



An overview of the NIDS-CRAM findings: HEALTH

30 July 2020

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National Income Dynamics Study (NIDS) Coronavirus Rapid Mobile Survey (CRAM)



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CORONAVIRUS RAPID MOBILE SURVEY 2020

Outline

- **Background**
- **Why “Coronavirus Rapid Mobile Survey”**
- **Evolution of NIDS-CRAM**
- **Making it happen**
- **Sampling strategy**
- **Findings**
- **Recommendations**
- **Dissemination**



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CORONAVIRUS RAPID MOBILE SURVEY 2020

Background

- Unintended health costs of fighting pandemics can be high or even greater than the direct health costs of the pandemic
- Ebola outbreak unintended consequences included reduction in access to:
 - Maternal, and reproductive care
 - Neonatal care

(Sochas, Shannong, and Nam, 2017)



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Why “Coronavirus Rapid Mobile Survey”

- Need for rapidly – updated and accurate information on health outcomes, social outcomes and economic outcomes to inform policies in this time of crisis
- Need for national and representative sample
- Traditional forms of data collection not feasible
 - Quarterly Labour Force Survey
 - National Income Dynamics Survey
 - General Household Survey



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CORONAVIRUS RAPID MOBILE SURVEY 2020

Responding to urgent research questions in crisis: MATCH

- Informal discussions with policymakers including Peter Barron about need for unintended consequences work around end of May, identification of Momconnect sample as an avenue to answer this question
- In parallel:
 - Rapid ethics approval, with deep gratitude to Len Hansen and Samantha van Schalkwyk
 - NDOH approval to access Momconnect sample by Lesley Bamford
 - Instrument finalised
- Budgets approved by Allan Gray Orbis Foundation and contracts signed between Praekelt and AGOF, thanks to Jane Passmore
- Stratification strategy, sample drawn
- Survey conducted 24 – 30 June
- Policy papers released on 15 July



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Evolution of NIDS-CRAM

- Initially
 - 6 April start date
 - Six waves every two weeks for six months
 - Short survey of 10 – 20 questions
- Eventually
 - Started on 7 May (first wave fieldwork ended on 27 June)
 - Given wide impact and long duration of COVID pandemic design has been amended to 5 waves spread over 12 months, running into 2021 to also consider economic and employment recovery, social response
 - Given all that we wanted to know ended up being a 20 minute survey covering employment, grants, hunger and health



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CORONAVIRUS RAPID MOBILE SURVEY 2020

Race for rapid data & policy guidance

NIDS-CRAM
114
days

24 March First conversation about need for evidence on social impact of COVID

Early April Multi-institutional research team, Support from Presidency, NDOH, Treasury

Late April Funding Sampling strategy, survey mode Contracting provider Instrument, ethics

May-June Survey conducted, Data analysis, Analysis

15 July:
Public release of findings and data

MATCH
57 days

20 May informal discussions with policymakers

June: Rapid ethics approval, NDOH approval, Instrument finalised

Budgets approved, Contract signed, Survey conducted
24 – 30 June Analysis

15 March + April: LOCKDOWN

May: LEVEL 4

June/July: LEVEL 3



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Making it happen

Heroic collaborative effort – spearheaded by the multi-talented Nic Spaul – with broad participation across disciplines and institutions, with 30 social science researchers involved in the core CRAM team and 8 researchers from WITS, Stellenbosch, UCT and UWC in the health team



Dr Cari van Schalkwyk

Dr Cari van Schalkwyk: Cari is a statistical analyst and researcher for the DST/NRF Centre for Epidemiological Modelling and Analysis (SACEMA).



Russell Rensburg

Russell Rensburg is the Director of the Rural Health Project since January 2019. Russell is an expert in health systems and policy and was a Commissioner of the Lancet High Level Commission on Quality Healthcare. He also manages RHAP's rural proofing programme which advocates for the equitable allocation of resources for rural health care delivery.



Dr Lungiswa Nkonki

Dr Lungiswa Nkonki: Lungiswa is a Senior Lecturer in the Department of Global Health at Stellenbosch University, and completed her PhD in Health Economics at the University of Bergen in 2012.



Prof Ronelle Burger

Prof Ronelle Burger: Ronelle is a professor at the Department of Economics, Stellenbosch University, and a senior researcher with Resep, with a focus on health economics research.



Dr Anja Smith

Dr Anja Smith: Anja is a researcher at Resep, based at Stellenbosch University, with a focus on development economic and health research.



Dr Carmen Christian

Dr Carmen Christian: Carmen is a lecturer at UWC, and a researcher with a focus on development economics and health.



Dr Laura Rossouw

Dr Laura Rossouw: Laura is a senior lecturer in Economics at the School of Economics and Finance, University of Witwatersrand.



Dr Brendan Maughan Brown

Dr Brendan Maughan Brown Brendan is the Chief Research Officer, SALDRU, UCT. He is an interdisciplinary social scientist with expertise on the uptake of HIV-prevention and treatment services; behavioural economics; the social and behavioural determinants of HIV risk; and HIV stigma.

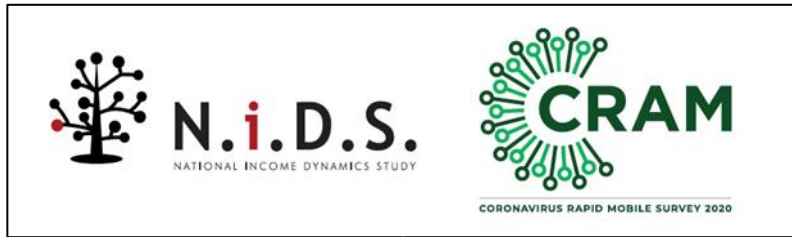


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Sampling Strategy



National Income dynamics Study
28 000 Individuals (2008)

National Income dynamics Study
Wave 5, four rounds of attrition

Coronavirus Rapid Mobile Survey
7 074

Coronavirus Rapid Mobile survey of
Maternal and Child health



15 000 Pregnant women and new
mothers

3 140 Pregnant women and new
mothers (21% response rate)



NIDS-CRAM Health papers


2

WAVE 1
National Income
Dynamics Study (NIDS) –
Coronavirus Rapid Mobile
Survey (CRAM)

COVID-19 risk perception, knowledge and behaviour

Ronelle Burger - University of Stellenbosch
Carmen Christian - University of Western Cape
Brendan Maughan-Brown - University of Cape Town
Russell Rensburg - University of the Witwatersrand
Laura Rossouw - University of the Witwatersrand

15 July 2020




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WAVE 1
National Income
Dynamics Study (NIDS) –
Coronavirus Rapid Mobile
Survey (CRAM)

Examining the unintended health consequences of the covid-19 pandemic in South Africa

Ronelle Burger - University of Stellenbosch
Langlene Mooki - University of Stellenbosch
Russell Rensburg - University of the Witwatersrand
Anja Smith - University of Stellenbosch
Carl van Schoorwyk - University of Stellenbosch

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WAVE 1
National Income
Dynamics Study (NIDS) –
Coronavirus Rapid Mobile
Survey (CRAM)

Income-related health inequalities associated with Covid-19 in South Africa

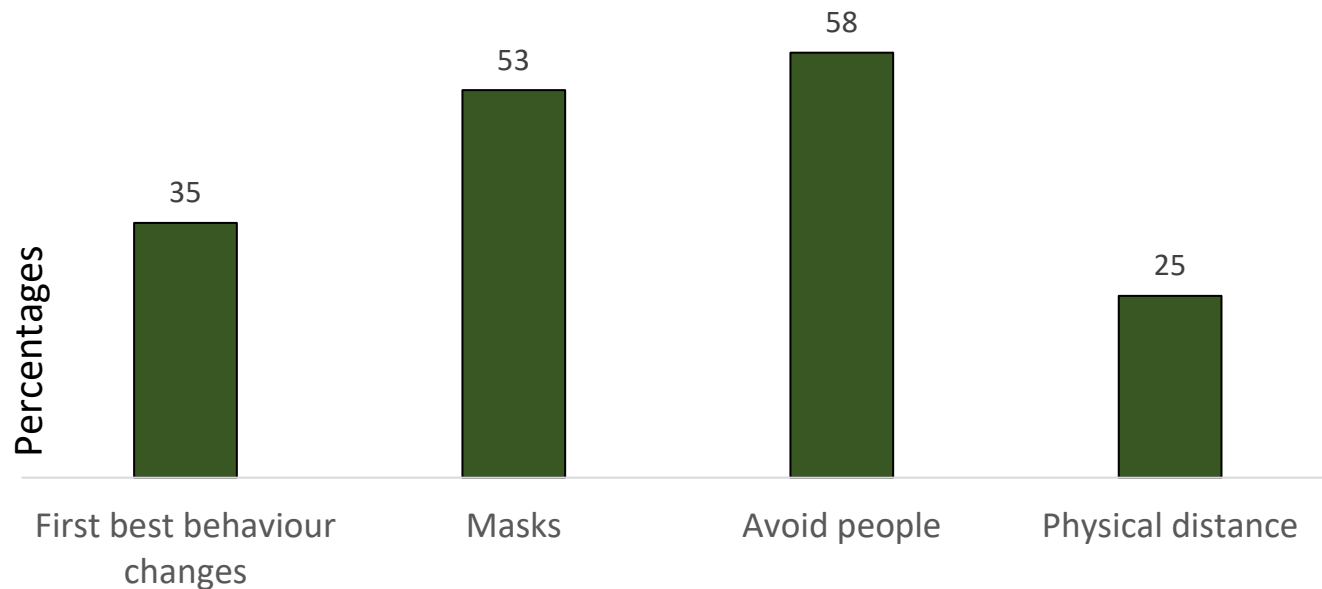
Chijioke O. Nwosu - Human Sciences Research Council, South Africa
Adeola Oyensubi - University of the Witwatersrand

15 July 2020



Only 1-in-3 are implementing most effective preventative measures

- Majority (91%) of respondents reported changing their behaviour in some way to try and prevent contracting /spreading the virus
- **But** a too small share are complying with measures that can change trajectory of disease (at **least 8-in-10** need to wear masks to change trajectory of COVID-19)



NIDS-CRAM wave 1, 2020



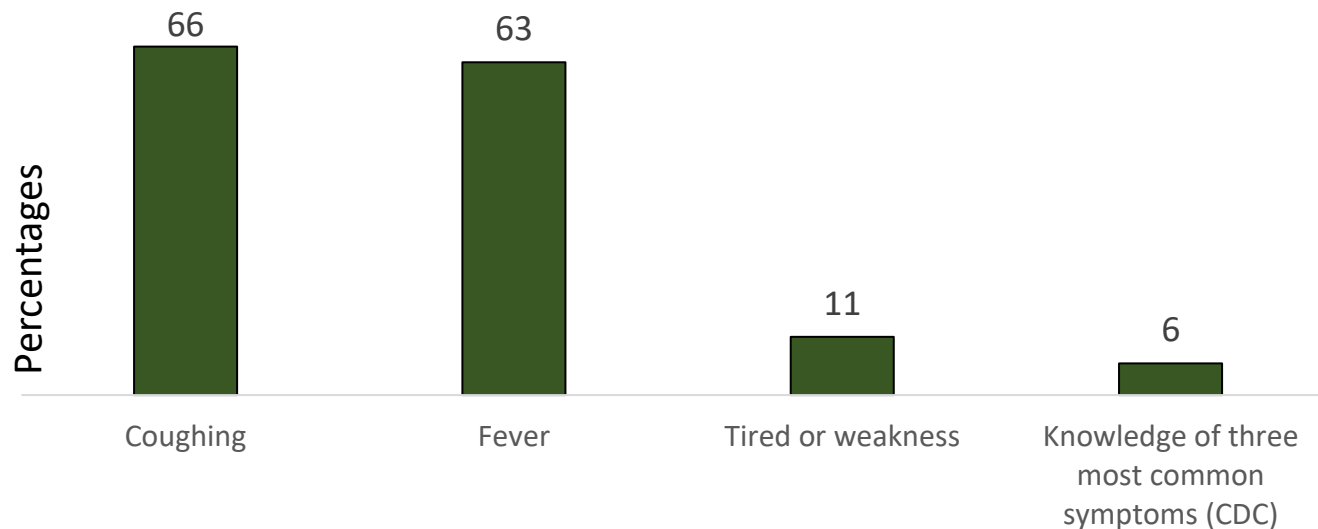
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Knowledge about the three most common COVID-19 symptoms is limited

Many South Africans not in a good position to make decisions about when its vital to quarantine and/or seek care for COVID-19 symptoms



NIDS-CRAM wave 1, 2020



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CORONAVIRUS RAPID MOBILE SURVEY 2020

Information sources

- Three most trusted sources are media, government & health workers
- Media is by far the highest with 80% of respondents trusting them
 - While 14% said they visit government websites or Whatsapp groups for trusted information
 - 11% said they trust information from health workers
- However, those who are reliant on health workers and government sources of information and health workers have more accurate knowledge of symptoms and tend to choose high-impact preventative behaviour



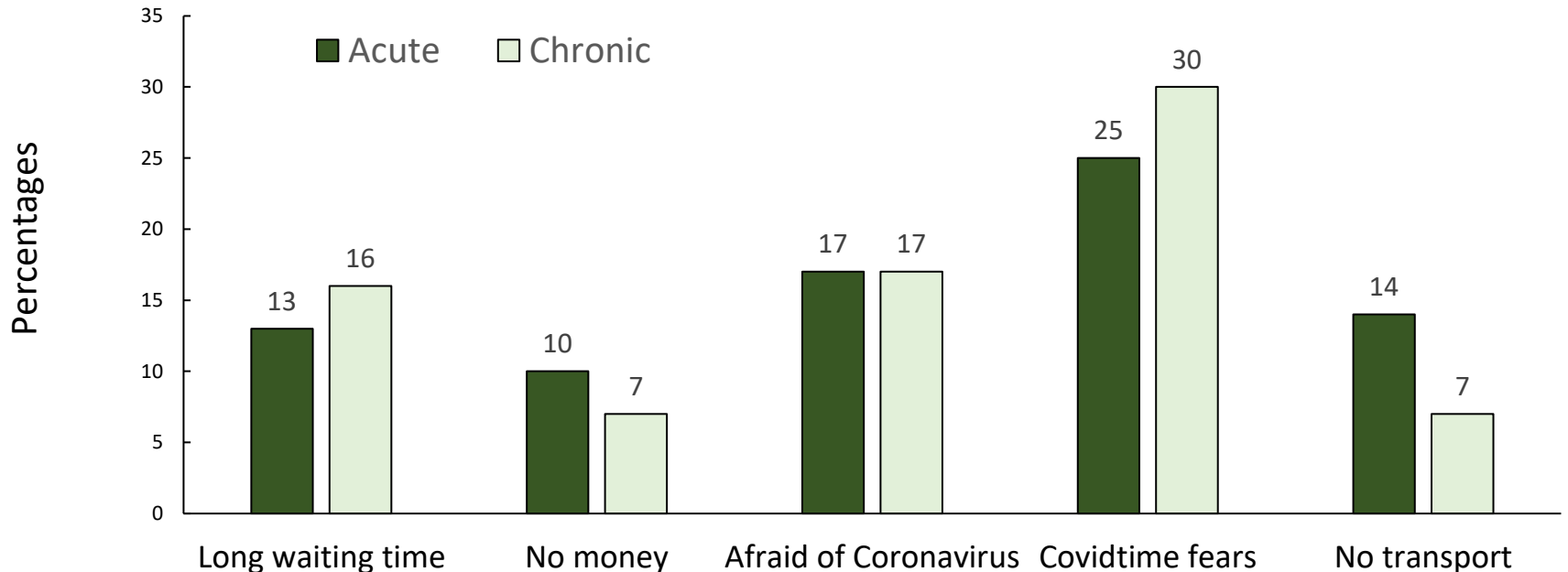
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CORONAVIRUS RAPID MOBILE SURVEY 2020

Most often cited reason for not seeking care was Coronavirus fear

- 96% of those with chronic conditions but only 78% of those with acute care needs sought care in last four weeks
- Fear of virus most often cited reason for not seeking care



NIDS-CRAM wave 1, 2020



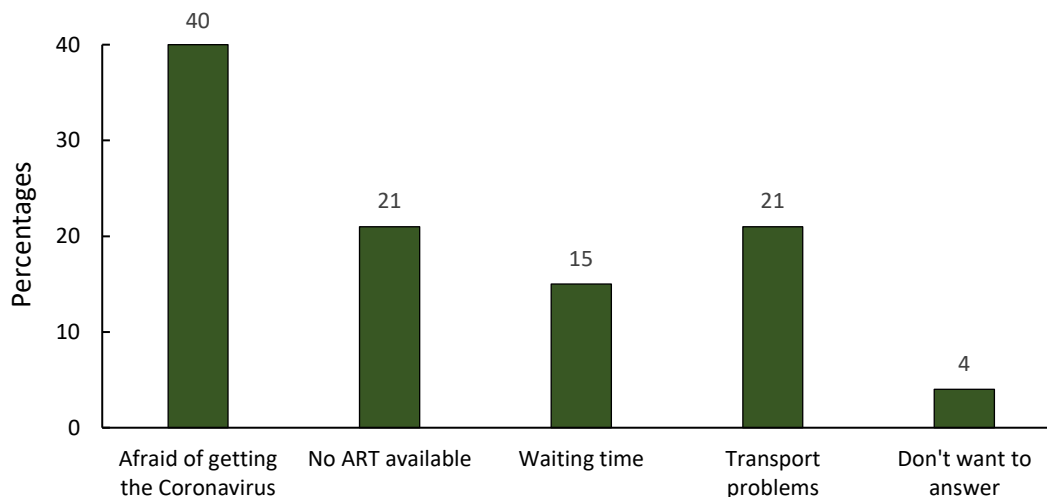
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1-in-10 mothers not accessing ARTs

- 1-in-10 HIV+ new and pregnant mothers ran out of ARTs in May and June
- Very concerning: interruption in ART risks health of mother, and increases risk of transmission to baby (vertical or breastfeeding)
- Reason for running out of ARTs: 40% selected “Afraid of getting the Coronavirus”



MATCH wave 1, 2020



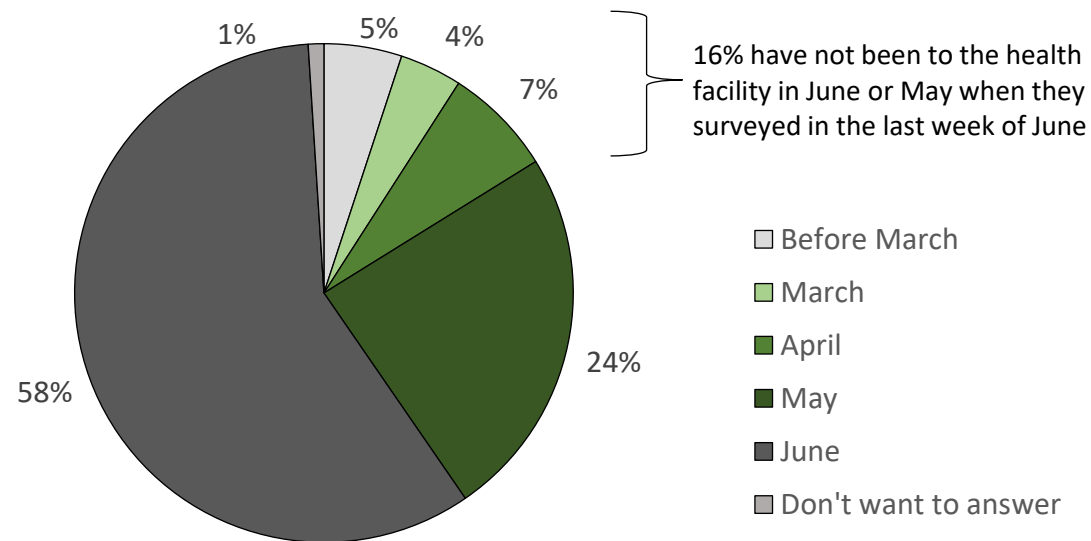
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CORONAVIRUS RAPID MOBILE SURVEY 2020

1-in-6 mothers and pregnant women report at least a 2-month gap in care

- This includes 1-in-4 mothers who needed vaccinations
- Two months considered a large gap in antenatal care as women are advised to go every six weeks
- Overwhelmingly, reason for not seeking care is COVID-19



MATCH wave 1, 2020



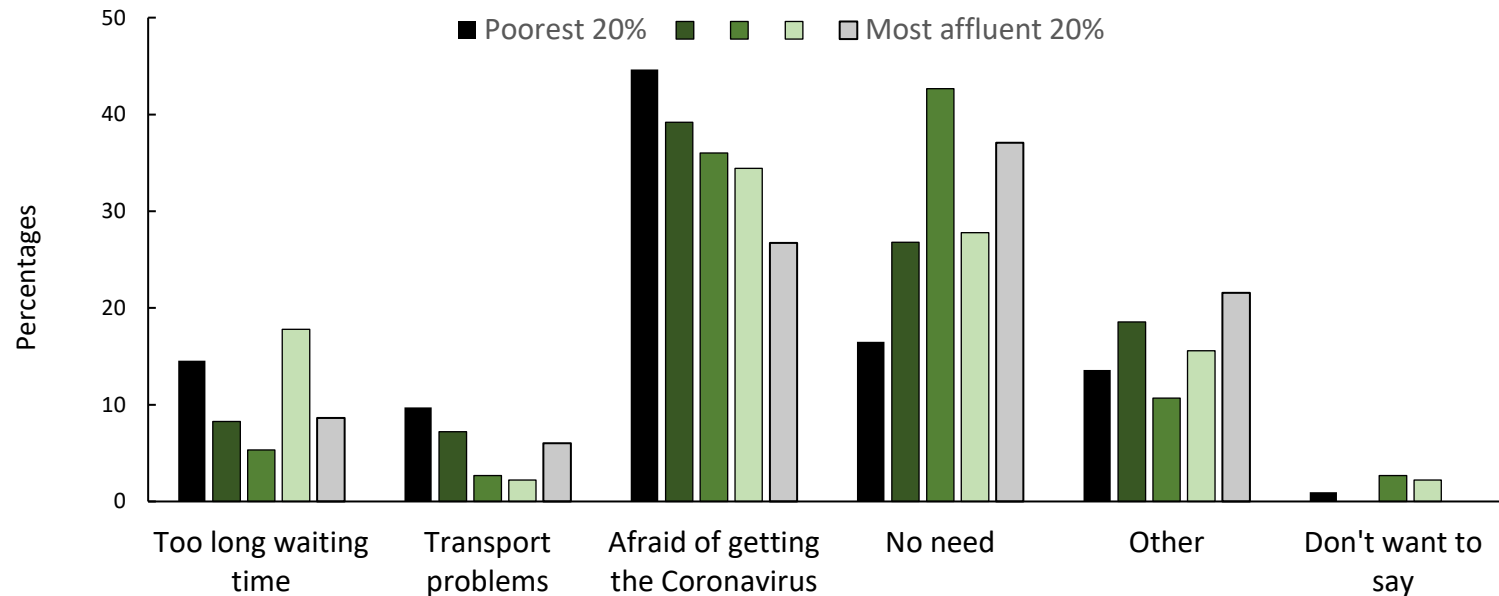
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Coronavirus fears worst amongst the poor

Looking at subsample of mothers who did not access care for 2 months, Coronavirus fears more pronounced amongst the poorest



MATCH wave 1, 2020



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CORONAVIRUS RAPID MOBILE SURVEY 2020

MATCH wave 1, 2020

- **Caveats:** small sample and worries about selection into Momconnect and also selection into responding to our survey
- We therefore see our results as complementing existing information from administrative surveys that tell us that there is a drop in attendance but cannot identify the reasons for this drop
- Also we looked at high-stakes types of services where the impact on treatment or care interruptions are high – i.e. pregnancies, young babies – but also mean that interruptions may be far less likely than for other types of services
- Lastly, we note that the samples become very small when we look at reasons for not consulting because it is a share of a share of those who did not consult (which is already small). However, we find overwhelming across all our service types that Coronavirus fears were the number one reasons, so we feel that it is robust despite concerns about small cell sizes



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Recommendations

Deploy community health workers more effectively as service linkers

Strengthen local coordination structures to ensure local ownership and champions, requirement for changing social norms

Distribute free masks to poorest communities: Not all citizens who need it can afford appropriate face masks (or enough of it). Should be distributed with instructions and information flyers

Provide specific and actionable recommendations on key preventative behaviours: focus on mask-wearing and physical distancing

Clear, concise, and consistent communication: to improve knowledge of most common symptoms (especially weakness/tiredness)

Anchor messages in hope and positive vision for future



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Dissemination

- **Policymakers**
 - Findings well-received
 - Shared with broad set of NDOH policymakers, including minister and provincial decision makers
- **Media**
 - Altogether CRAM generated R21m worth of media coverage, also including articles in international press
 - Health findings covered in Spotlight, Financial Mail, ENCA, Daily Maverick, Pretoria News, Independent Online, Mercury, Saturday Star, Moneyweb, HeartFM
- **Public:** Whatsapp, Zoom launch, Twitter, Linked-In
- Note that data is open access and freely available for download



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SPOTLIGHT



NEWS SPORT TECH BL

Vital meds go uncollected as fear of Covid-19 causes many to stay away from health facilities – new data

By Amy Green for Spotlight • 21 July 2020



File picture: Ayanda Ndamane / African News Agency (ANA)

Limited knowledge about Covid-19 symptoms in SA works against containment of virus – study

By Sihle Mlambo Jul 15, 2020



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16 Jul

The Covid-19 pandemic's far-reaching impact on pregnancy

City Press Tiyese Jeranji

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22 JULY 2020

Fear of Covid-19 has caused major disruption to SA healthcare

Fear of contracting Covid-19 at congested health facilities is the primary reason for people not seeking needed care and defaulting on their chronic medication.

spotlight



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NIDS – CRAM Wave 2

- **Currently in the field**
- **Start date 22 July 2020**
- **End date 31st August 2020**



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Thank You

