

IOM DISPLACEMENT TRACKING MATRIX
COVID-19 PERCEPTION SURVEY: TAK PROVINCE

SURVEY ANALYSIS: MARCH 2022



Introduction

Thailand has been fighting COVID-19 longer than any country in the world except China – after isolating the virus on January 13, 2020. Thailand's public health priorities in 2020 focused on limiting the spread of COVID-19, reducing morbidity and mortality associated with the virus and maintaining essential health services for the population. Vaccination offers Thailand another mechanism to combat COVID-19. The Ministry of Public Health (MoPH) is planning to immunize between 50-80% of persons living in Thailand against COVID-19 in 2021. This is planned out in phases as doses of vaccine will initially be limited. Healthcare workers, other essential workers, the elderly and those with chronic medical conditions have been prioritized for vaccination. Clear and accurate communications around the benefits and safety of the vaccine will be critical as immunization is extended to the general population, including migrant populations. Monitoring the progress of COVID-19 immunization will also be important to support policy and safety. This project aims to protect the health of people living in Thailand by strengthening communications for and monitoring of mass immunization campaigns against COVID-19.

Methodology

The questionnarie tool was a collaborative effort between IOM's Displacement Tracking Matrix (DTM), Migration Health Department (MHD), World Health Organization (WHO), UNICEF and World Vision Foundation. The survey was individual level survey with random sampling. Population of interest were all migrants in Thailand. We aimed for a 50:50 balance between female and male respondents. Twenty-five enumerators from DTM, World Vision Foundation Thailand and Sister Foundation collected data in different locations.

Geographic Coverage

Tak, Ranong, Chanthaburi, Trat, Rayong, Chonburi and Greater Bangkok.

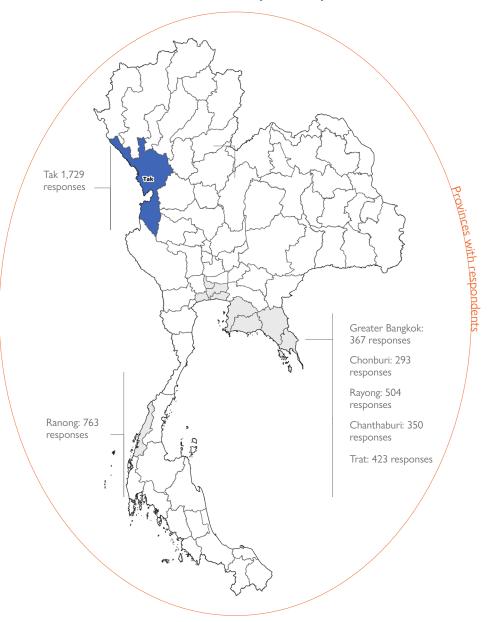
Primary data collection period

Data was collected from 11th November 2021 till 13th February 2022.

Limitations

Biases due to self-reporting may exist. Certain indicators/questions may be under-reported or over-reported, due to the subjectivity and perceptions of respondents (especially "social desirability bias"— the documented tendency of people to provide what they perceive to be the "right" answers to certain questions). These biases should be taken into consideration when interpreting findings.

Provinces where survey was implemented



Demographics of respondents







Average age of respondent:









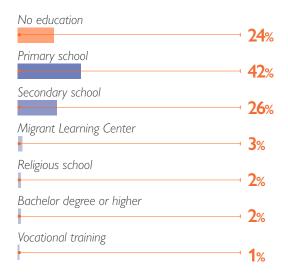
of respondents had children

of the respondents were Myanmar nationals



of of the respondents were Cambodian nationals

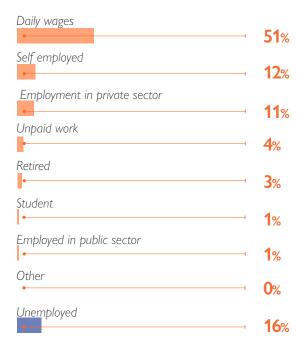
Highest level of education reported by respondents



Residing in Thailand

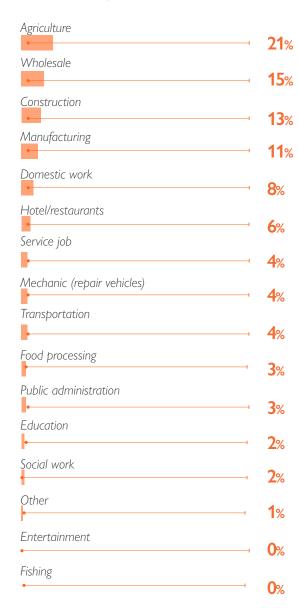
Mo	ore than 9 years	
•		53 %
7 :	to 9 years	7 %
5 1	to 7 years	11%
3 1	to 5 years	
1 :	to 3 years	14%
Le:	ss than 1 year	12%
		3%

Employment status

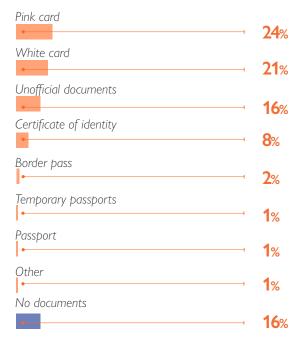


Respondents in Tak were asked to report on their employement status and overall, daily wage was the highest reported, followed by self employment and employement in private sector. 16% of the overall respondents reported not being employed. Respondents who were employed at the time of data collection were further asked to report on the sector they worked in, and highest reported sector was agriculture followed by wholesale and construction.

Work sector†



Documentation†



Respondents in Tak were asked to report on types of documents they possess to reside in Thailand, and the most commonly reported document was pink card, followed by white card, unofficial document and certificate of identity. Sixteen per cent reported not having any documents.

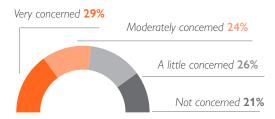
Respondent or family member contracted COVID-19

14% of respondents reported they or someone in the family got COVID-19

86% of respondents reported neither they nor anyone from the family got COVID-19

A majority of respondents reported they or their family member did not contract COVID-19. This could be because of self-reporting bias where repondents tend to give answers that they perceive would be the right at the time of data collection

Concerns about COVID-19



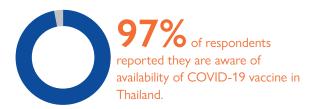
More than half of the respondents from Tak reported being concerned about COVID-19

Vaccine status of respondents

- 1 Fully vaccinated (48%)
- 2 One dose (24%)
- 3 Not vaccinated (28%)

Tak had the lowest proportion of respondents who reported being fully vaccinated and also had the highest proportion of unvaccinated respondents compared to any other provinces where the survey was implemented.

Vaccine availability†



Reporting was very similar to the overall level finding for this indicator.

Underlying medical conditions

- 1 Yes, have medical condition (23%)
- 2 No, dont have medical condition(77%)
- 3 Do not want to answer (0%)

The reporting on this indicator is very similar to the verall level findings in the assessment.

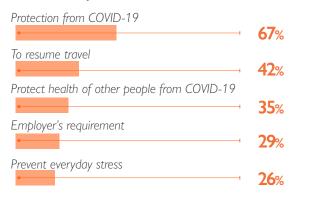
Willingness to get vaccinated†

- 1 Yes, willing to get vaccinated (63%)
- 2 No, not willing to get vaccinated (17%)
- 3 Not sure (20%)

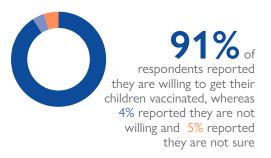
Reporting on willingness to get vaccinated in Tak is similar to the overall level finding.

[†] This question was asked to respondents who reported not vaccinated for vaccine status

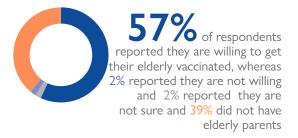
Top 5 reasons for willingness to get vaccinated†



Vaccinate children† †



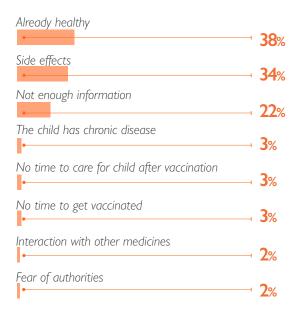
Vaccinate elderly



Top 5 reasons for vaccine hesitancy†

- 1 Already healthy (49%)
- 2 Have chronic disease (37%)
- 3 Side effects (11%)
- 4 Interaction with other medication (5%)
- 5 Not enough information (4%)
- † Respondents could select more than one options
- $\dagger\dagger$ This question was only asked to respondents who reported having children
- ††† This question was asked to respondents who reported not sure or not willing to get their elderly parents vaccinated. Respondents could selectmore than one option.

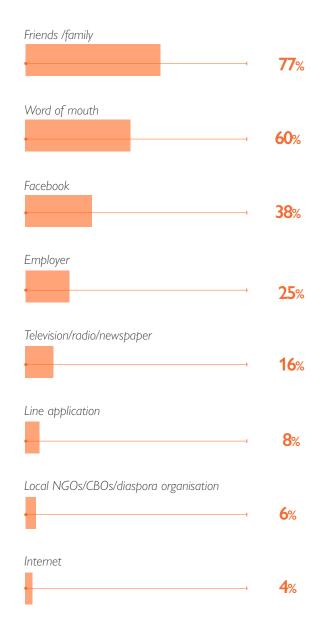
Top 8 reasons for hesitancy to get children vaccinated†



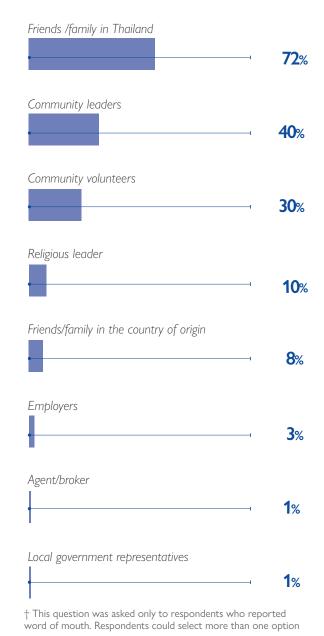
Top 8 reasons for hesitancy to get elderly vaccinated † † †

The elders have chronic disease	63%
Already healthy	18%
Side effects	16%
Interaction with other medication	15%
No time to take care of elders after vaccination	6%
Vaccine will not protect from getting COVID-19	6%
No time to get vaccine	5 %
Will get COVID-19 from vaccine	5%

Top 8 source of information on COVID-19 Vaccine



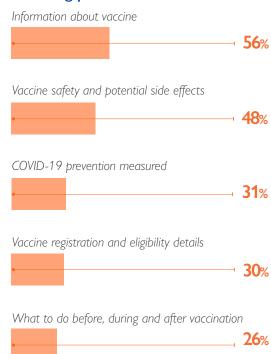
Top 8 word of mouth source†



If information material was distributed in the area of the respondents



Kind of COVID-19 infromation according to respondents missing or not being provided*

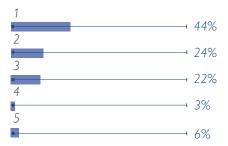


^{*} Respondents could choose more than one option

85%

How easy was it to understand distribution material+

Ranking: 5 being extremely difficult and 1 extremely easy



If 4 and 5 ranked above, why was the information hard to understand?*

Cannot read written information provided

Different language from the one spoken by migrants



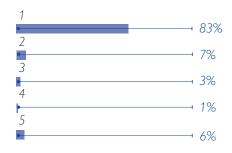
Complicated/technical language



Do not want to answer **─** 0%

Reading levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



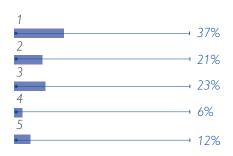
Speaking levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



Understanding of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



Reading levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



[†] This question was asked to respondents who reported yes to information eing distributed in their area.

^{*}Respondents could select more than one option.

Daily wage more or equal than 315 THB

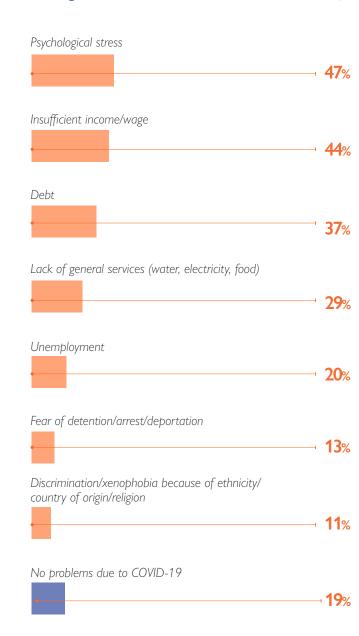


In debt?



Tak had the highest proportion of respondents who reported not getting daily wage more or equal to 315 THB compared to any other province where the vaccine perception survey was implemented.

Challenges faced since outbreak of COVID-19†



[†] Respondents could choose more than one option

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