Responding to COVID-19: Highlights of a Survey in UGANDA

Summary
- Almost all Ugandans know about COVID-19 and basic understanding about transmission and the importance of regular hand washing is high. A sizeable minority are keen for more information, which might help address significant belief in rumors and misinformation.
- There is strong support for government response and high levels of trust in information coming from it
- There is strong agreement with interventions to stop the spread of the virus including social distancing and closure of public places.
- Ugandans believe that COVID-19 will be a big problem for their country and that they would be seriously impacted but the proportion of those at low risk is higher than those who see themselves at high risk.
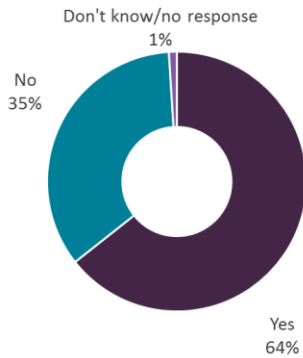- Television and radio are important media channels in Uganda.

Background
Public health social measures (PHSMs) are an important strategy to delay and reduce the magnitude of COVID-19. PHSMs particularly those that restrict movement or entail the closure of services, can place a significant burden on populations. The effective implementation of PHSMs will require public support and compliance. Hence, this survey was conducted to assess public support for, and the likely social impacts of PHSMs in Uganda.

Key Findings of the Survey

Awareness of COVID-19 is high – but an important minority seek more information
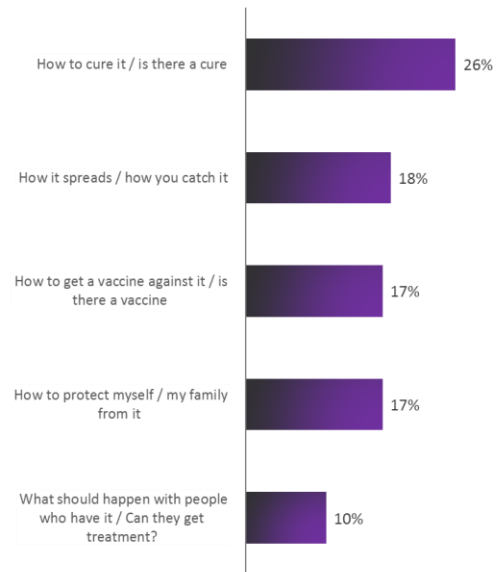- Awareness of COVID-19 is almost universal at 99%.
- The most common associations with COVID-19 are 'a sickness, illness, or disease' (40%), 'a virus' (40%) or 'killer, deadly disease / serious' (37%). Although to a lesser degree is it also see as 'like a cold or the flu' (29%) or 'a respiratory illness, affects lungs or breathing, causes pneumonia' (15%).
- The perceived symptoms of COVID-19 are a dry cough (84%), flu/cold like sickness (79%), and fever (74%). Four in ten also mention difficulty breathing, shortness of breath (41%).
- Two in three (64%) of Ugandans feel they have enough information about it.
- Information needs are spread across a range of issues starting with 'how to cure it / is there a cure' (26%), 'how it spreads / how you catch it' (18%), 'how to get a vaccine against it / is there a vaccine' (17%) and 'how to protect myself / my family from it' (17%).

Q10. Do you feel you currently have enough information about the coronavirus/Covid-19 situation?

Q11. What are the two things about it that you would like most to have more information about? [Top five mentions]

Don't know/no response
1%

No
35%

Yes
64%

% who feel they have enough information	
Gender:	
Male	66
Female	61
Age:	
18-25 years	56
26-35 years	64
36-45 years	68
46-55 years	72
56 and older	71
Monthly Household Income:	
$0-100	59
$101-200	70
$201-500	67
$501+	78

How to cure it / is there a cure — 26%

How it spreads / how you catch it — 18%

How to get a vaccine against it / is there a vaccine — 17%

How to protect myself / my family from it — 17%

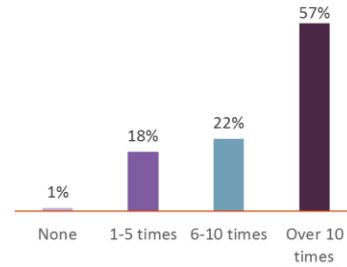What should happen with people who have it / Can they get treatment? — 10%

The basic value and benefit of reducing close contact transmission and the importance of handwashing is seen as credible. Belief in various rumors is also held by a significant proportion

- Almost all think COVID-19 can be spread by touch, kiss, sneeze, or cough (96%, including 82% thinking this is 'definitely true') and that washing hands helps prevent getting it (94% including 70% 'definitely true'). There is significant majority acceptance that infected people may not show symptoms for 14 days (78%) and two in three (65%) believe that people who have recovered from it should be avoided to prevent spreading it.
- Close to seven in ten (68%) believe the statement that you can prevent it by drinking lemon and vitamin C to be true, while one in two believe 'hot climate prevents spread' (46%). One in three (32%) believes it can be cured with garlic and one in ten Ugandans believe that Africans 'cannot get it' (11%).
- Almost three in five (57%) stated they washed their hands 10+ times in the day prior to their interview.

Q14. I'm going to read things people have said about coronavirus or Covid-19. Please tell me if you think each is definitely true, probably true, probably false, or definitely false. (%)
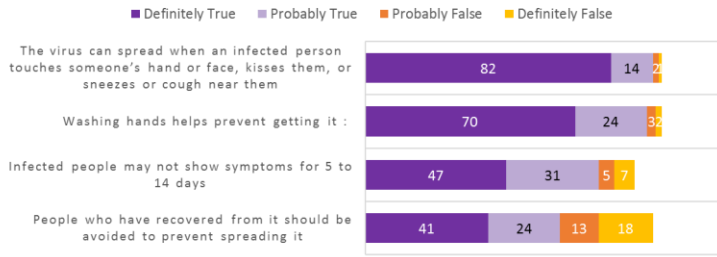
Q40. Yesterday, how many times did you wash your hands with soap or use hand sanitizer?

Legend: ■ Definitely True ■ Probably True ■ Probably False ■ Definitely False

	Definitely True	Probably True	Probably False	Definitely False
The virus can spread when an infected person touches someone's hand or face, kisses them, or sneezes or cough near them	82	14	2	
Washing hands helps prevent getting it :	70	24	3	2
Infected people may not show symptoms for 5 to 14 days	47	31	5	7
People who have recovered from it should be avoided to prevent spreading it	41	24	13	18

Q40 bar chart: None 1%, 1-5 times 18%, 6-10 times 22%, Over 10 times 57%

| Q14. Share who agree definitely/probably true (%)	Male	Female	18-25 years	26-35 years	36-45 years	46-55 years	56 and older	$0-100	$101-200	$201-500	$501+
The virus can spread when an infected person touches someone's hand or face, kisses them, or sneezes or cough near them	96	96	97	94	97	96	96	97	94	97	96
Washing hands helps prevent getting it	94	93	94	92	95	95	90	95	93	91	90
Infected people may not show symptoms for 5 to 14 days	79	77	78	78	79	80	75	76	79	81	90
People who have recovered from it should be avoided to prevent spreading it	65	65	68	62	68	63	58	67	68	58	58

89% of Ugandans perceive COVID-19 as a problem for their country; 36% see themselves at very high or high risk of contracting COVID-19.

- Two in three (66%) anticipate that the Coronavirus will be a 'big problem' in their country, with only 3% expecting it will be 'not much of a problem.' There are no notable or consistent variations by age or gender.
- More Ugandans see themselves as low risk than those who see themselves as high risk (45% low risk versus 36% high risk). Younger Ugandans are less likely to perceive themselves at high risk (33%) than those who are older (46%).
- Even though the perception is that Ugandans are at low risk, there is a view that if they are infected, it would seriously affect their health (73% 'extremely/very seriously' vs. 22% 'somewhat/not very seriously'.
- The most commonly cited rationale for understanding the perceived effect on health is 'it could kill me/make me very sick' (54%), followed by a perception that 'it is serious' (28%).
- Three in five (62%) are confident about being able to immediately get the help they need versus one in three (35%) who are not confident.

Q5.Please indicate what you think your level of risk of catching coronavirus or Covid-19 is?

Don't know 3%
Very High 19%
High 17%
Medium 17%
Low 26%
Very low 19%
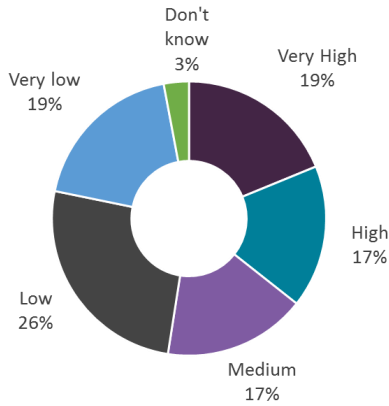
Q6.If you were infected by coronavirus or Covid-19, how seriously do you think it would affect your health?

Extremely seriously 44%
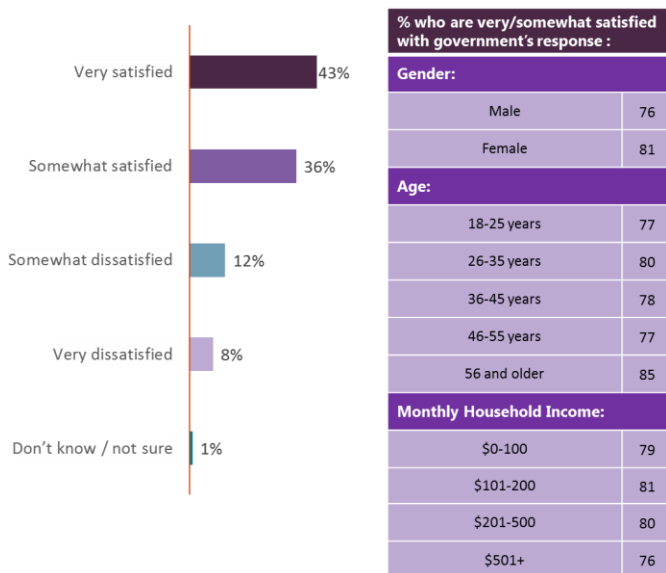Very seriously 29%
Somewhat seriously 16%
Not at all seriously 7%
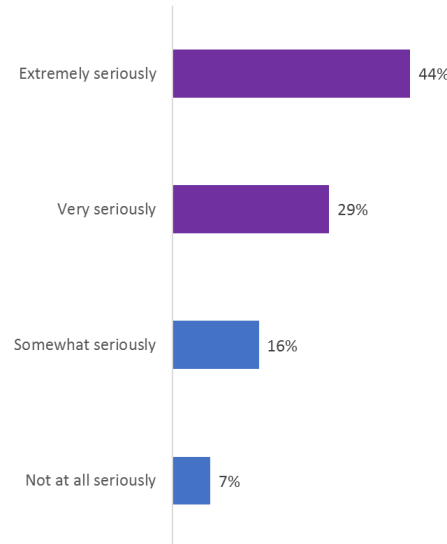
| % who think coronavirus would affect their health extremely seriously/very seriously:	
Gender:	
Male	73
Female	73
Age:	
18-25 years	70
26-35 years	73
36-45 years	75
46-55 years	80
56 and older	65
Monthly Household Income:	
$0-100	77
$101-200	74
$201-500	73
$501+	68

Perceptions of the governmental response to COVID-19 is leaning positive

- There is a relatively high degree of satisfaction with the government's response to COVID-19 with 79% satisfied, including 43% 'very satisfied'.
- These levels of satisfaction are reflected in trust in information from the government with 54% indicating they completely trust the information received and 27% mostly trusting it.

Q12.How satisfied are you with the government's response to coronavirus or Covid-19?

Very satisfied 43%
Somewhat satisfied 36%
Somewhat dissatisfied 12%
Very dissatisfied 8%
Don't know / not sure 1%

% who are very/somewhat satisfied with government's response :	
Gender:	
Male	76
Female	81
Age:	
18-25 years	77
26-35 years	80
36-45 years	78
46-55 years	77
56 and older	85
Monthly Household Income:	
$0-100	79
$101-200	81
$201-500	80
$501+	76

Q13.How much do you trust information from the government about the coronavirus or Covid-19?

Completely 54%
Mostly 27%
A little 14%
Not at all 3%
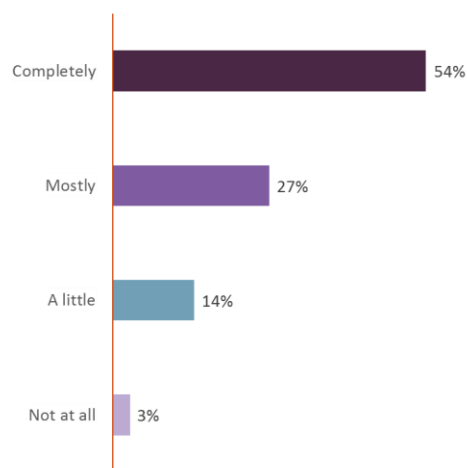
There is widespread support for personal Public health social measures (PHSMs)

- Almost all Ugandans support stopping handshake/kiss greetings (97%), with significant support for requiring those who have contact with infected people to self-isolate (83%) and those with COVID-19 to remain home until they are well (77%).
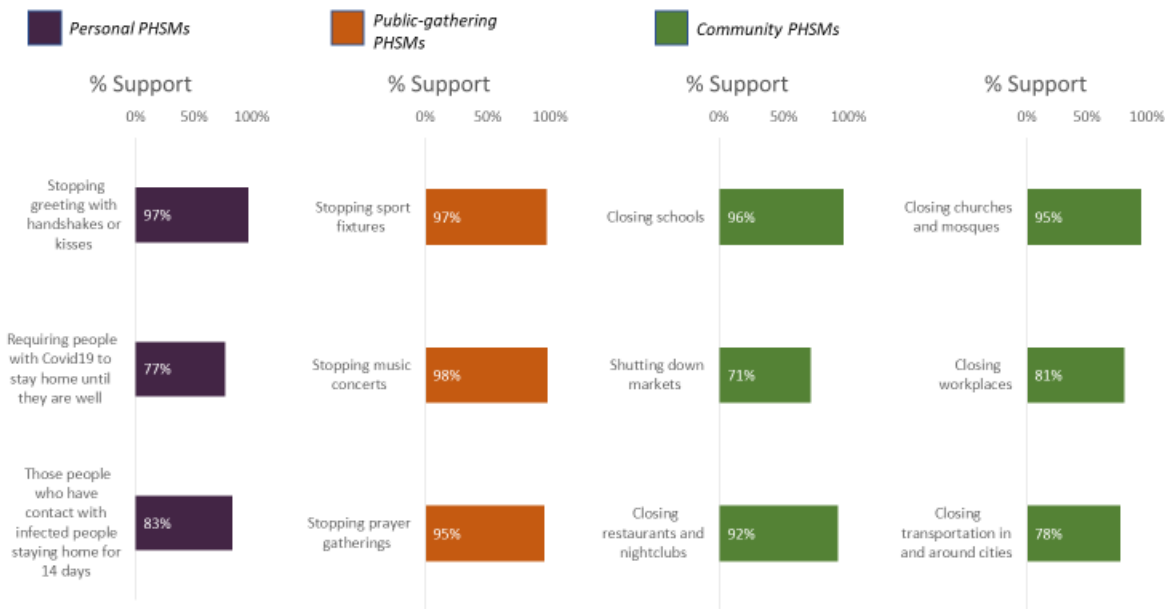
Ugandans also support restricting public gatherings

- Support is almost universal for restricting public gatherings to help limit a COVID-19 outbreak by stopping music concerts (98%) and sports fixtures (97%); whilst still strong majority, there are slightly lower levels of support for stopping prayer gatherings (95%).
- The most frequently cited way to make prayer or religious gatherings easier would be radio broadcasts (66%), followed by services on TV or Internet (60%).

There is majority support – in some cases strong support – for closures to prevent the spread of the virus

- Nine in ten support closure of schools (96%), closing restaurants and nightclubs (92%) and closing churches or mosques (95%).
- About eight in ten support closing workplaces (81%) and transportation around cities (78%), with slightly fewer supporting shutting down markets (71%).

Level of support for Public health social measures (PHSMs) by type of intervention

■ Personal PHSMs	■ Public-gathering PHSMs	■ Community PHSMs

| Stopping greeting with handshakes or kisses | 97% | Stopping sport fixtures | 97% | Closing schools | 96% | Closing churches and mosques | 95% |
| Requiring people with Covid19 to stay home until they are well | 77% | Stopping music concerts | 98% | Shutting down markets | 71% | Closing workplaces | 81% |
| Those people who have contact with infected people staying home for 14 days | 83% | Stopping prayer gatherings | 95% | Closing restaurants and nightclubs | 92% | Closing transportation in and around cities | 78% |

The results suggest that quarantines could be challenging for many Ugandans although more impactful on those with lower income

- About one in four (23%) work outside the home while 67% indicate they are not working. Of those employed outside the home, one in two (54%) indicates that their workplace could accommodate staggered shifts.

- However, only a third have a separate room to isolate someone who becomes sick (33%); rising to 56% among the highest household income category ($501+/month).
- Four in five (81%) say that food and water would be a problem if they had to be at home for 14 days, varying from 86% among the lower income category to 69% among the highest. Three in five (61%) indicate they would run out of money and one in eight (13%) believes they would lose their job.
- If asked to stay at home, on median average, Ugandans would need to get food after 7 days and money after 3 days.

Q17: What would be the biggest problems for people like you to stay at home for 14 days?

Food and water	81%
Run out of money	61%
Lose job	13%
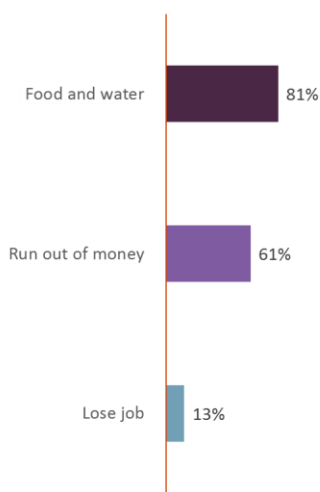
Share who think the following would be the biggest problem... (%)	Food and water	Running out of money	Losing your job
Gender:			
Male	81	59	13
Female	81	62	14
Age:			
18-25 years	79	58	12
26-35 years	81	61	13
36-45 years	85	62	17
46-55 years	76	64	7
56 and older	77	60	10
Monthly Household Income:			
$0-100	86	63	10
$101-200	83	59	12
$201-500	76	71	19
$501+	69	51	18

Q38.Would you have a separate room in your home to keep someone isolated if they are sick?

Don't know / no response 1%

Yes 33%

No 65%
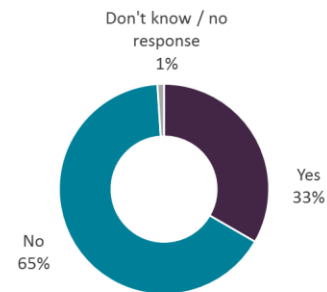
Television is the most common media source relied on
- Three in five use national television as a media source (62%), followed by radio (19%).
- Local television (77%) and local radio (44%) were cited as the most frequently used sources for information in the country.

Technical Note

The fieldwork on this study was conducted by Ipsos with results based on 1,073 interviews with adults aged 18+ in Kampala. Fieldwork was administered by Computer Assisted Telephone Interviewing (CATI) using a Random Digit Dial (RDD) approach incorporating both landline and mobile sample. Data are representative of the populations of the urban area (s) included and are unweighted. Fieldwork took place between March 29 and April 1, 2020.

This program of research is an outcome of a partnership between Resolve to Save Lives, an initiative of Vital Strategies, Africa CDC, the World Health Organization's African Regional Office (AFRO) and Eastern Mediterranean Regional Office (EMRO), and the World Economic Forum to form a new public-private partnership to support evidence-based implementation of NPIs to reduce COVID-19 transmission in African countries ("flattening the curve") while working with governments to mitigate social and economic disruption and other unintended consequences.