



IOM DISPLACEMENT TRACKING MATRIX
COVID-19 PERCEPTION SURVEY : CHANTHABURI 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 questionnaire 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.

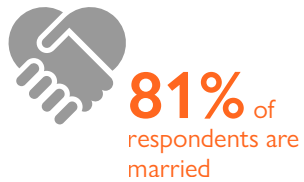
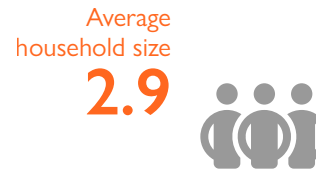
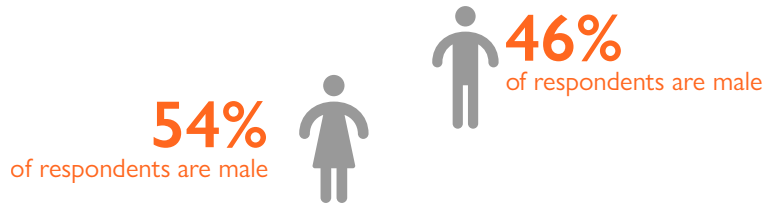
Limitations

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.

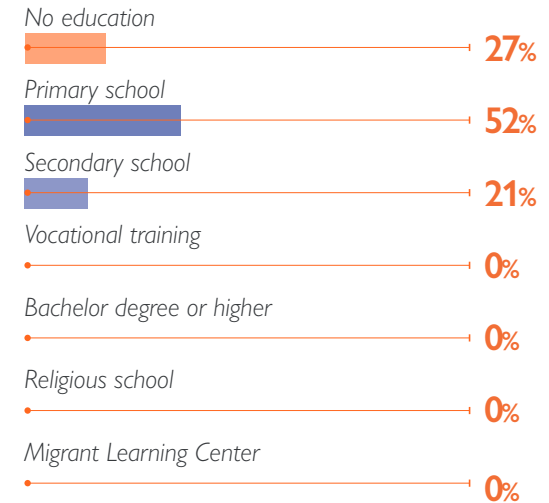
Provinces where survey was implemented



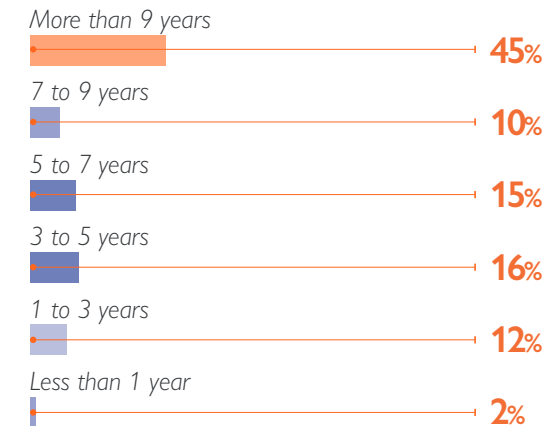
Demographics of respondents



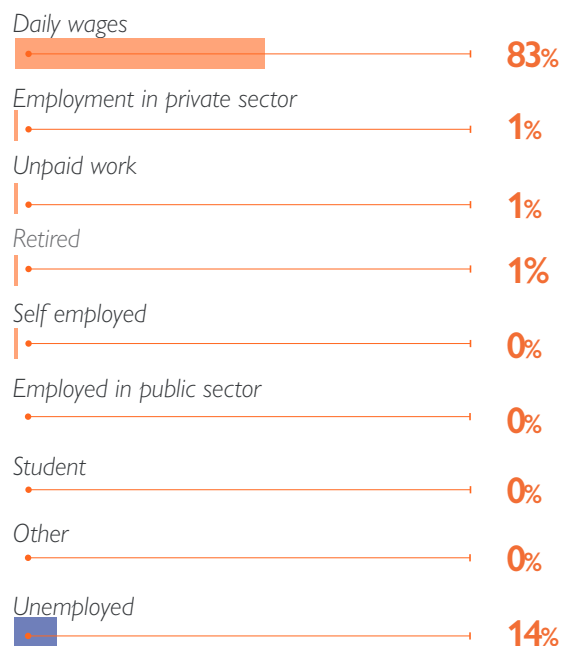
Highest level of education reported by respondents



Residing in Thailand



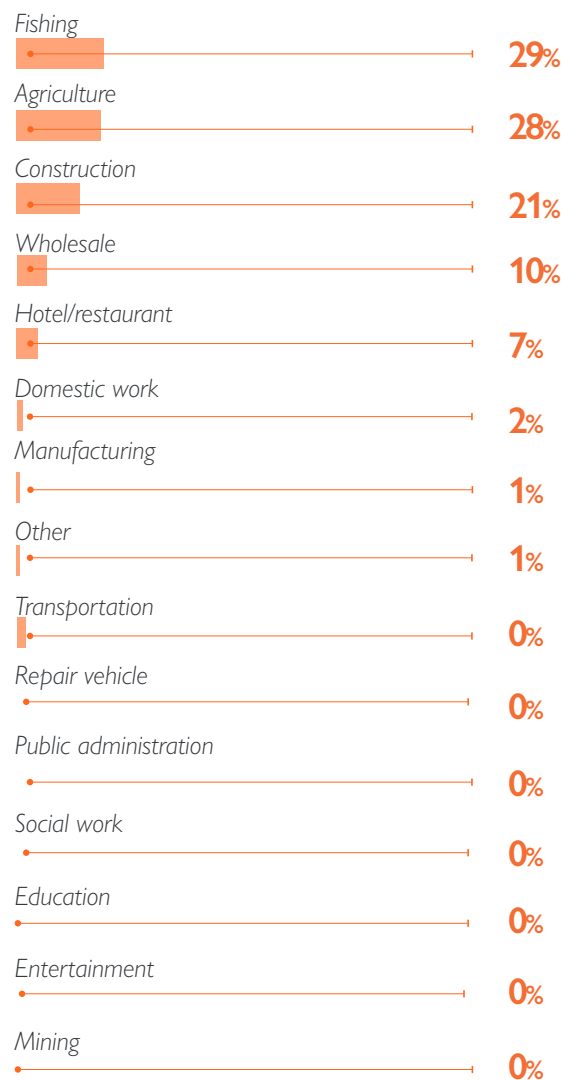
Employment status



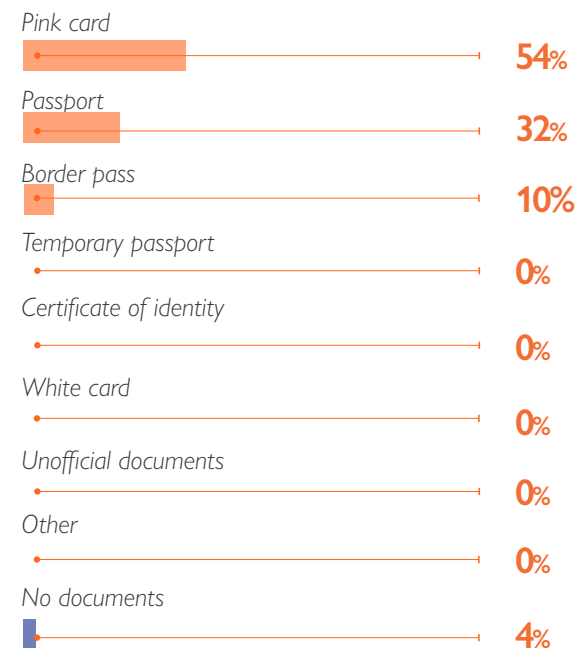
Respondents in Chanthaburi were asked to report on their employment status and overall, daily wage was the highest reported, followed by employment in private sector and unpaid work. Fourteen per cent of the overall respondents reported not being employed.

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 fishing followed by ag

Work sector†



Documentation‡



Chanthaburi had the highest proportion of respondents who reported having border compared to any other province where the survey was implemented.

† This question was only asked to respondents that reported being employed.

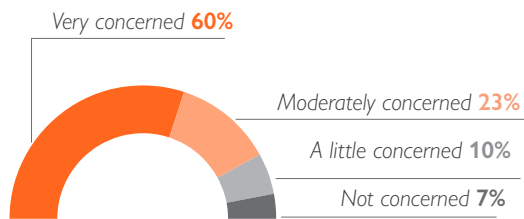
Respondent or family member contracted COVID-19

10% of respondents reported they or someone in the family got COVID-19

90% 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 respondents 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 Chanthaburi reported being very concerned about COVID-19

Vaccine status of respondents

- 1 Fully vaccinated (50%)
- 2 One dose (37%)
- 3 Not vaccinated (13%)

Chanthaburi reported the highest proportion of respondents who got one dose vaccine when compared to the other provinces. It also had the second highest proportion of unvaccinated respondents compared to other provinces where the survey was implemented.

Vaccine availability†



Underlying medical conditions

- 1 Yes, have medical condition (11%)
- 2 No, don't have medical condition (87%)
- 3 Do not want to answer (2%)

Chanthaburi had the highest proportion of respondents who reported not having any medical conditions compared to other provinces where the survey was implemented.

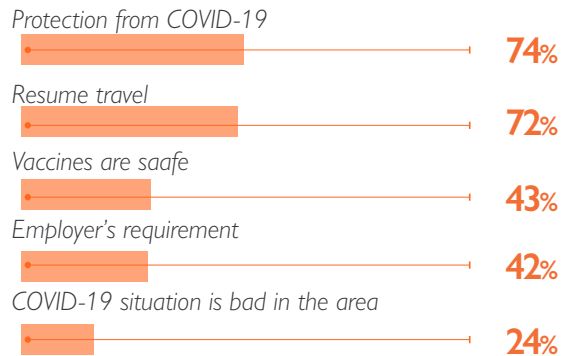
Willingness to get vaccinated†

- 1 Yes, willing to get vaccinated (98%)
- 2 No, not willing to get vaccinated (2%)
- 3 Not sure (0%)

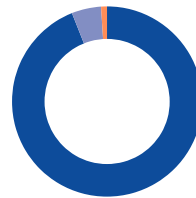
Chanthaburi had the highest proportion of respondents who reported willingness to get vaccinated compared to any other province where survey was implemented.

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

Top 5 reasons for willingness to get vaccinated†

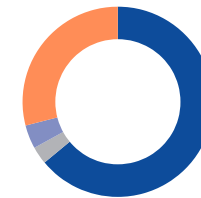


Vaccinate children † †



94% of respondents reported they are willing to get their children vaccinated, whereas 5% reported they are not willing and 1% reported they are not sure

Vaccinate elderly

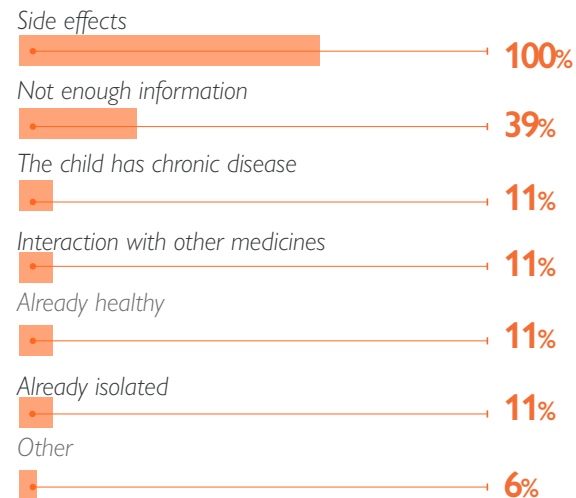


64% of respondents reported they are willing to get their elderly vaccinated, whereas 3% reported they are not willing and 4% reported they are not sure and 29% did not have elderly parents

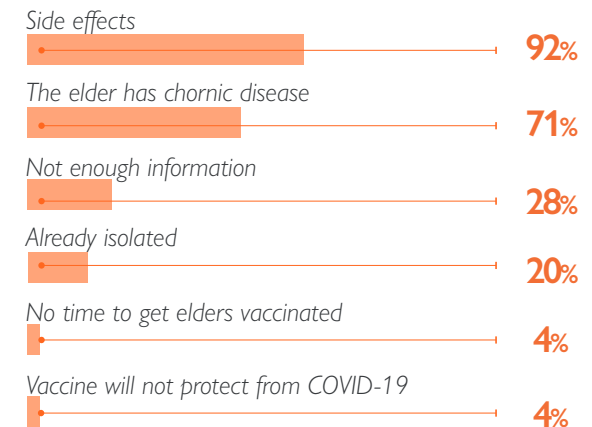
Top 5 reasons for vaccine hesitancy†

- 1 No time to get vaccinated (100%)
- 2 Side effects (100%)
- 3 Have chronic disease (100%)
- 4 Already healthy (0%)
- 5 Not enough information (0%)

Top 7 reasons for hesitancy to get children vaccinated†



Top 6 reasons for hesitancy to get elderly vaccinated† † †

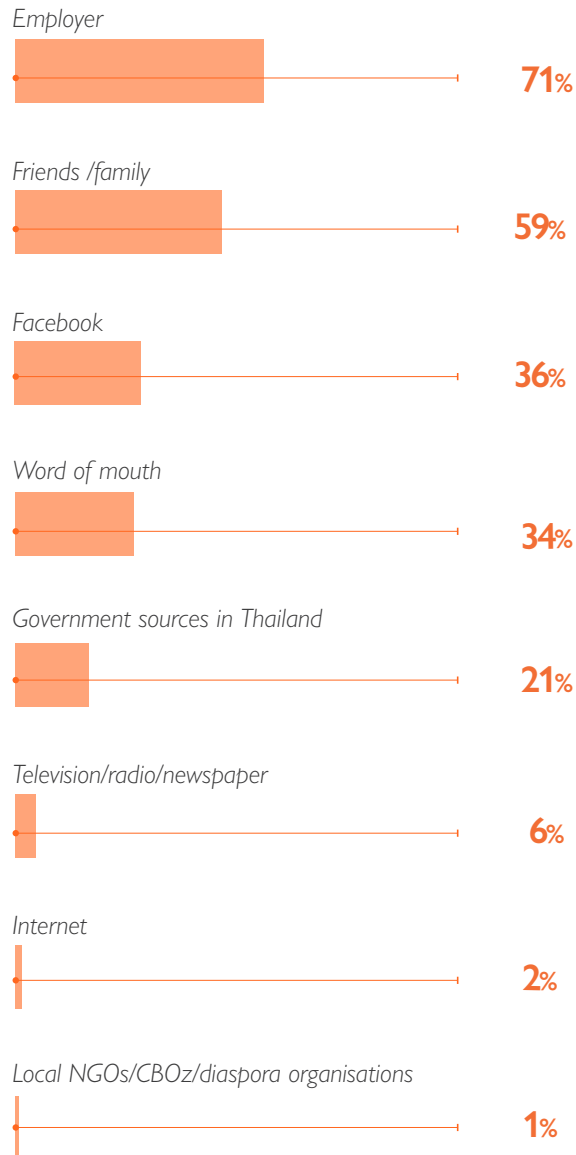


† Respondents could select more than one options

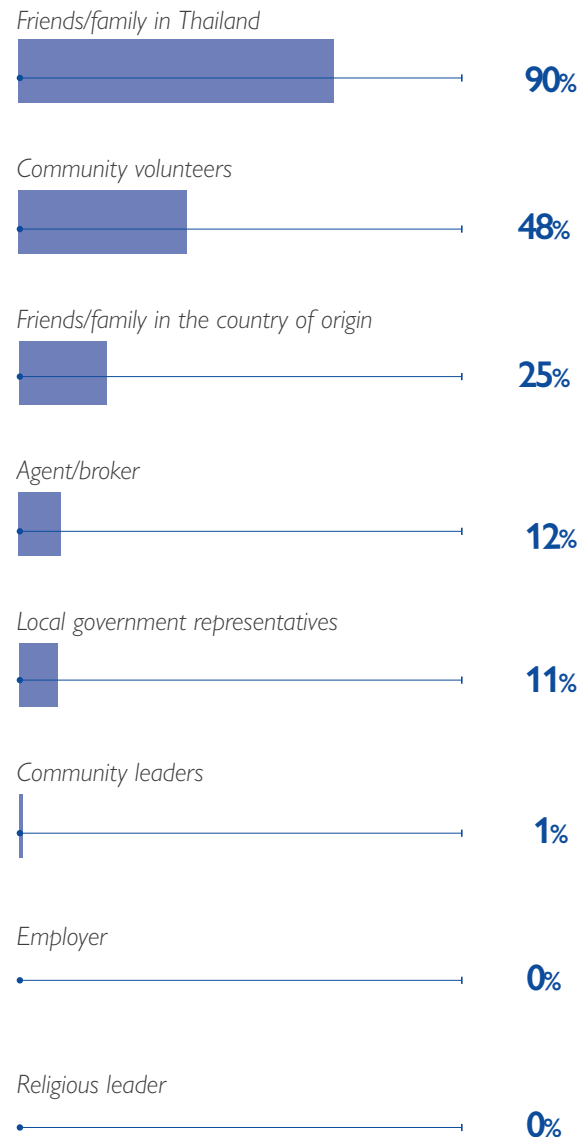
† † This question was only asked to respondents who reported having children

† † † This question was asked to respondents who reported not sure or not willing to get their elderly parents vaccinated. Respondents could select more than one option.

Top 8 source of information on COVID-19 Vaccine



Top 8 word of mouth source†

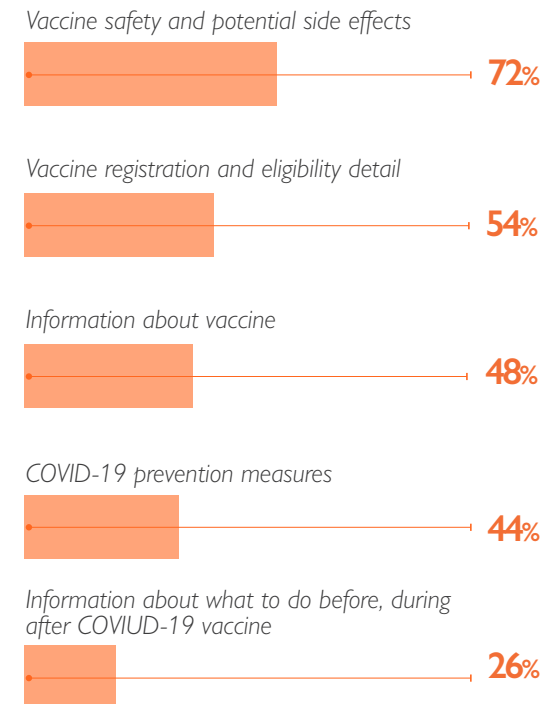


† This question was asked only to respondents who reported word of mouth. Respondents could select more than one option

If information material was distributed in the area of the respondents



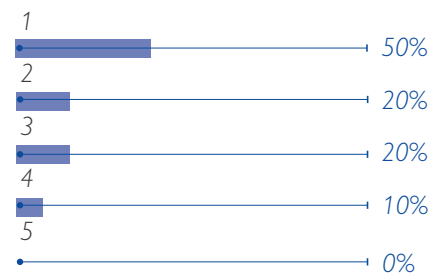
Kind of COVID-19 information according to respondents missing or not being provided*



* Respondents could choose more than one option

How easy was it to understand distribution material†

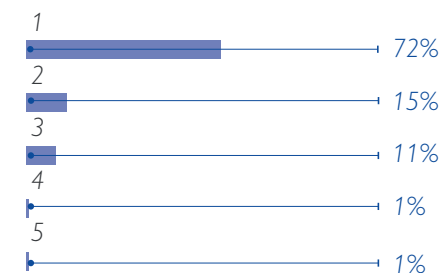
Ranking: 5 being extremely difficult and 1 extremely easy



Only one respondent selected 4 and when asked to report on why it was difficult to understand the materials distributed, the respondent reported different language from the one spoken by migrant population and that the language in these materials is complicated and technical, hence difficult to understand.

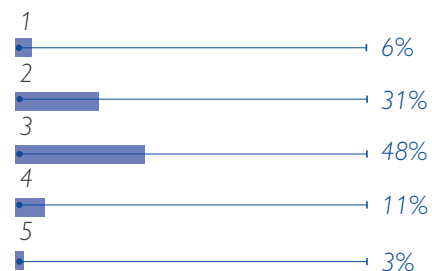
Reading levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



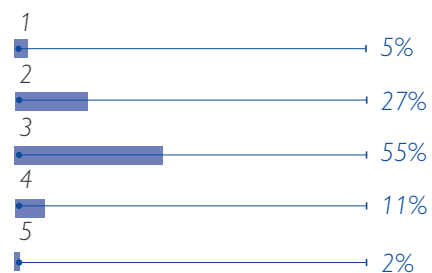
Speaking levels of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



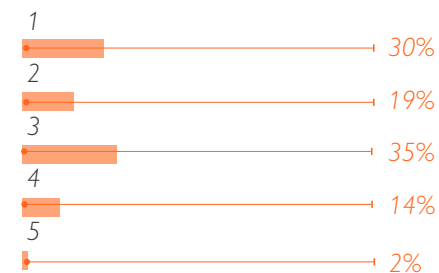
Understanding of Thai language

Ranking: 1 being extremely difficult and 5 extremely easy



Reading levels of Thai language

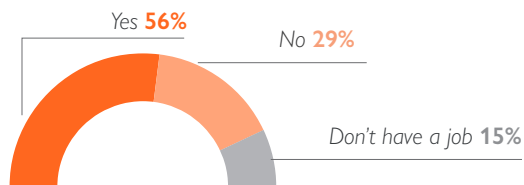
Ranking: 1 being extremely difficult and 5 extremely easy



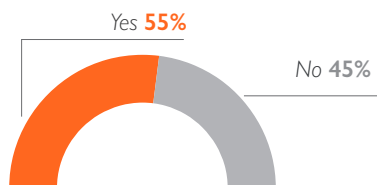
† This question was asked to respondents who reported yes to information eing distributed in their area.

*Respondents could select more than one option.

Daily wage more or equal than 315 THB

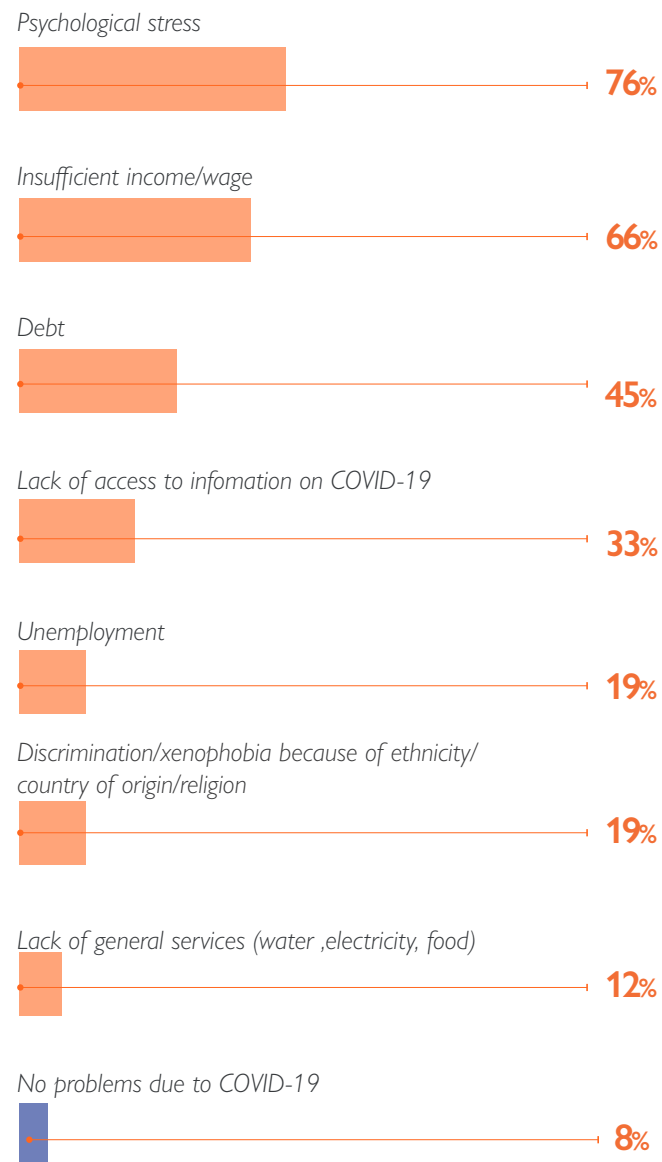


In debt?



Chanthaburi had the highest proportion of respondents who reported having debt compared to any other province where the survey was implemented.

Coping strategies reported for insufficient water†



† 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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