consequences** continue to be **very common** among respondents with **72%** expressing **strong worry** (same as round 2)
- Only **17%** of respondents are **not worried about future economic consequences** (16% in round 2)
- **35%** of respondents report having **suffered worsening financial situations** (36% in round 2)

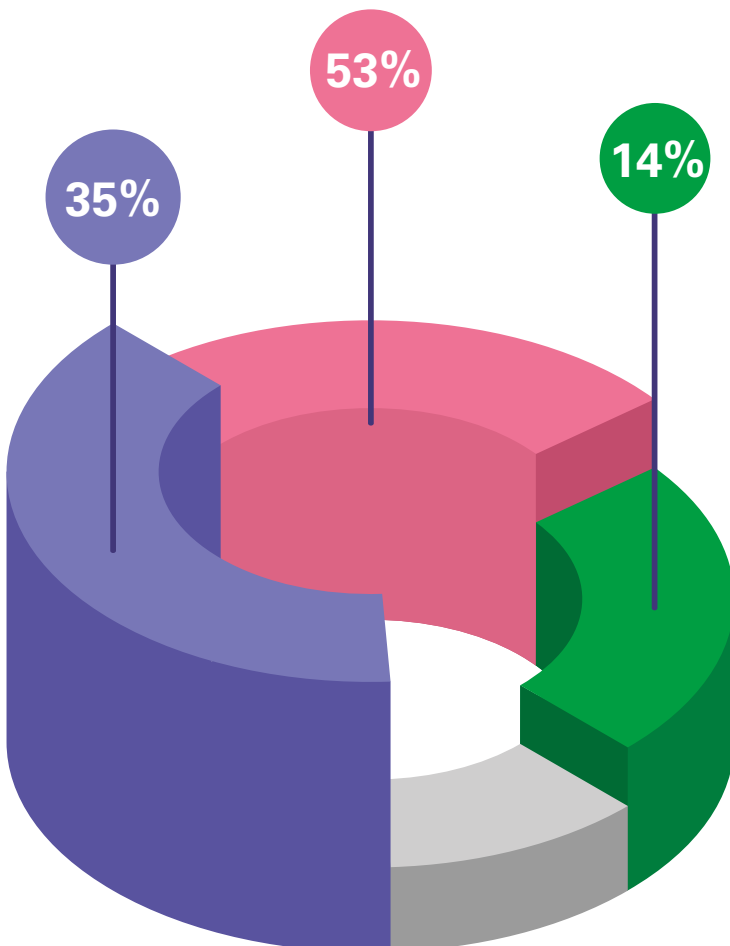
The economic impacts of COVID-19 continue to be prominent both in worsening conditions that have already occurred as well as worry about future situations. Across COVID-19 analyses, economic issues tend to correlate with other negative behaviours and attitudes, and as such can have negative indirect consequences beyond worsening finances at the household level.

Predictors

- **Female** respondents are **more likely** to **worry** about future economic consequences
- Economic worries correlate positively with perceived **probability** of **infection** and perceptions of **viral spread**



CHANGE IN FINANCIAL SITUATION



- No answer
- Improved
- Same
- Worse

Resilience



Findings

- The levels of resilience have not changed significantly through the data collection period
- **Around a half** of respondents continue to report **some issues** with resilience, particularly on **making it through stressful events** (61%)

Issues with resilience continue to be present among the respondents. Working towards improving these is important for the ability of people to sustain the ongoing hardship as well as bounce back, especially those affected by COVID-19.

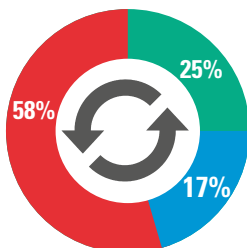
Predictors

- **Resilience** is higher among **healthcare workers** and lower among those **trust the medical sector**

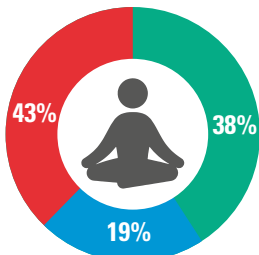
RESILIENCE



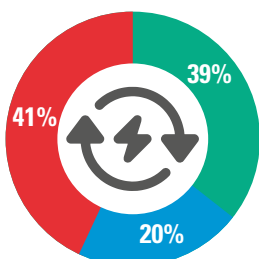
It does not take me long to recover from a stressful event



It is hard for me to snap back when something bad happens



I have a hard time making it through stressful events

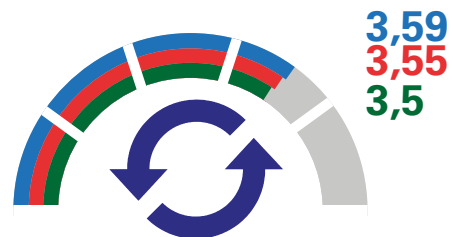


RESILIENCE

Rated on scales ranging from 1 (strongly disagree) to 5 (strongly agree). Mean values and 95% confidence intervals.

01.12.2020 25.12.2020 05.02.2021

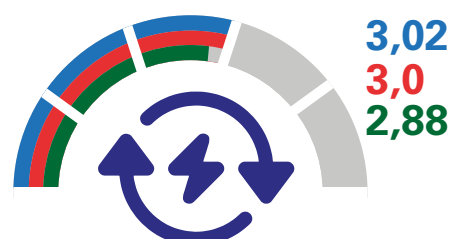
It does not take me long to recover from a stressful event



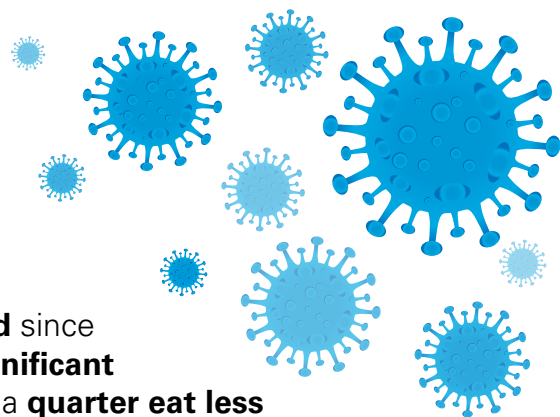
It is hard for me to snap back when something bad happens



I have a hard time making it through stressful events



Negative pandemic behaviours



Findings

- The level of pandemic behaviours have **slightly increased** since December, but the changes are **mostly not statistically significant**
- **Almost half** of respondents **exercise less** than normally, a **quarter eat less healthy**, and a **tenth smoke** and **drink more**
- **Health service avoidance** remains present for a **significant minority** as **32%** have **postponed vaccinations** and **22%** have **avoided the doctor**, whereas **27%** have **self-medicated**
- **44%** have **avoided** people based on their **ethnicity**

Negative pandemic behaviours continue to be high both in relation to less healthy lifestyles and health-seeking. These may have negative impacts on public health in the long term.

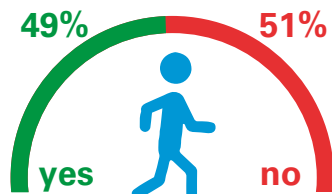
Predictors

- Exercising less is more common among **older** respondents
- **Urban** respondents are more likely to **exercise less** and eat **worse food**
- **Men** are highly more likely to consume **more alcohol** and **cigarettes**
- People who have **high risk perceptions** and **consume media frequently** have **less** healthy lifestyles

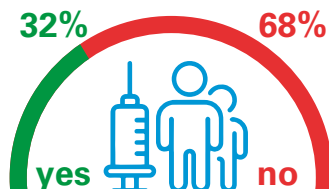
PANDEMIC BEHAVIOR

Results from recent survey.

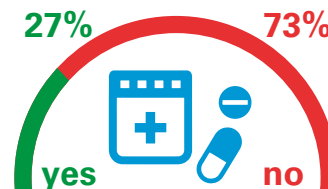
Exercise less than usual



Postponed vaccination for myself or my child



Buy drugs i heard helping againts COVID-19



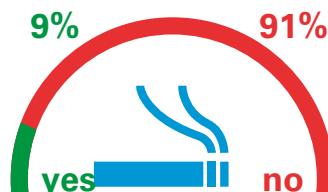
Eat more unhealthy food than usual



Avoid going doctor



Smoked more



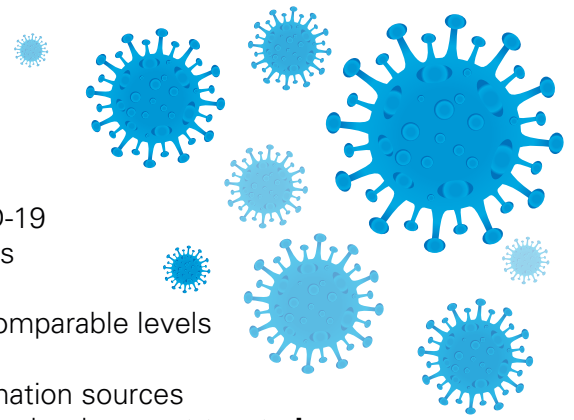
Drink more alcohol than usual



SECTION 5: **Media use and trust**



Information sources



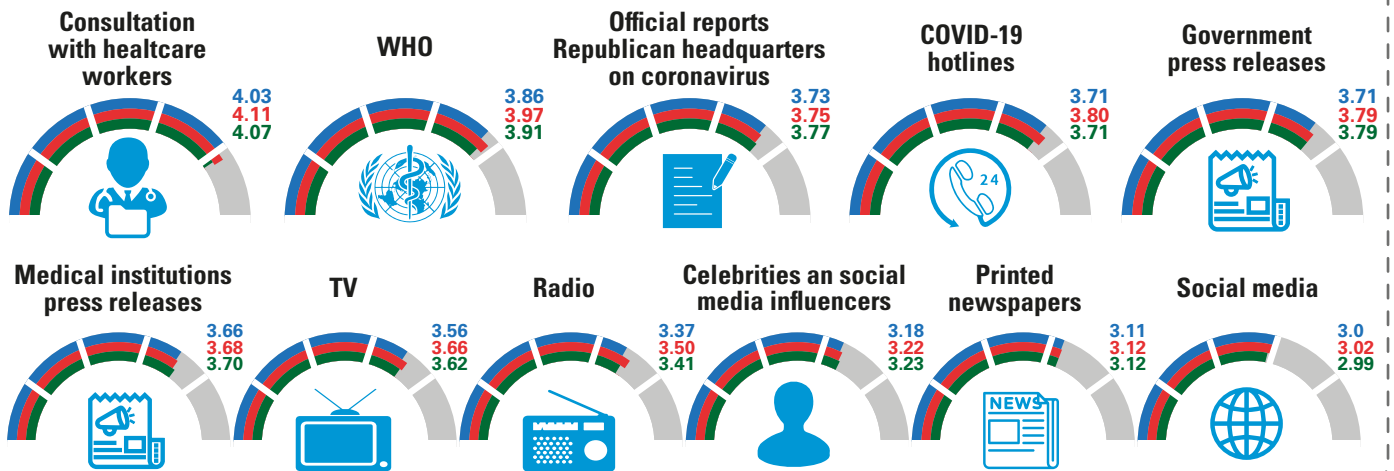
Findings

- Levels of **active interest** and **information searches** on COVID-19 remain at similar levels to rounds 1 and 2 with **50%** of respondents **searching for information often or sometimes**
- Perceptions of **media hype** around COVID-19 also remain at comparable levels with **46%** seeing **high levels of hype**
- No statistically significant changes were found in trust in information sources
- **Healthcare workers**, the **WHO**, and **official reports** continue to be the **most trusted sources**, and **social media**, **printed newspapers**, and celebrities/influencers the **least** trusted

TRUST IN INFORMATION SOURCES

Rated on scales ranging from 1 (very little trust) to 5 (great deal of trust). Mean values and 95% confidence intervals

01/12/2020 25/12/2020 05/02/2021



FREQUENCY SEARCHING FOR INFORMATION ABOUT CORONA VIRUS / COVID-19

Mean values and 95% confidence intervals

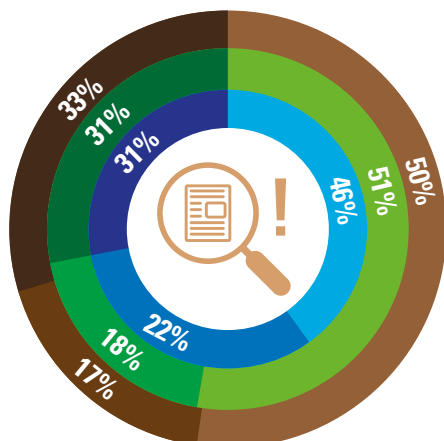
1/12/2020



25/12/2020



25/12/2020



MEDIA HYPE

Mean values and 95% confidence intervals

1/12/2020



25/12/2020



25/12/2020

