Communication to Promote Healthy Behaviors in Urban Slums in Kenya During COVID-19

Researchers

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Abstract

Sub-Saharan Africa contains many densely overcrowded and poor urban slums at high risk of COVID-19 outbreaks. In these contexts, sanitation and social distancing measures are near impossible, and COVID-19’s rapid spread is a devastating prospect. To control the pandemic’s spread, the Kenyan Ministry of Health COVID-19 Taskforce has implemented initial prevention and mitigation measures. To inform the Taskforce strategy, this study will deploy rapid phone-based surveys every two weeks on knowledge, attitudes and practices to approximately 7,500 heads of household sampled from existing randomized evaluation cohorts across five urban slums in Nairobi. Baseline findings on awareness of COVID-19 symptoms, perceived risk, awareness of and ability to carry out preventive behaviors, misconceptions, and fears will inform Taskforce interventions. In subsequent rounds, behavior change messages will be randomly assigned to measure effectiveness, or if randomization is not feasible, survey questions on exposure and response to government campaigns will be evaluated using causal inference approaches.

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Project Outcomes of Interest

Knowledge, attitudes, and behaviors related to COVID-19; barriers to adoption of key COVID-19 prevention behaviors; behavior change adoption; economic and health impacts of COVID-19 response measures

Partners

Ministry of Health, Kenya

Key Findings

Key findings from Round 4:

- Women are more likely than men to report increased household tension, arguing and household violence due to COVID-19 mitigation measures, in particular those ages 25-34.
- Women are twice as likely to take on more unpaid domestic work such as cooking, cleaning and childcare compared to men due to Coronavirus. About half of both men and women reported this increase in domestic work has had a negative impact on their ability to earn money.
- While women were earning less than their male partners prior to COVID-19, this gap has been widened due to the pandemic. Half of women, compared to a third of men, report earning nothing due to coronavirus. Of those in a partnership, 44% say both they and their partner are earning less now.
- In general, men have more full control over a range of decision-making areas – from leaving the house to working to household purchases. This decision making power between men and women in the household does not appear to have been changed by COVID-19.
- 4 out of 5 women do not currently want to get pregnant. About half of women were using contraception in March before COVID-19, and almost all (86%) were still using the same method (mainly injectables and implants, therefore perhaps they have not yet needed to renew their methods during COVID-19). Of those using the same method as in March, 18% had experienced a challenge accessing their method. Women who started a new method since Coronavirus said it was because now is not the time to get pregnant. The main reason given for not using any method is not being sexually active (73%).

Link to Results

Results brief are available on [Harvard's Dataverse](https://dataverse.harvard.edu/), [Journal of Adolescent Health](https://doi.org/10.1016/j.jadohealth.2020.08.037), [BMJ Open](https://bmjopen.bmj.com/content/10/12/e003196), and [Springer Link](https://link.springer.com/article/10.1007%2Fs00381-020-04464-9).
Impact Goals

- Improve social-safety net responses
- Promote peace and safety, and improve humanitarian response
- Reduce COVID-19 transmission rates

Project Data Collection Mode

- CATI (Computer-assisted telephone interviewing)

Implementing Organization

Population Council

Results Status

Results