NORTHEAST SYRIA: COVID-19 Knowledge, Attitudes and Practices (KAP) Survey, August - September 2020 (Round 4)

CONTEXT AND METHODOLOGY

As of 6 October, 1,998 people have tested positive for COVID-19 in Northeast Syria (NES), including 503 recoveries and 71 fatalities.[1] Reports from the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) indicate that the majority of newly confirmed cases in NES (53%) are in Al-Hasakeh, with upward trends in other areas as well.[1] Widespread community transmission, augmented by limited adherence to preventative measures, enforcement of those measures, and under-reporting due to social stigma, add to the compounding challenges of the COVID-19 response in NES.[1]

To this end, the REACH Syria team has developed and continues to build on a knowledge, attitudes and practices (KAP) survey with relevant humanitarian clusters and working groups to assess the level of understanding of preventive measures against COVID-19. The goal of this survey is to understand the gaps that exist in the knowledge, attitudes, and practices (KAP) of the Syrian population, to provide partners with information to find ways to fill the gaps. Due to logistical and technical limitations, Round 4 does not use a panel survey approach, and has collected data from new respondents unlike in the previous three rounds. This factsheet presents descriptive statistics from the fourth round of the KAP survey, conducted by REACH in Al-Hasakeh governorate from the 30 August to 7 September 2020. Data was collected from 250 respondents from Al-Hasakeh. Descriptive statistics for all previous survey rounds are available here, and include each specific KAP indicator, disaggregated by governorate, sex, and rural/urban population.

Data for this survey was collected using a non-probability sampling framework, and survey locations are selected based on REACH field team capacity. Enumerators identified respondents through their networks and, from references of other respondents (snowballing), aimed to include respondents from a wide range of ages, socioeconomic backgrounds, and living situations. Loose quotas for male and female respondents were established before data collection to guide enumerators. In the analysis phase, the sample is calibrated against an existing household survey to increase its representativeness. Readers can learn more about the calibration method in the appendix at the end of the factsheet.

LIMITATIONS

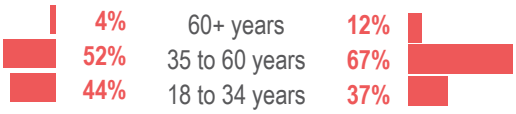
Due to the methodology used, findings are not statistically representative and should only be considered as indicative of the situation in assessed areas. The rapidly evolving context in the assessed areas, especially with regards to the COVID-19 situation, also means that findings are only indicative of the situation at the time the data was collected (30 August to 7 September 2020). Due to logistical limitations, REACH was able to collect a sample size of only 250 respondents from small and medium sized communities, all located in Al-Hasakeh governorate. Accordingly, Round 4 data with respect to NES governorates beyond Al-Hasakeh are unavailable. As a result, the following factsheet only presents the breakdown of the data by gender, and not by urban and rural disaggregation.

KEY FINDINGS

- **Fifty percent (50%) of respondents reported incorrectly that everyone who gets COVID-19 shows symptoms.**
- **Most respondents were able to correctly identify fever (94%) and cough (69%) as COVID-19 symptoms.**
- **A majority (89%) of respondents reported that COVID-19 is generating discrimination among specific groups of people.**
- **Ninety-six percent (96%) of men and 95% of women reported they had taken some action to prevent the spread of COVID-19.**
- **Fifty-five percent (55%) of men and 61% of women reported they face barriers in taking preventive measures to the mitigate risk of contracting COVID-19.**
- **Ninety-six percent (96%) of respondents reported that they have access to a face mask.**

Demographics

Proportion of survey respondents by age and gender:



Proportion of survey respondents by chronic disease status:

13% Respondents with chronic disease

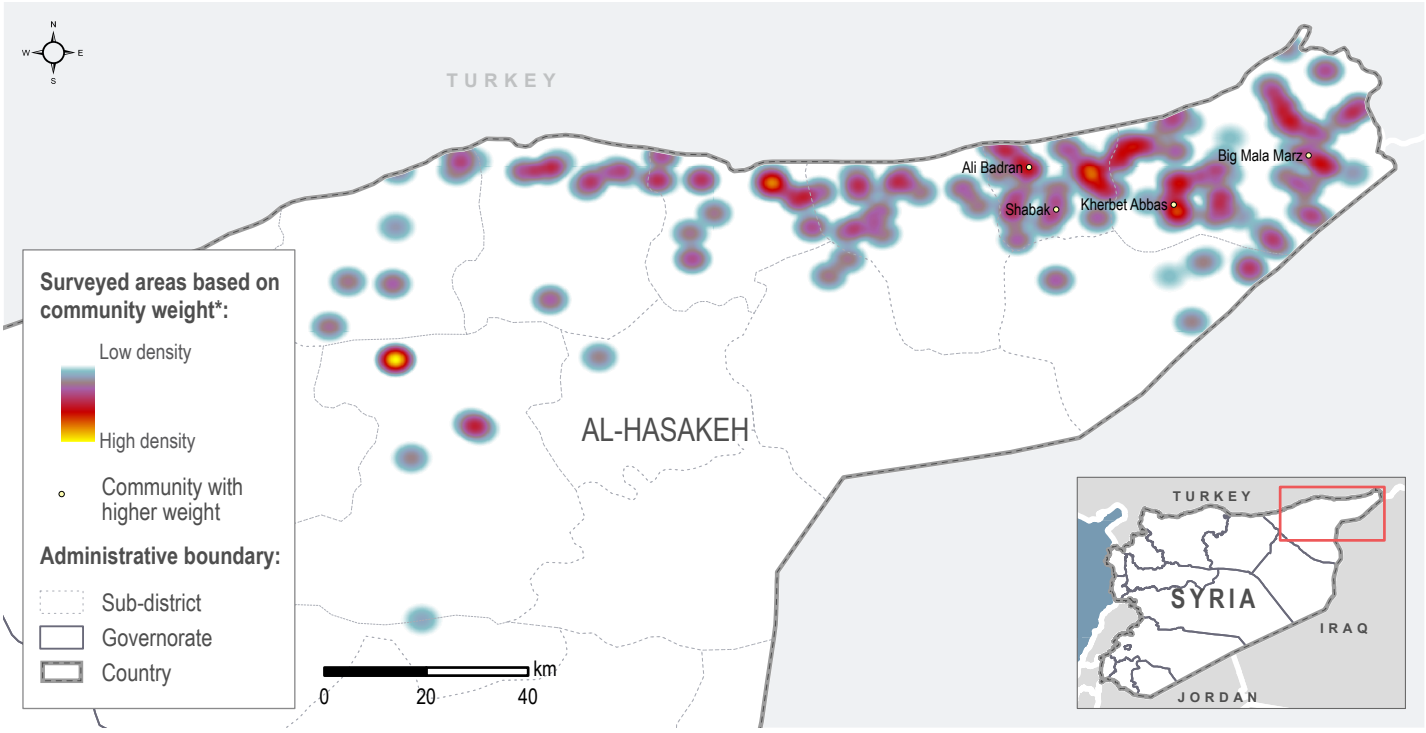
87% Respondents without chronic disease

Proportion of survey respondents by gender

40% Female

60% Male

COVERAGE AREA



* This heat map displays the relative density of surveys, using a color scheme ranging from cool (low density) to hot (high density). For this heat map, a weight generated from a generalized regression estimator was applied, and densities represent the weighted survey population. Applying a weight means that survey responses were adjusted to match the proportions of a pre-existing, representative dataset so that the survey more accurately represents the population of interest.

Endnotes

The complete northeast Syria KAP dataset is available here.

1. Syrian Arab Republic: COVID-19 Response Update No. 11 - 7 October 2020 - World Health Organization (WHO) and the Office for the Coordination of Humanitarian Affairs (OCHA), in collaboration with humanitarian partners.
2. Respondents could select more than one answer; total may be greater than 100%.

CONTACT

Jimmie Braley,

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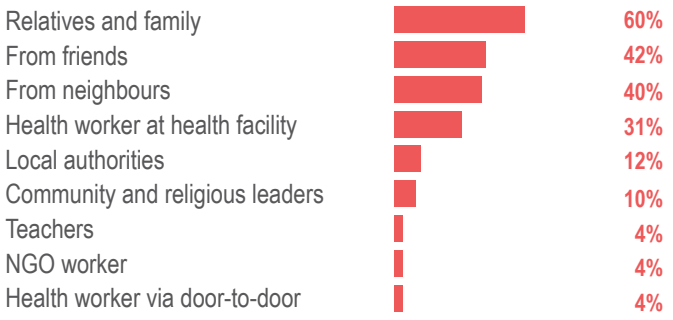
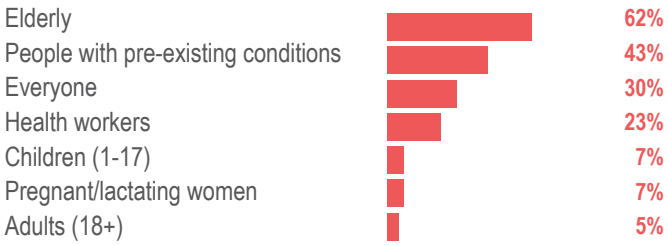
Results for Al-Hasakeh- Northeast Syria

COVID-19 Knowledge

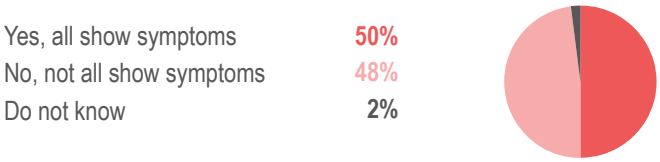
Proportion of respondents reporting the following sources from whom they receive most of their information about COVID-19:[2]



Survey respondents' views on which group of people is most at risk from getting seriously ill from COVID-19:[2]

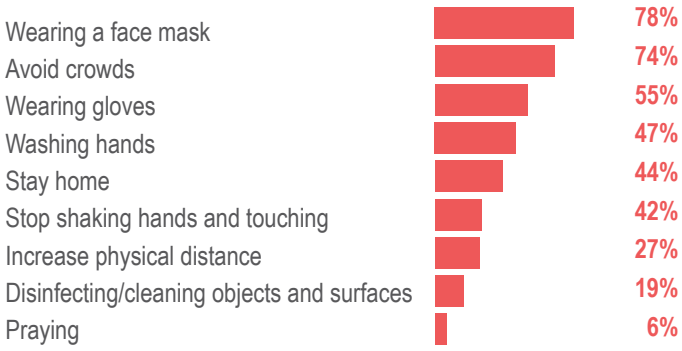


Survey respondents' views on whether all people with COVID-19 show symptoms:



Survey respondents' view on whether one can take measures to reduce the chance of getting COVID-19:

Of the 99%, proportion of respondents reporting the following possible prevention measures to reduce the risk of contracting COVID-19:[2]



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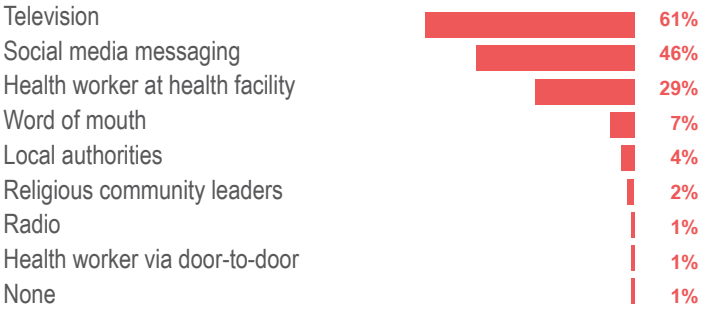
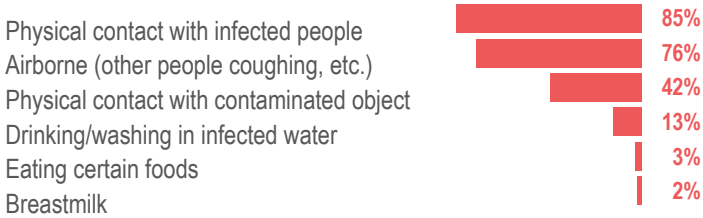
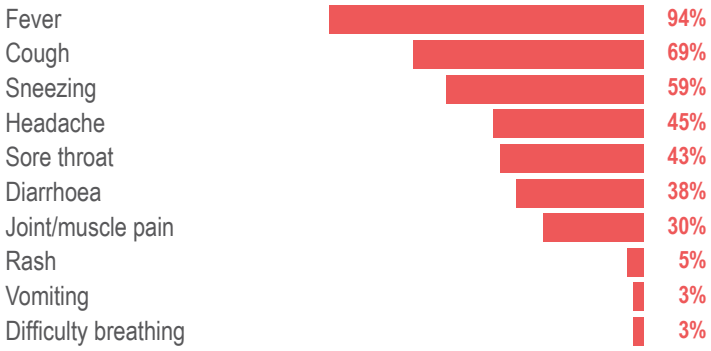


Proportion of respondents reporting the following methods of contracting COVID-19:[2]



Symptoms most commonly reported by respondents as related to COVID-19:[2]



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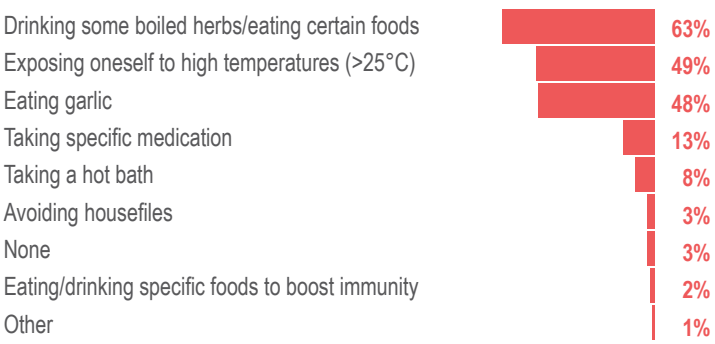
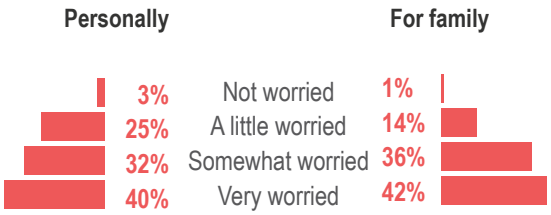


COVID-19 Attitudes

Respondents' degree of concern with regards to COVID-19:



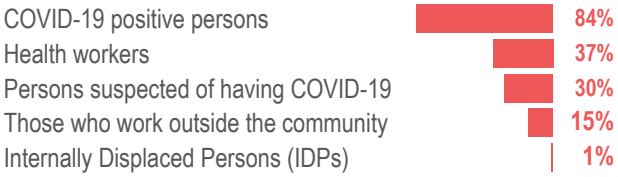
Respondents' estimations of the likelihood of contracting COVID-19 within the month following data collection:

Proportion of respondents who agree with the following statements:[2]

People should shake hands	6%
People should participate in social gatherings	10%
All shops, including non-essential ones, should remain open	59%
People should maintain distance while queuing in public places	98%

89% **of respondents believe that COVID-19 is generating discrimination against specific groups of people**

Of the 89% who reported there is discrimination, most commonly reported groups of people perceived to be likely to face



Respondents' assessment of danger posed by COVID-19 in comparison to other diseases:

	1 Common cold	2 Typhoid	3 Cancer
Less dangerous	0%	4%	52%
About the same	1%	10%	14%
More dangerous	98%	84%	33%
Don't know	0%	1%	1%

COVID-19 Practices

Proportion of respondents who had done the following in the week prior to data collection:[2]

Greeted someone with a handshake / hug	50%
Left the house	93%
Visited friends and family outside the home	81%
Left home to go to work	50%
Attended a large gathering	31%
Tried to keep distance of two metres from others when outside	49%
Washed hands more than normal	87%
Stayed home more than normal	68%

In case of contracting COVID-19, responses from respondents as to what they would do:[2]

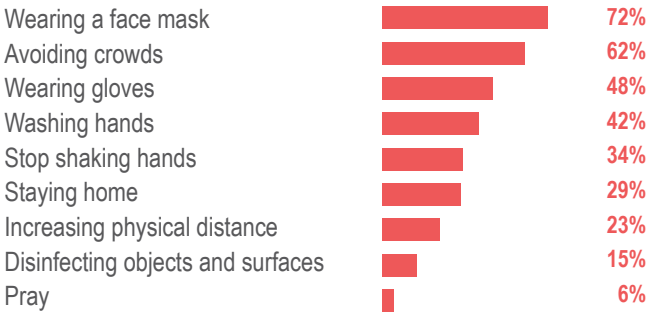
Do nothing/continue life as normal	0%
Stay at home	15%
Stay at home and isolate oneself from others	28%
Call a doctor/medical professional	43%
Go to doctor's office/clinic	28%
Go to hospital	28%
Pray	43%
Go to work even while sick	7%

80% **of respondents believe their employers are flexible with regard to COVID-19**

COVID-19 Practices

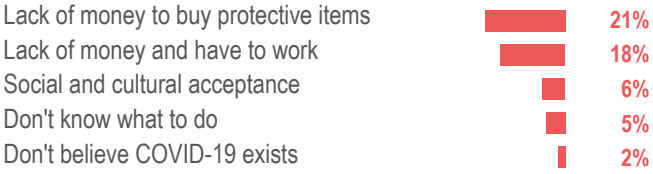
95% of respondents reported that they had undertaken preventive measures to mitigate the risk of contracting COVID-19

Of the 95%, proportion of respondents reporting the following possible prevention measures to reduce the risk of contracting COVID-19:[2]



43% of respondents reported that they face barriers in taking preventive measures to the mitigate risk of contracting COVID-19

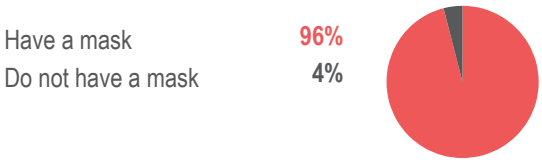
Of the 43%, proportion of respondents reporting on barriers that prevented them from taking preventive steps:[2]



89% of respondents use hand sanitizer if available before entering a public building

Face masks

Proportion of respondents who have a face mask:



Proportion of respondents who reported it was/would be possible to get a face mask through the following channels in the week prior to data collection:

I don't know	1%
Yes, in the market	84%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	1%
No, in market but too expensive	9%
No, in market but in insufficient quantities	4%
No, not available in the market	1%

Proportion of respondents who did not have a mask, and reported it was/would be possible to use alternatives for a mask in the week prior to data collection:

Homemade	59%
Reusing an old homemade mask	2%
Reusing an old mask	23%
Using a scarf as a mask	16%

Proportion of respondents who reported wearing a face mask in the following environments:[2]

When out of the house shopping	68%
When out of the house for work	43%
When visiting friends/relatives/neighbours in their house	17%
When participating in social gatherings	16%
When visiting friends and neighbours in public spaces	14%
When receiving guests in the house	8%
Never	6%
All the time	1%

Of those respondents not wearing a mask, proportion that reported the following reasons for not wearing a mask

Don't believe face masks are important/effective against COVID-19	0%
Wearing masks is too uncomfortable	3%
Children refuse to wear masks	0%
Other	4%

Proportion of respondents who reported it was/would be possible to get a respirator through the following channels in the past week prior to data collection:

I don't know	4%
Yes, in the market	37%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	0%
No, in market but too expensive	33%
No, in market but in insufficient quantities	9%
No, not available in the market	16%

Proportion of respondents who reported it was/would be possible to get a gloves through the following channels in the past week prior to data collection:

I don't know	2%
Yes, in the market	86%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	8%
No, in market but too expensive	2%
No, in market but in insufficient quantities	2%
No, not available in the market	0%

Endnotes

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Results for Al-Hasakeh - Male

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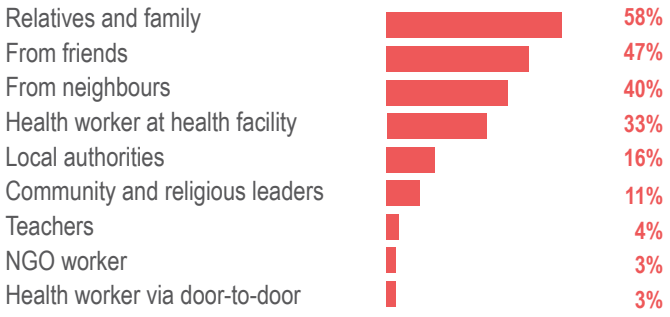

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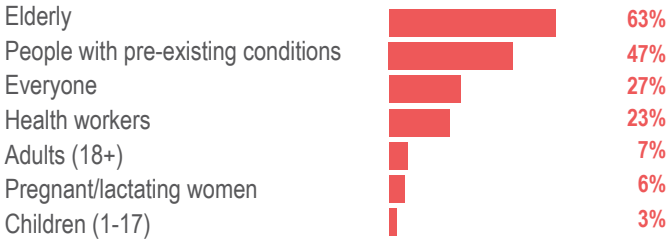

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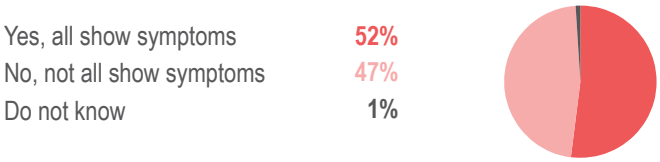

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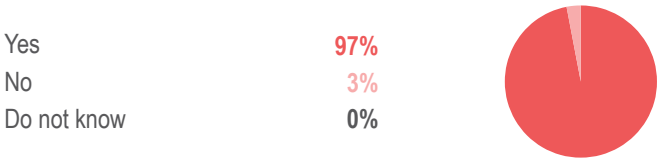

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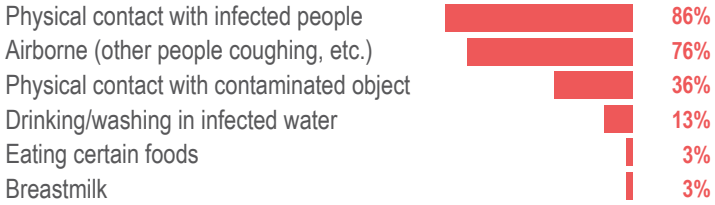
Proportion of respondents reporting the following methods of contracting COVID-19:[2]



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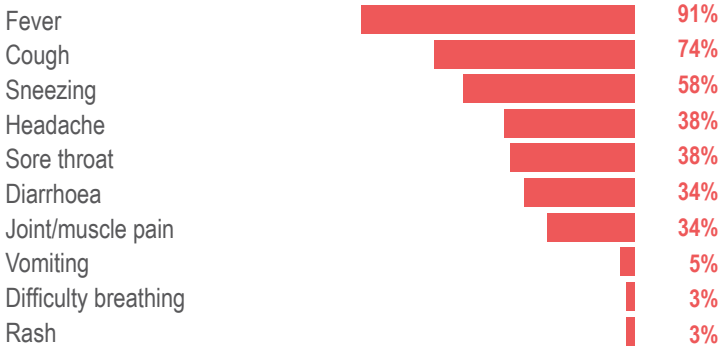

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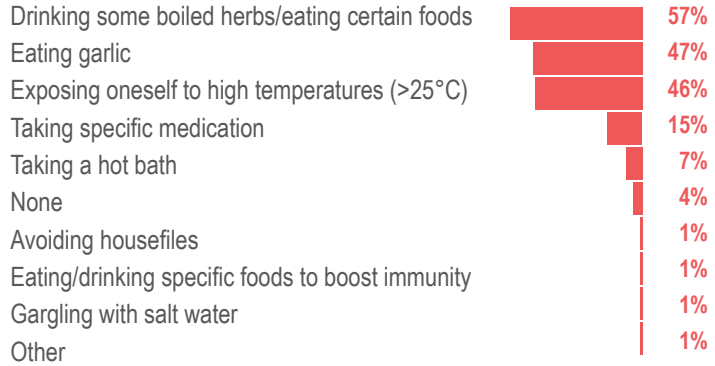
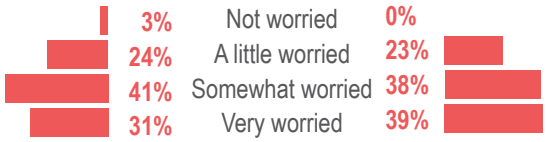


Al-Hasakeh - Male

COVID-19 Attitudes

Respondents' degree of concern with regards to COVID-19:



Respondents' estimation of the likelihood of contracting COVID-19 within the month following data collection:

Proportion of respondents who agree with the following statements:[2]

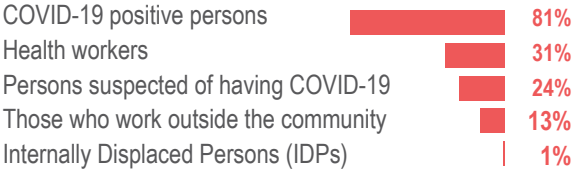
People should shake hands	6%
People should participate in social gatherings	12%
All shops, including non-essential ones, should remain open	56%
People should maintain distance while queuing in public places	97%

86% **of respondents believe that COVID-19 is generating discrimination against specific groups of people**

Respondents' assessment of danger posed by COVID-19 in comparison to other diseases:

	1 Common cold	2 Typhoid	3 Cancer
Less dangerous	0%	2%	48%
About the same	2%	9%	18%
More dangerous	98%	87%	33%
Don't know	0%	2%	1%

Of the 86% who reported there is discrimination, most commonly reported groups of people perceived to be likely to face



COVID-19 Practices

Proportion of respondents who had done the following in the week prior to data collection:

Greeted someone with a handshake / hug	59%
Left the house	96%
Visited friends and family outside the home	87%
Left home to go to work	70%
Attended a large gathering	33%
Tried to keep distance of two metres from others when outside	54%
Washed hands more than normal	83%
Stayed home more than normal	56%

In case of contracting COVID-19, responses from respondents as to what they would do:[2]

Do nothing/continue life as normal	1%
Stay at home	17%
Stay at home and isolate oneself from others	22%
Call a doctor/medical professional	32%
Go to doctor's office/clinic	28%
Go to hospital	47%
Go to work even while sick	10%

80% **of respondents believe their employers are flexible with regard to COVID-19**

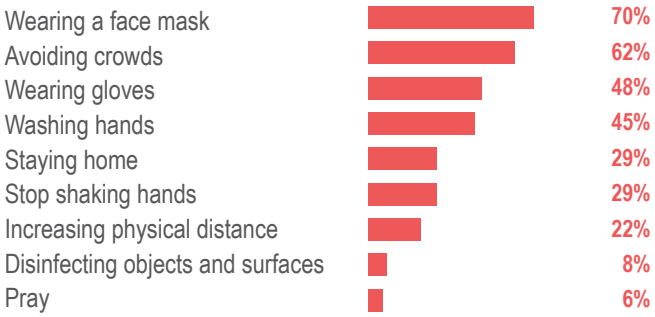
Al-Hasakeh - Male

COVID-19 Practices

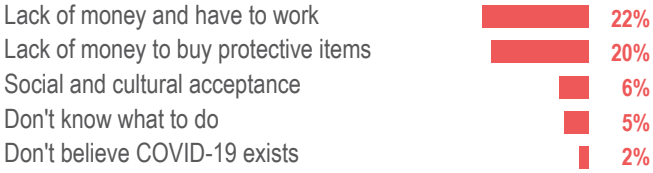
96% of respondents reported that they had undertaken preventive measures to mitigate the risk of contracting COVID-19

55% of respondents reported that they face barriers in taking preventive measures to the mitigate risk of contracting COVID-19

Of the 96%, proportion of respondents reporting the following possible prevention measures to reduce the risk of contracting COVID-19:[2]



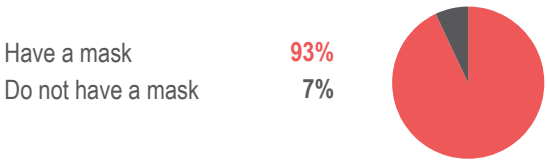
Of the 55%, proportion of respondents reporting on barriers that prevented them from taking preventive steps:[2]



88% of respondents use hand sanitizer if available before entering a public building

Face masks

Proportion of respondents who have a face mask:



Proportion of respondents who reported it was/would be possible to get a face mask through the following channels in the past week prior to data collection:

I don't know	1%
Yes, in the market	83%
Yes, distributed by authorities/NGOs	1%
Yes, in the market distributed by authorities/NGOs	1%
No, in market but too expensive	8%
No, in market but in insufficient quantities	8%
No, not available in the market	0%

Proportion of respondents who did not have a mask, and reported it was/would be possible to use alternatives for a mask in the week prior to data collection:

Homemade	6%
Reusing an old homemade mask	1%
Reusing an old mask	6%
Using a scarf as a mask	1%

Proportion of people who wear their Face masks in specific environments:[2]

When out of the house shopping	67%
When out of the house for work	57%
When visiting friends/relatives/neighbours in their house	16%
When participating in social gatherings	19%
When visiting friends and neighbours in public spaces	13%
When receiving guests in the house	9%
Never	4%
All the time	3%

Of those respondents not wearing a mask, proportion that reported the following reasons for not wearing a mask

Don't believe face masks are important/effective against COVID-19	0%
Wearing masks is too uncomfortable	4%
Children refuse to wear masks	1%
Other	0%

Al-Hasakeh - Male

COVID-19 Practices

Proportion of respondents who reported it was/would be possible to get a respirator through the following channels in the past week prior to data collection:

I don't know	2%
Yes, in the market	38%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	0%
No, in market but too expensive	30%
No, in market but in insufficient quantities	13%
No, not available in the market	18%

Proportion of respondents who reported it was/would be possible to get a gloves through the following channels in the past week prior to data collection:

I don't know	2%
Yes, in the market	86%
Yes, distributed by authorities/NGOs	1%
Yes, in the market distributed by authorities/NGOs	0%
No, in market but too expensive	5%
No, in market but in insufficient quantities	3%
No, not available in the market	2%

Endnotes

The complete northeast Syria KAP dataset is available here.

1. Syrian Arab Republic: COVID-19 Response Update No. 11 - 7 October 2020 - World Health Organization (WHO) and the Office for the Coordination of Humanitarian Affairs (OCHA), in collaboration with humanitarian partners.
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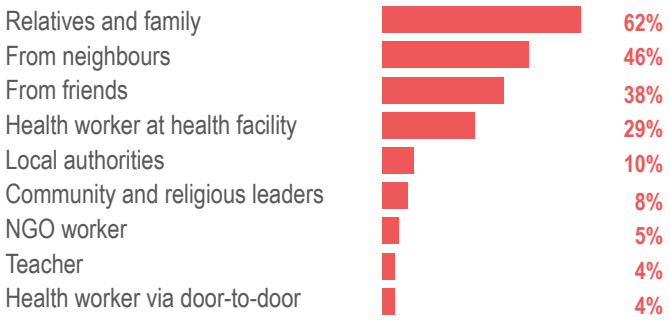
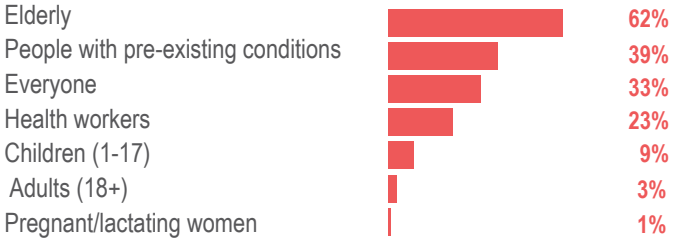
Results for Al-Hasakeh - Female

COVID-19 Knowledge

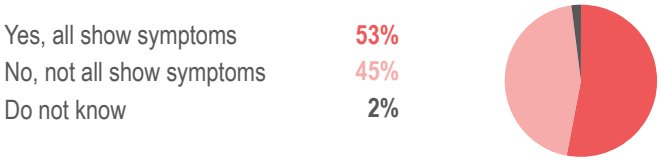
Proportion of respondents reporting the following sources from whom they receive most of their information about COVID-19:[2]



Survey respondents' views on which group of people is most at risk from getting seriously ill from COVID-19:[2]

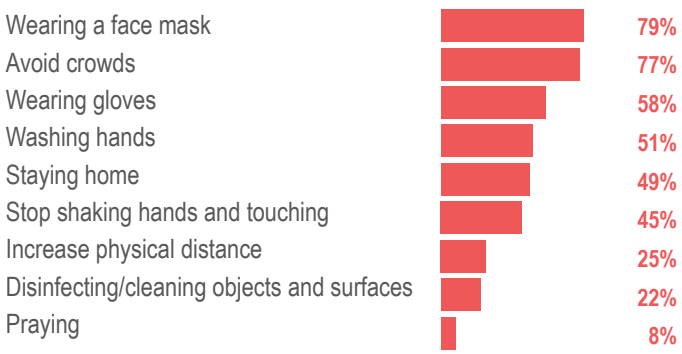


Survey respondents' views on whether all people with COVID-19 show symptoms:



Survey respondents' view on whether one can take measures to reduce the chance of getting COVID-19:

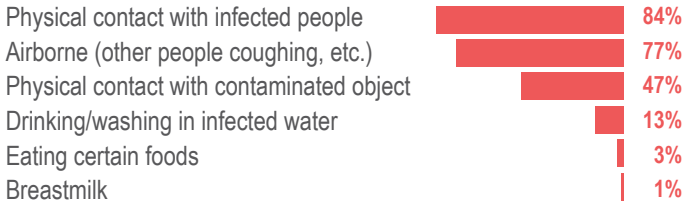
Proportion of respondents reporting the following possible prevention measures to reduce the risk of contracting COVID-19: [2]



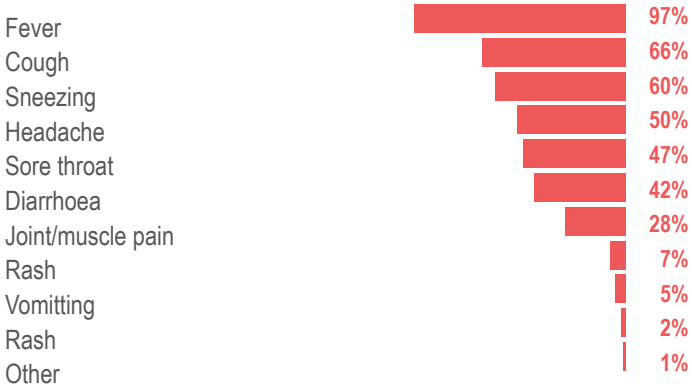
Proportion of respondents reporting the following sources from which they receive most of their information about COVID-19:[2]

Proportion of respondents reporting the following as the most trusted sources to give them reliable information about COVID-19:[2]

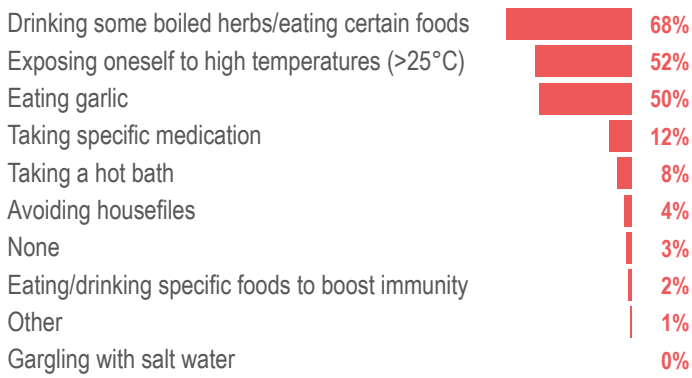
Proportion of respondents reporting the following methods of contracting COVID-19:[2]



Symptoms most commonly reported by respondents as related to COVID-19:[2]



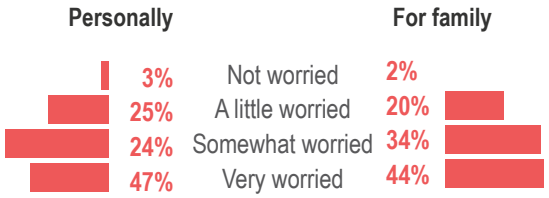
Myths related to preventative measures as heard by respondents:[2]



Al-Hasakeh - Female

COVID-19 Attitudes

Respondents' degree of concern with regards to COVID-19:



Respondent estimations of the likelihood of contracting COVID-19 within the month following data collection:

Proportion of respondents who agree with the following statements:

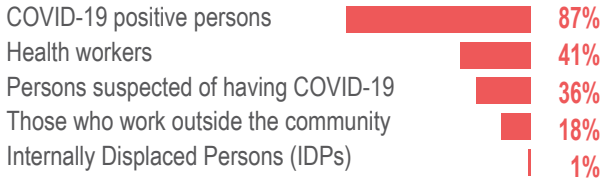
People should shake hands	6%
People should participate in social gatherings	9%
All shops, including non-essential ones, should remain open	60%
People should maintain distance while queuing in public places	98%

91% **of respondents believe that COVID-19 is generating discrimination against specific groups of people**

Respondents' assessment of danger posed by COVID-19 in comparison to other diseases:

	1 Common cold	2 Typhoid	3 Cancer
Less dangerous	0%	5%	56%
About the same	1%	11%	11%
More dangerous	98%	82%	32%
Don't know	0%	1%	1%

Of the 91% who reported there is discrimination, most commonly reported groups of people perceived to be likely to face



COVID-19 Practices

Proportion of respondents who had done the following in the week prior to data collection:[2]

Greeted someone with a handshake / hug	37%
Left the house	90%
Visited friends and family outside the home	75%
Left home to go to work	31%
Attended a large gathering	28%
Tried to keep distance of two metres from others when outside	56%
Washed hands more than normal	91%
Stayed home more than normal	77%

In case of contracting COVID-19, responses from respondents as to what they would do:[2]

Do nothing/continue life as normal	0%
Stay at home	14%
Stay at home and isolate oneself from others	32%
Call a doctor/medical professional	24%
Go to doctor's office/clinic	29%
Go to hospital	40%
Go to work even while sick	6%
Pray	1%

72% **of respondents believe their employers are flexible with regard to COVID-19**

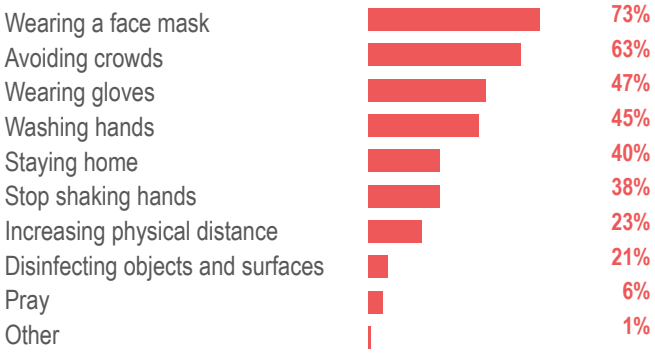
Al-Hasakeh - Female

COVID-19 Practices

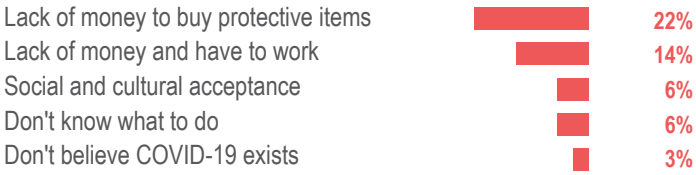
95% of respondents reported that they had undertaken preventive measures to mitigate the risk of contracting COVID-19

61% of respondents reported that they face barriers in taking preventive measures to the mitigate risk of contracting COVID-19

Of the 95%, proportion of respondents reporting the following possible prevention measures to reduce the risk of contracting COVID-19:[2]



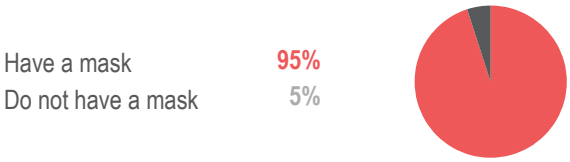
Of the 61%, proportion of respondents reporting on barriers that prevented them from taking preventive steps:[2]



91% of respondents use hand sanitizer if available before entering a public building

Face masks

Proportion of respondents who have a face mask:



Proportion of respondents who reported it was/would be possible to get a face mask through the following channels in the past week prior to data collection:

I don't know	1%
Yes, in the market	84%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	1%
No, in market but too expensive	10%
No, in market but in insufficient quantities	2%
No, not available in the market	2%

Proportion of respondents who did not have a mask, and reported it was/would be possible to use alternatives for a mask in the week prior to data collection:

Homemade	9%
Reusing an old homemade mask	1%
Reusing an old mask	6%
Using a scarf as a mask	3%

Proportion of people who wear their face masks in specific environments:

When out of the house shopping	69%
When out of the house for work	31%
When visiting friends/relatives/neighbours in their house	17%
When participating in social gatherings	14%
When visiting friends and neighbours in public spaces	15%
When receiving guests in the house	8%
Never	7%
All the time	0%

Of those respondents not wearing a mask, proportion that reported the following reasons for not wearing a mask

Don't believe face masks are important/effective against COVID-19	0%
Wearing masks is too uncomfortable	2%
Children refuse to wear masks	0%
Other	7%

Al-Hasakeh - Female

COVID-19 Practices

Proportion of respondents who reported it was/would be possible to get a respirator through the following channels in the past week prior to data collection:

I don't know	4%
Yes, in the market	37%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	0%
No, in market but too expensive	37%
No, in market but in insufficient quantities	7%
No, not available in the market	15%

Proportion of respondents who reported it was/would be possible to get a gloves through the following channels in the past week prior to data collection:

I don't know	2%
Yes, in the market	85%
Yes, distributed by authorities/NGOs	0%
Yes, in the market distributed by authorities/NGOs	0%
No, in market but too expensive	10%
No, in market but in insufficient quantities	1%
No, not available in the market	3%

Endnotes

The complete northeast Syria KAP dataset is available here.

1. Syrian Arab Republic: COVID-19 Response Update No. 11 - 7 October 2020 - World Health Organization (WHO) and the Office for the Coordination of Humanitarian Affairs (OCHA), in collaboration with humanitarian partners
2. Respondents could select more than one answer; total may be greater than 100%.

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Appendix A - Methodology

Calibration Methodology

Northeast Syria

Respondents for the survey were recruited through a non-probability sample. The survey was then calibrated using a generalized regression estimator. Calibration increases the weight of some respondents and decreases the weight of other respondents in reference to a pre-existing, representative dataset so that the survey more accurately represents the population of interest.

The survey was calibrated on four variables: gender, age, governorate, and community size. Several other variables, namely shelter status and number of household members working, were considered but the survey proportions for these variables were judged acceptable.

Three categories for age were utilized: 18 – 34, 35 – 59, and 60 and older. Communities were categorized as large (> 20,000 inhabitants), medium (20,000 – 2,000 inhabitants), and small (<2,000 inhabitants). Estimates for gender and age were taken from an unpublished representative survey for NES. Population estimates were taken from HNAP's February Mobility and Needs Monitoring, which is available upon request from HNAP.

After calibration, the survey proportions for the calibration variables (gender, age, governorate, and community size) exactly matched the estimated population proportions. Proportions were also compared to several benchmark variables: proportions for marital status and displacement status (Internally Displaced Persons (IDPs) v. host community) were within one percentage point of population estimates and proportions for chronic illness were within approximately 3 percentage points.

The code for the calibration is available upon request. For background information on using generalized regression estimators to calibrate survey data see Thomas Lumley, Complex Surveys: A Guide to Analysis Using R, p. 135 – 65. For an overview of approaches to weighing non-probability samples see Carina Cornesse et al., "A Review of Conceptual Approaches and Empirical Evidence on Probability and Non-probability Sample Survey Research," Journal of Survey Statistics and Methodology, February 2020, p. 4–36. For a less technical introduction see Andrew Mercer, Arnold Lau, and Courtney Kennedy, "For Weighing Online Opt-in Samples, What Matters Most?" Pew Research Center, January 2018.

Participate in our 2020 User Survey

REACH is conducting a quick 15 question survey to receive your feedback on REACH Syria assessments and information products. Your inputs will enable us to improve our work and maximize the usefulness for actors working in the Syria response. The survey is anonymous and can be accessed until the 22nd of October 2020. The survey should only take 5-10 minutes to complete.

REACH thanks you for your valuable feedback.

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