

IOM DISPLACEMENT TRACKING MATRIX
COVID-19 PERCEPTION SURVEY: GREATER BANGKOK

**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 (Samut Sakon, Samut Prakon, Nonthaburi and Bangkok).

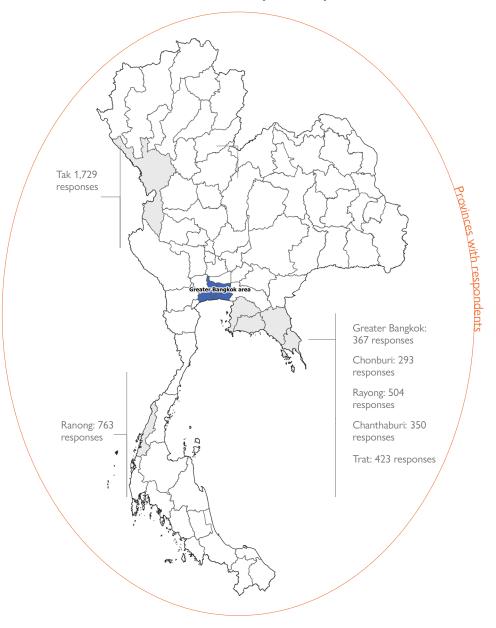
#### Primary data collection period

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: 33.4

Average household size 2.6





57% To frespondents had children

60% of the respondents were Myanmar nationals



40% of of the respondents were Cambodian nationals

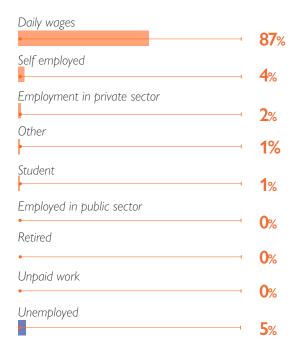
# Highest level of education reported by respondents

No education	<b>14</b> 9
Primary school	F0
Secondary school	—— 50 <sub>9</sub>
• Secondary scribbi	<b>──── 31</b> %
Bachelor degree or higher	<b></b> 3%
Vocational training	4
Migrant learning center	<b></b> 1%
Wilgrant learning center	<b>−−−</b> 1%
Religious school	<b>1</b> 0/
	1%

#### Residing in Thailand

More than 9 years	
- Years	41%
7 to 9 years	<b>8</b> %
5 to 7 years	<b>13</b> %
3 to 5 years	21%
1 to 3 years	
Less than 1 year	<b>−−−−</b> 15%
	<b>2</b> %

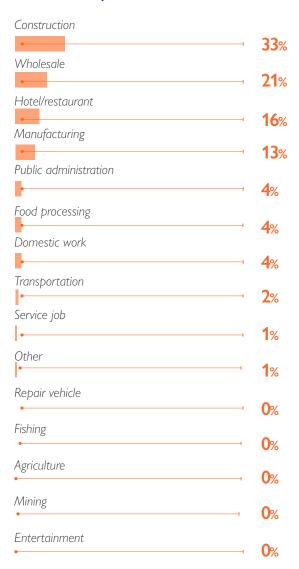
#### **Employment status**



Respondents in Greater Bangkok were asked to report on their employement status and overall, daily wage was the highest reported, followed by self employed and employment in private sector. Fiveper cent 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 hotel/restaurant.

#### Work sector†



#### Documentation†



Greater Bangkok had the highest proportion of respondents who reported having passport as document for residing in Thailand compared to any other province where the survey was implemented.

### Respondent or family member contracted COVID-19

20% of respondents reported they or someone in the family got COVID-19

80% of respondents reported neither they nor anyone from the family got COVID-19

Greater Bangkok had a higher proportion of respondents who reported they or someone from their family did not contract COVID-19.

#### Vaccine status of respondents

- 1 Fully vaccinated (73%)
- 2 One dose (21%)
- 3 Not vaccinated (6%)

#### **Underlying medical conditions**

- 1 Yes, have medical condition (45%)
- 2 No, don't have medical condition (55%)
- 3 Do not want to answer (0%)

#### Concerns about COVID-19



#### Vaccine availability†

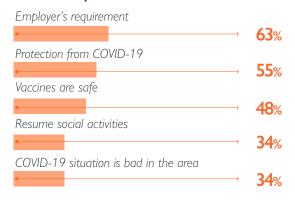


#### Willingness to get vaccinated†

- 1 Yes, willing to get vaccinated (55%)
- 2 No, not willing to get vaccinated (32%)
- 3 Not sure (14%)

<sup>†</sup> This question was asked to respondents who reported not vaccinated for vaccine status

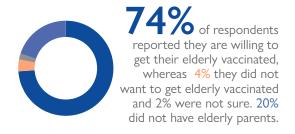
## Top 5 reasons for willingness to get vaccinated†



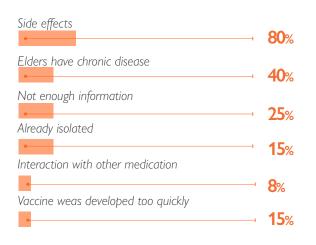
# Top 4 reasons for vaccine hesitancy†

- 1) Side effects (60%)
- 2 Already healthy (40%)
- 3 Have chronic disease (40%)
- 4 Vaccine was developed too quickly (30%)
- Interaction with other medicine (20%)
- † Respondents could select more than one options
- $\dagger\dagger$  This question was only asked to respondents who reported having children
- $\dagger\dagger$  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.
- $\mbox{\footnote{*}}$  This question was only asked to respondents who reported they are not willing to get their children vaccinated.

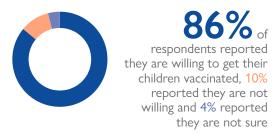
#### **Vaccinate elderly**



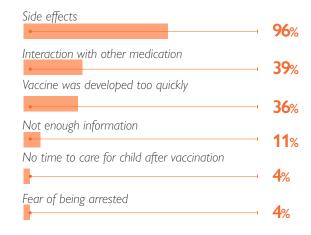
# Four reported reasons for hesitancy to get elderly vaccinated†††



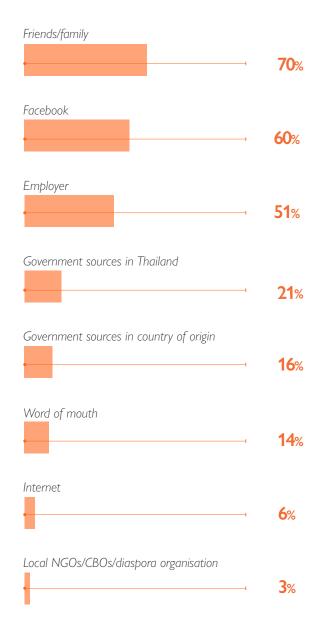
#### Vaccinate children † †



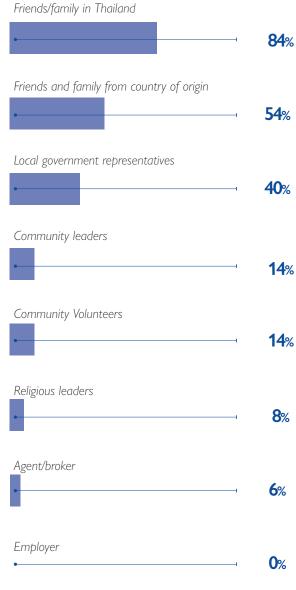
### Top 6 reasons for hesitancy to get children vaccinated\*



# Top 8 source of information on COVID-19 Vaccine



#### Top 8 word of mouth source†

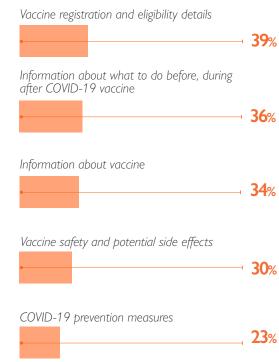


### † This question was asked only to respondents who reported word of mouth. Respondents could select more than one option

# If information material was distributed in the area of the respondents



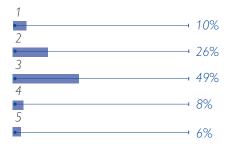
# Kind of COVID-19 infromation according to respondents missing or not being provided\*



<sup>\*</sup> Respondents could choose more than one option

## 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?\*

Complicated/technical language



Cannot read written information provided



Different language from the one spoken by migrants



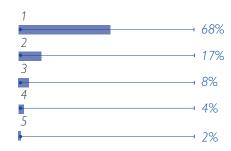
Complicated infographics



**⊣ 16**%

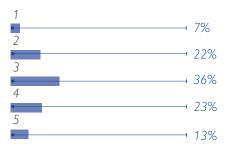
#### Reading levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



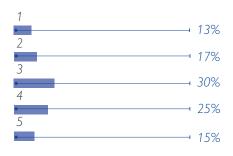
#### Speaking levels of Thai language

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

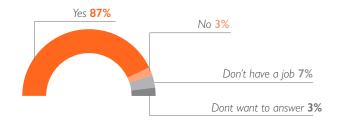
Ranking: 1 being extremely difficult and 5 extremely easy



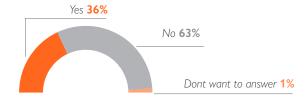
 $<sup>\</sup>dagger$  This question was asked to respondents who reported yes to information eing distributed in their area.

<sup>\*</sup>Respondents could select more than one option.

#### Daily wage more or equal than 315 THB

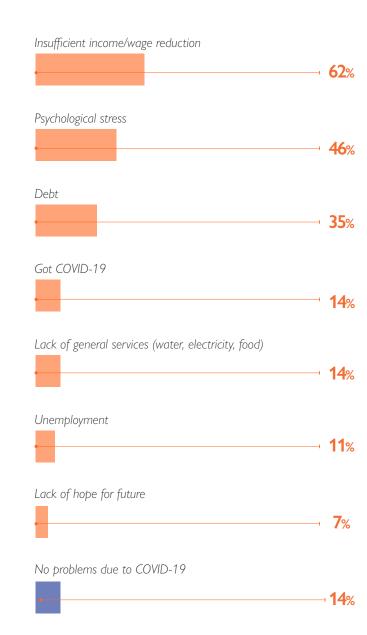


#### In debt?



Greater Bangkok had the highest proportion of respondents reported receiving daily wage more or equal to 315 THB and higher proportion of respondents reported not having any debt.

#### Coping strategies reported for insufficient water†



<sup>†</sup> Respondents could choose more than one option

Publisher: IOM Thailand

18th Floor, Rajanakarn Building

3 South Sathorn Road, Bangkok 10120 Thailand Tel.: (+66) 2-343-9300

Fax: (+66) 2-343-9399

Tel: (+66) 2-343-9300

Email: DTMThailand@iom.int

Website: https://dtm.iom.int/thailand

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