



# SHOPS Plus India

## Knowledge, Attitudes and Practice (KAP) Survey: Key Findings

Research Team  
SHOPS Plus India  
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# Components of SHOPS Plus India Program

## Component 1



Increasing contraceptive use among young men and women

## Component 2



Improving diarrhea management practices for caregivers of children under five

## Component 3



Improving tuberculosis control and care through SBCC support and support for improved government coordination

## Component 4



Improving quality of maternal and newborn care in public health facilities



# Survey Objectives

SHOPS Plus India designed a knowledge, attitudes and practice survey to **benchmark key knowledge, belief, attitudinal, and behavioral indicators** among the target audiences and to inform design of targeted interventions



**Family Planning (FP)**  
Married (18-29 years)

Facilitators and barriers to use of short acting methods with an emphasis on oral contraceptive pills (OCP).



**Child Health (CH)**  
Caregivers to Children <5 years

Behaviors, attitudes, and beliefs around use of ORS and zinc as a treatment for child diarrhea.



**Tuberculosis (TB)**  
General Population (18-59 years)

Beliefs around tuberculosis (TB) transmission and treatment that lead to stigma towards people living with TB.



# Survey Design



A **multi-stage random sample survey** was conducted from a sample frame of 6 cities, 360 urban frame survey blocks, and over 100,000 households for FP, CH, and TB modules.



The overall **target group** for the project and survey were **urban poor with a family income between Rs. 100,000 to 600,000 per annum.**



The survey was conducted in the urban cities of **Delhi, Dehradun, Ranchi, Raipur, Bhubaneshwar, and Guwahati.**

Module	Respondents	Sample
Family Planning	Married men and women 18-29 years	2811
Child Health	Primary caregivers of children under 5	2495
Tuberculosis	General population in the age range of 18-59 years	2482



# Limitations and context of research study



- **Limitations:** Survey limited to six state capitals of SHOPS Plus program states due to resource constraints
- **Context:** This survey was designed to provide evidence for program-level decision-making for the SHOPS Plus India program. Findings in this slide-deck are presented *in that context*. To learn more about the program, click [here](#).

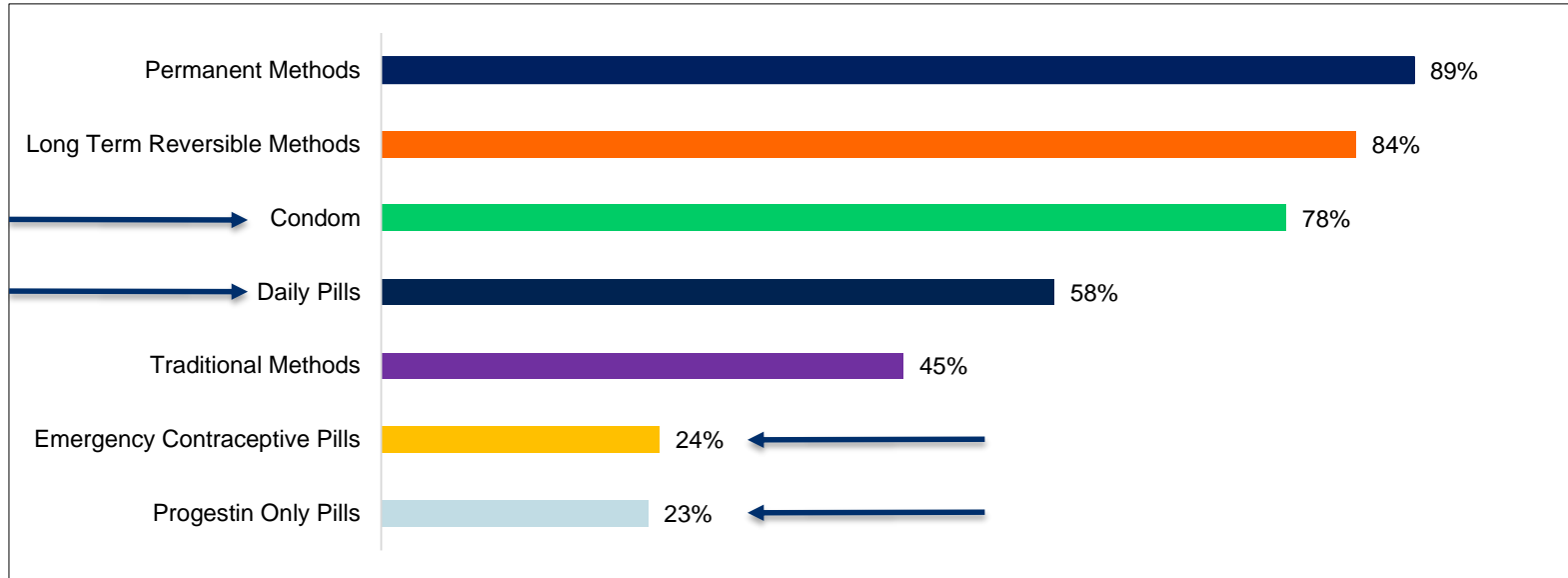


**FAMILY PLANNING:  
CURRENTLY MARRIED MEN  
AND WOMEN BETWEEN 18  
TO 29 YEARS OF AGE**



# Low awareness of oral contraceptive pills relative to other methods

% of currently married men and women aware

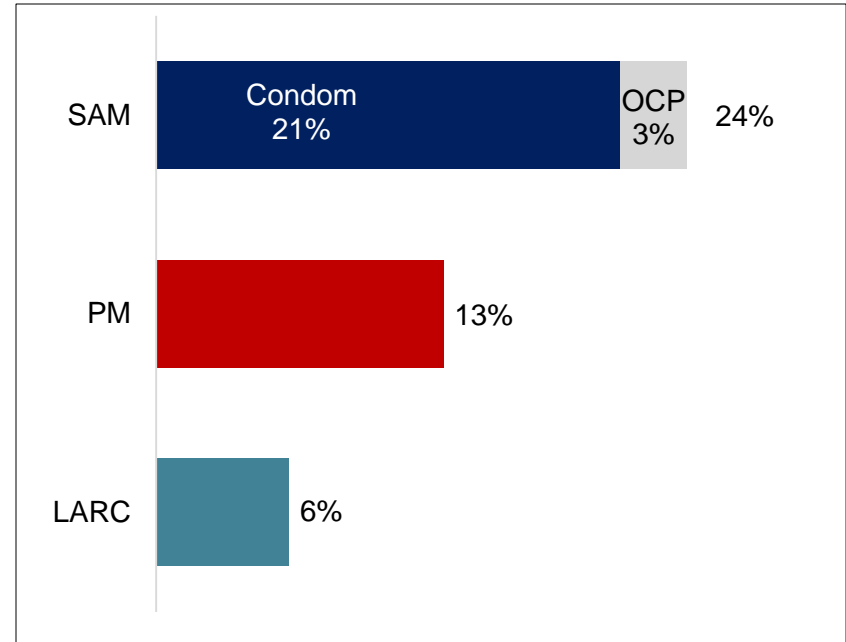
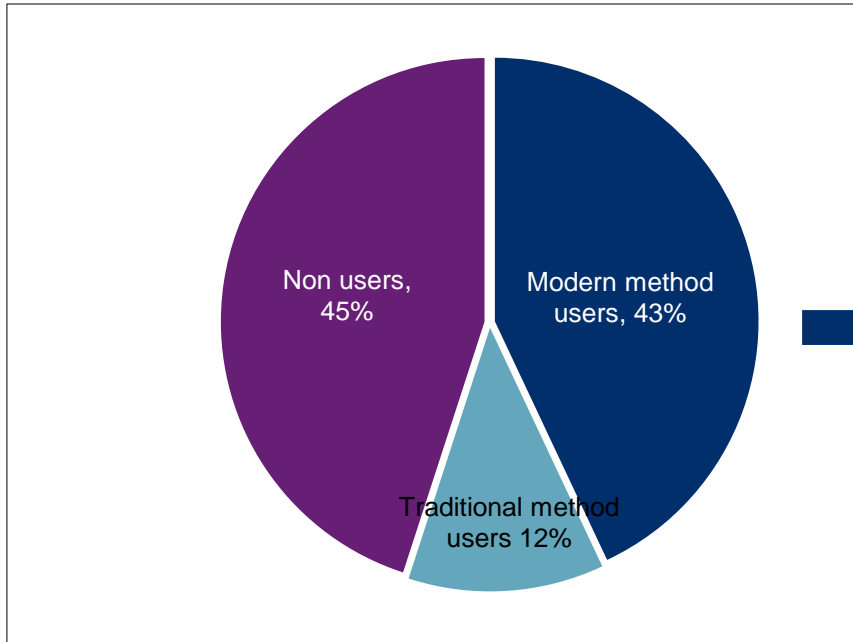


**SHOPS Plus India investments are geared towards demand generation primarily around OCP (Daily Pills) among the urban low income population, in part to address the low awareness for this category.**



# Most modern method users use SAMs

Current use of contraception among married women (N=2606)

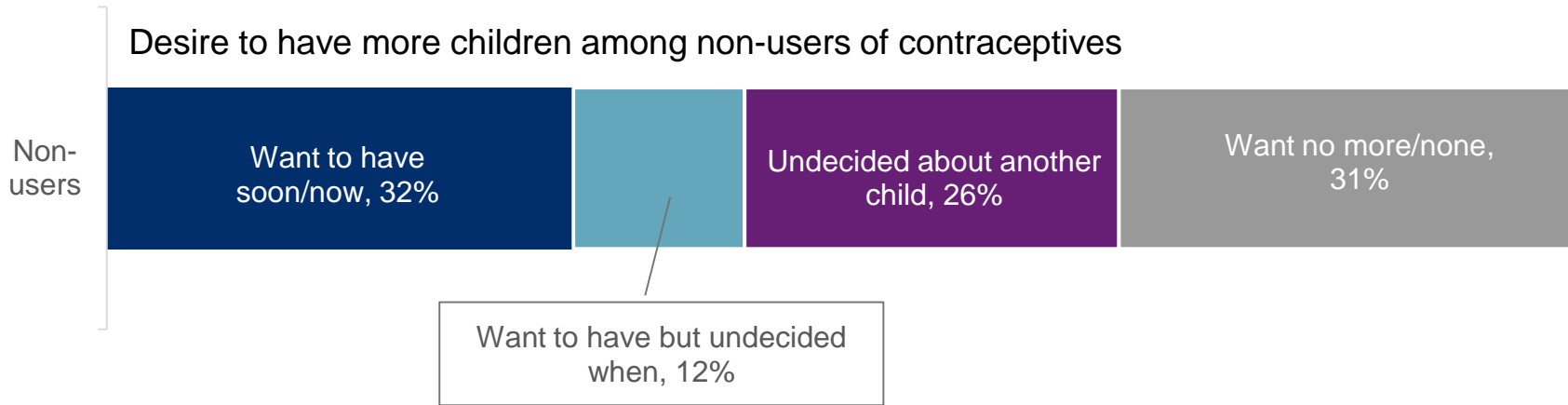


**SHOPS Plus India aims to *increase the use of short acting methods*, in particular OCP, among this target group (urban low-income married men and women aged 18-29).**





# Over half of non-users are undecided or don't want more children

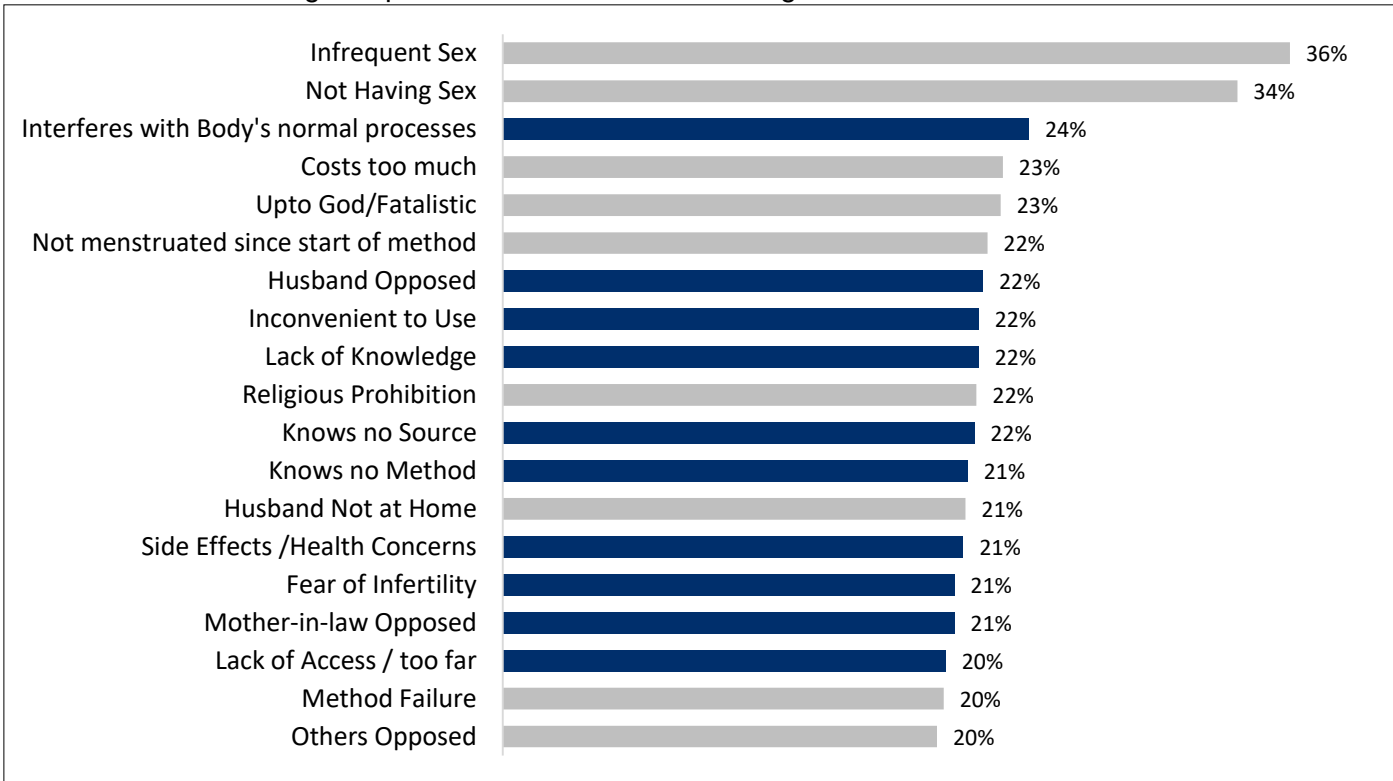


**Two-thirds of the population surveyed could potentially use SAMs, LARCs or permanent methods**



# Differentiated interventions are needed to address non-usage

Percentage responses to reasons for non-usage

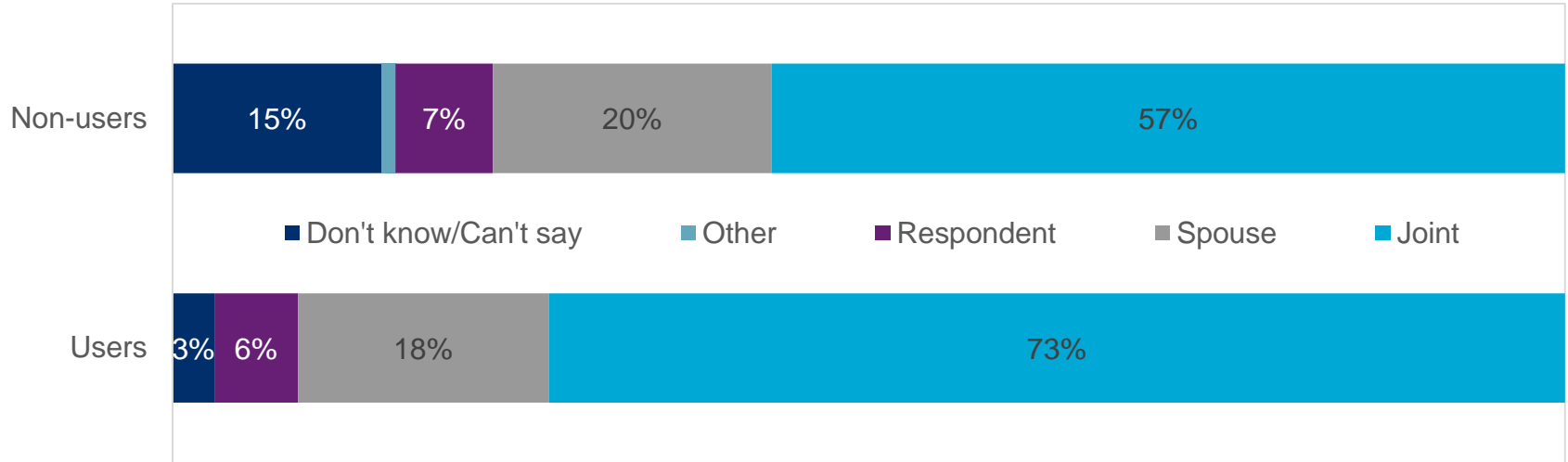


**SHOPS Plus project uses a 360° approach using mass & digital media, on-ground activities, work place interventions and contraceptive helpline to address multiple barriers (*in blue*) to non-usage.**



# Majority of users decide jointly on contraception use

## Decision-maker on use or non-use of contraception

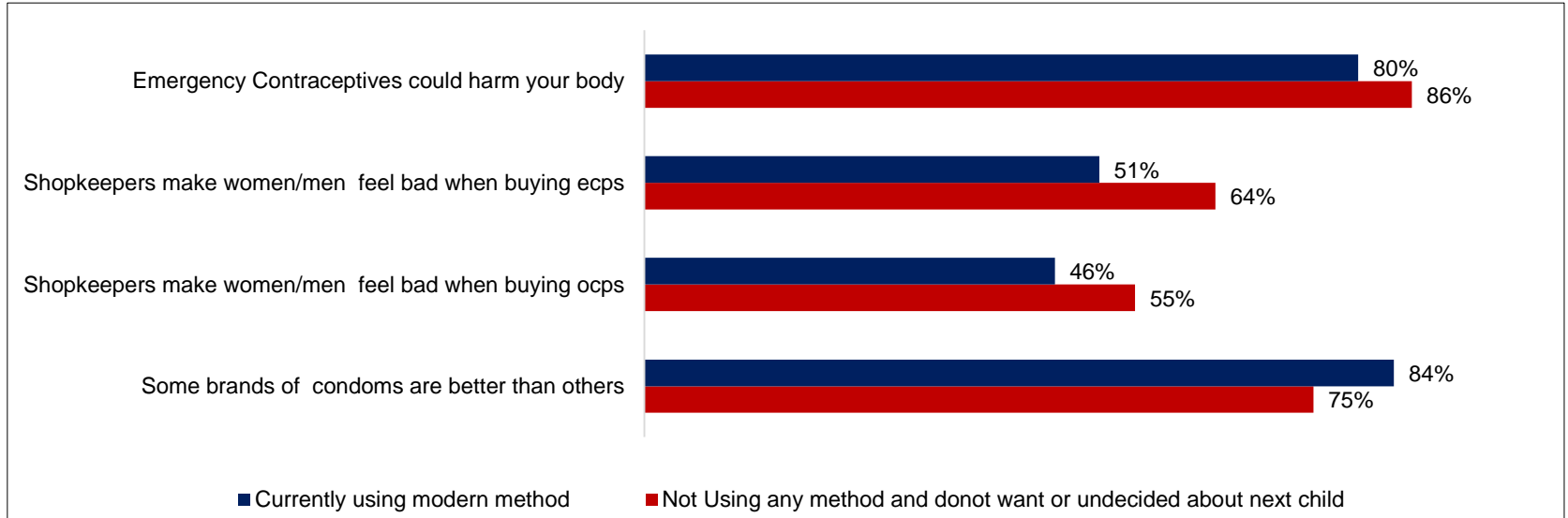


SHOPS Plus promotes spousal communication to increase male participation and support in decisions related to contraceptive use.



# More non-users feel 'judged' when buying contraceptives

Percentage who agreed with each statement

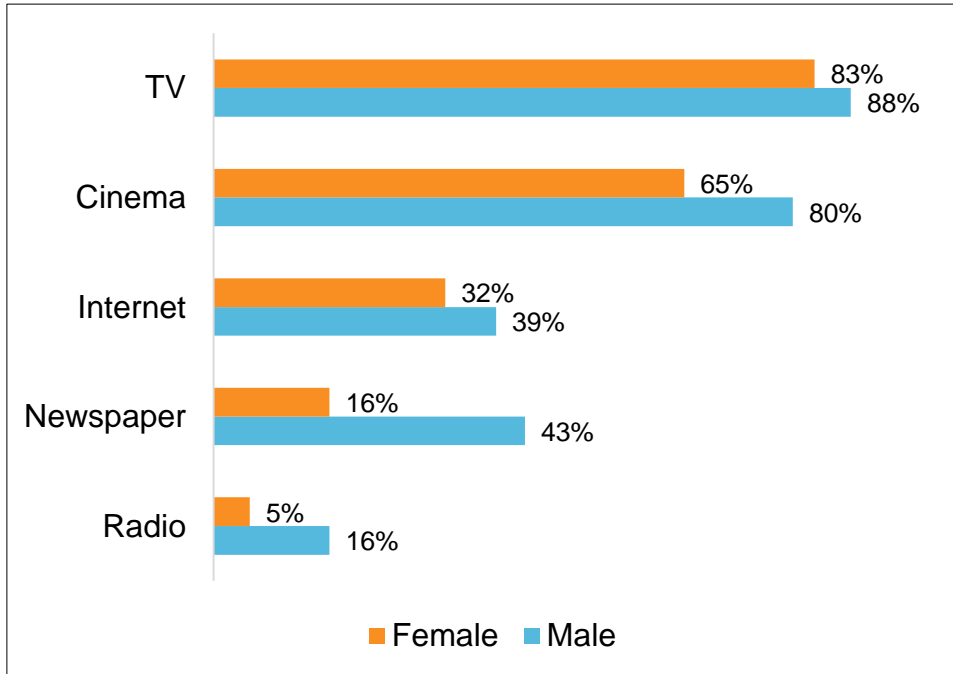


**Findings point to the importance of sensitizing shopkeepers to improve access to methods and to improve messaging on safety of oral contraceptive pills.**



# TV viewership is high; access to internet is substantial

Percent of currently married women and men who are exposed to different media everyday or at least once a week



Given that major SHOPS Plus India Investments are through the mass media route, the sample validates the assumption that most married men and women watch TV, while radio listenership is much lower.

**The digital interventions planned under SHOPS Plus India have potential to reach our target groups, with a third of the sample regularly accessing the Internet.**



# Highlights

- Awareness and use of oral contraceptive pills is relatively low among young urban married men and women, a segment that SHOPS Plus is targeting.
- Majority of this segment who are either undecided or do not want any more children risk an unwanted pregnancy by not using contraception. The SHOPS Plus-operated helpline seeks to provide appropriate counselling to this group based on their needs for a short- or a long-acting method, or a permanent method.
- Exposure to TV is high among this segment, and access to internet is substantial. SHOPS Plus's strategy to use mass and digital media to reach this segment is in line with the media habits of the targeted segment.

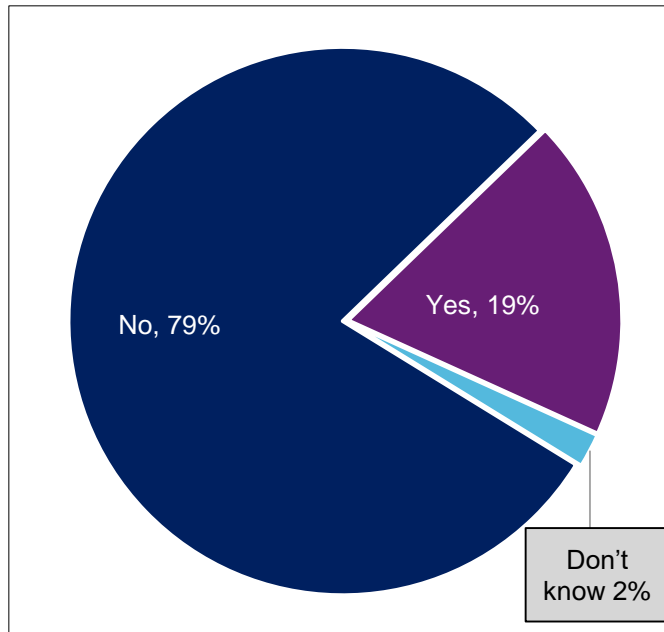


**CHILD HEALTH:  
PRIMARY CAREGIVERS OF CHILDREN  
BETWEEN 0-5 YEARS OF AGE**

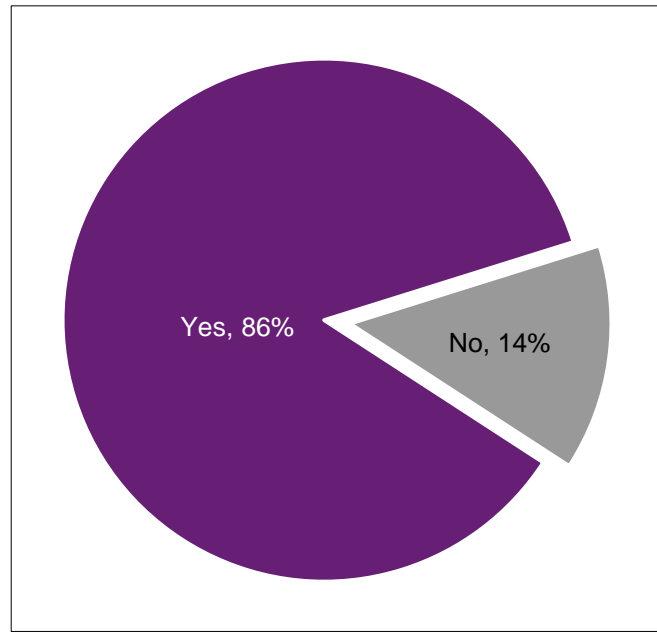


# Prevalence of diarrhea and treatment sought

Incidence of diarrhea in the last 6 months



Treatment or advice sought for diarrhea



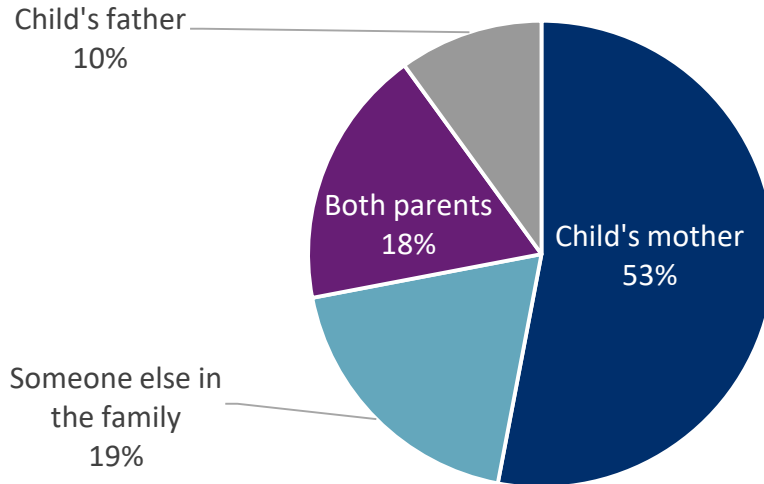
**1 out of 5 caregivers** reported their children had **diarrhea in the last 6 months**, most of whom sought treatment or advice.





# Child's mother is the key decision maker for seeking advice or treatment for diarrhea

Decision-maker for treatment or advice sought



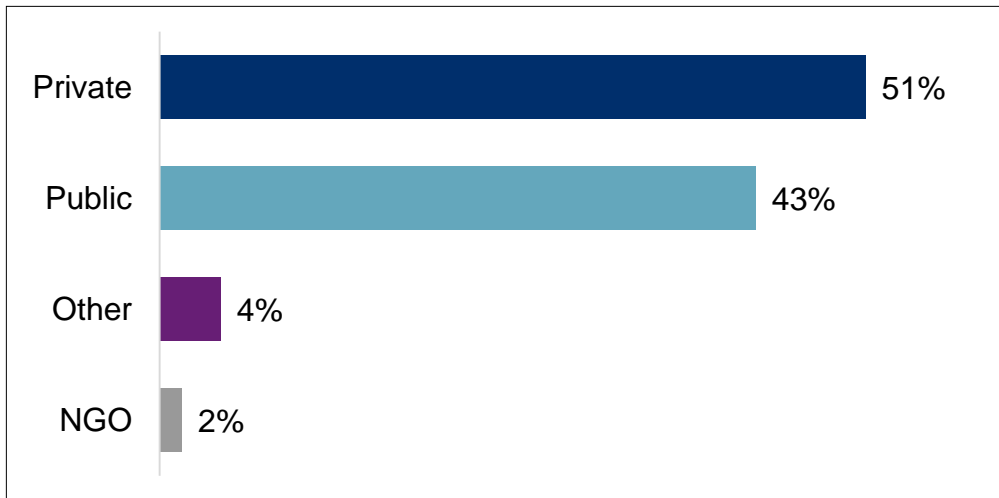
- In more than half the cases child's mother was the key decision maker on seeking advice or treatment for child's diarrhea
- In less than one fifth of cases the decision was made jointly by both parents

**SHOPS Plus India messages on diarrhea treatment target both male and female caregivers, and promote joint decision-making.**



# Private sources are the first care-seeking point

Source for those who sought treatment



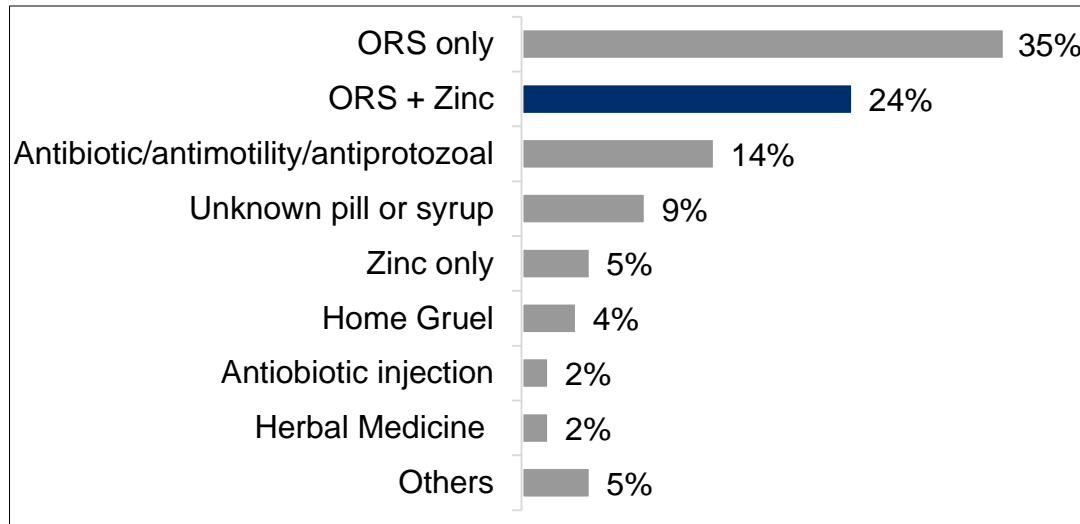
- More than **half of the respondents** said that they first sought treatment from a **private source**, which is in line with the findings of NFHS-4.
- A pattern emerged, of shifting towards more **public sources**, as **the child grew older** (data not shown).

**SHOPS Plus India is working with private sector manufacturers and chemists to promote Oral Rehydration Salts (ORS) and zinc as the first line of treatment on diarrhea.**



# Only a quarter of children received the recommended *first-line treatment* for diarrhea

## First treatment given for diarrhea



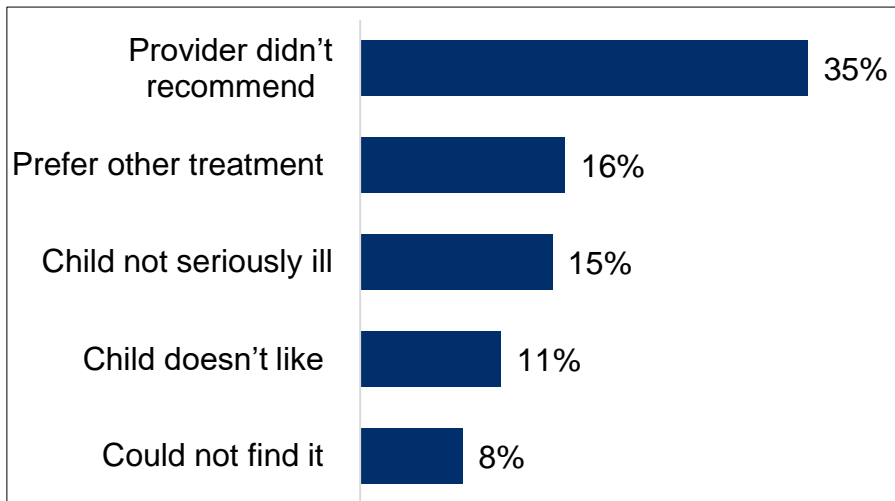
- **One-third** of children received only **ORS** as the first-line treatment.
- Only **1 out of 4** children receive **both ORS and zinc** as the first-line treatment.
- There is a need to promote ORS and zinc as the **first line treatment** among both caregivers and service providers.

SHOPS Plus India is promoting ORS and zinc as the first line treatment for child diarrhea.

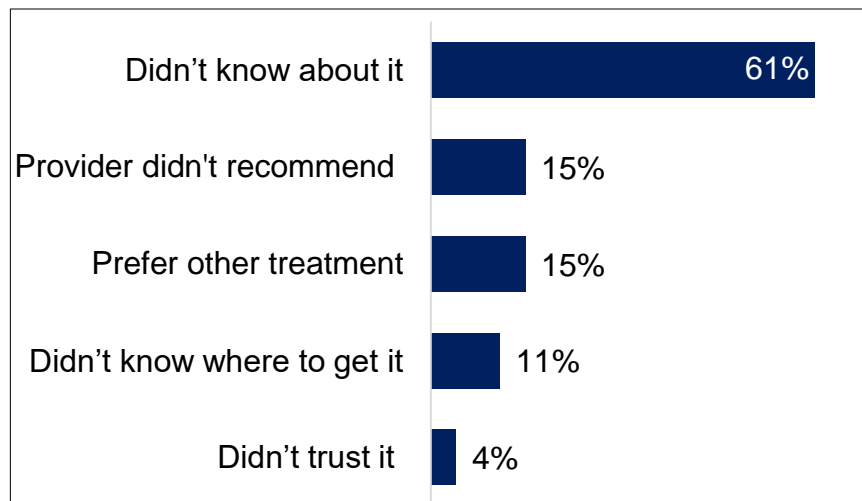


# Zinc awareness is low among caregivers

Most common reasons for not giving ORS



Most common reasons for not giving Zn

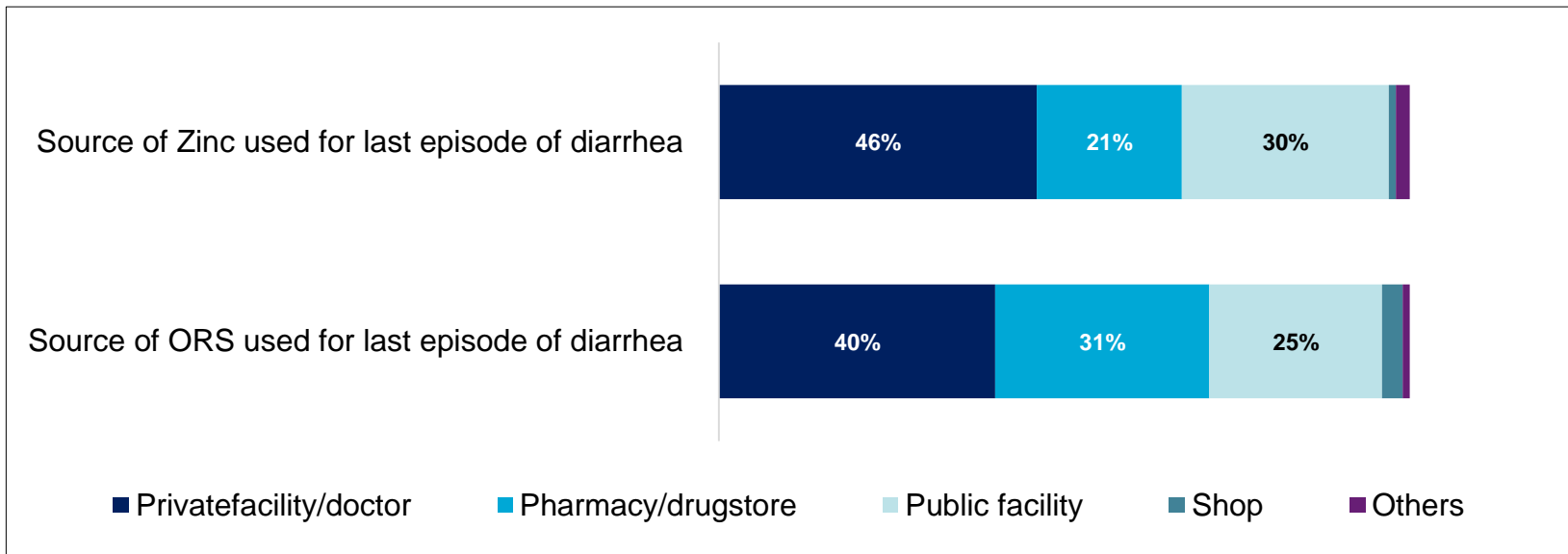


- **Provider's lack of recommendation** was the primary reason cited by caregivers for **not using ORS** as treatment.
- **Lack of awareness** was the main reason cited for not treating with **zinc**.

**SHOPS Plus India communications messages emphasize the importance of immediate treatment with zinc, for the full 14-day regimen.**



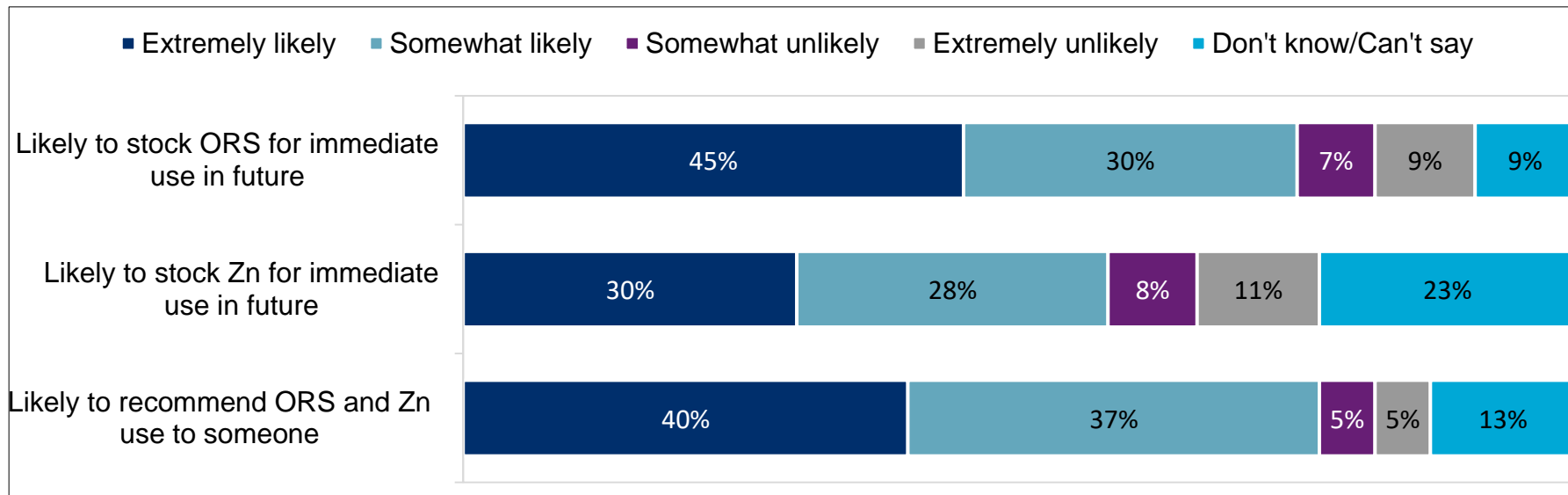
# Private facility and drugstores are the major sources of ORS & zinc



**Given that source of treatment and source of commodity are primarily private, SHOPS Plus India is working closely with the private sector clinic chains to raise awareness around use of ORS and zinc.**



## Likelihood of stocking ORS and zinc at home



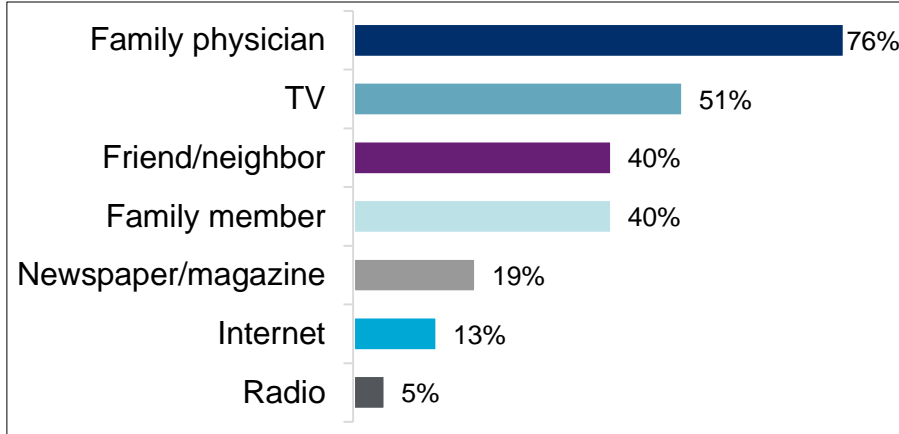
**SHOPS Plus India mass media communications are oriented around stocking ORS and zinc from the Theory of Change proposition that availability at the right moment, when diarrhea strikes a child under five, is one of the key issues to address low use.**



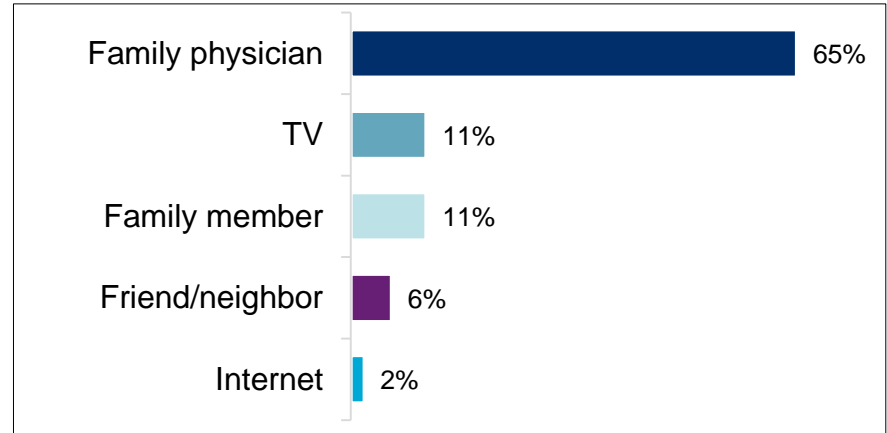
# Trusted sources of information on diarrhea

## Primary caregivers of children under 5 years of age

Sources of information on diarrhea



Most trusted sources of information on diarrhea



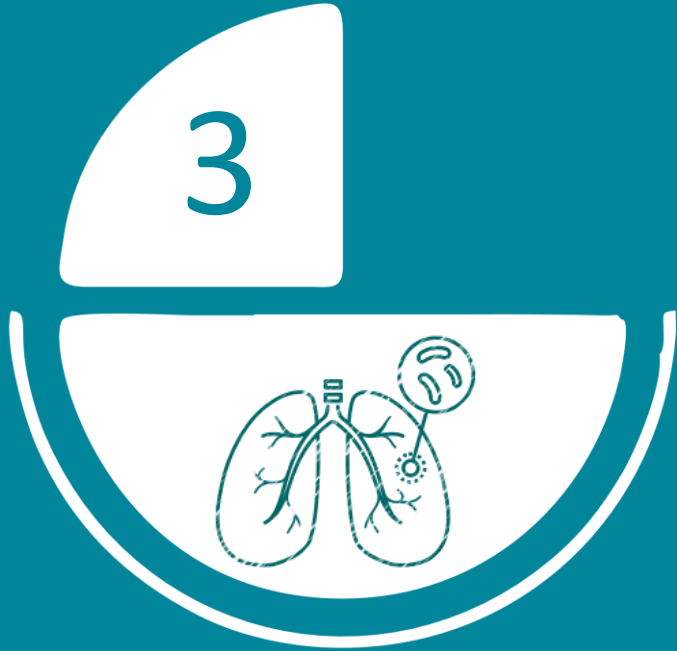
- **SHOPS Plus India investments for child health awareness are multi-pronged with a primary focus on activities to generate awareness around recognition and treatment of diarrhea.**
- **The on-ground activities planned in 6 cities are complemented with mass media routes (TV and radio) and digital campaigns.**
- **SHOPS Plus India is partnering with private sector clinic chains to disseminate information through service providers by enabling them with communication tools.**



## Highlights

- SHOPS Plus India interventions seek to increase the awareness and use of ORS and zinc for treatment of child diarrhea
  - Although treatment seeking through private and public health services is high, only one fourth of children under 5 receive the recommended first-line treatment of ORS and zinc
  - SHOPS Plus interventions use a 360° communications approach by promoting use of ORS and Zinc among caregivers, and through private sector partners among health service providers and chemists
  - SHOPS Plus's communication strategy encourages home stocking of ORS and zinc to start treatment on time, and complete the 14-day course of zinc





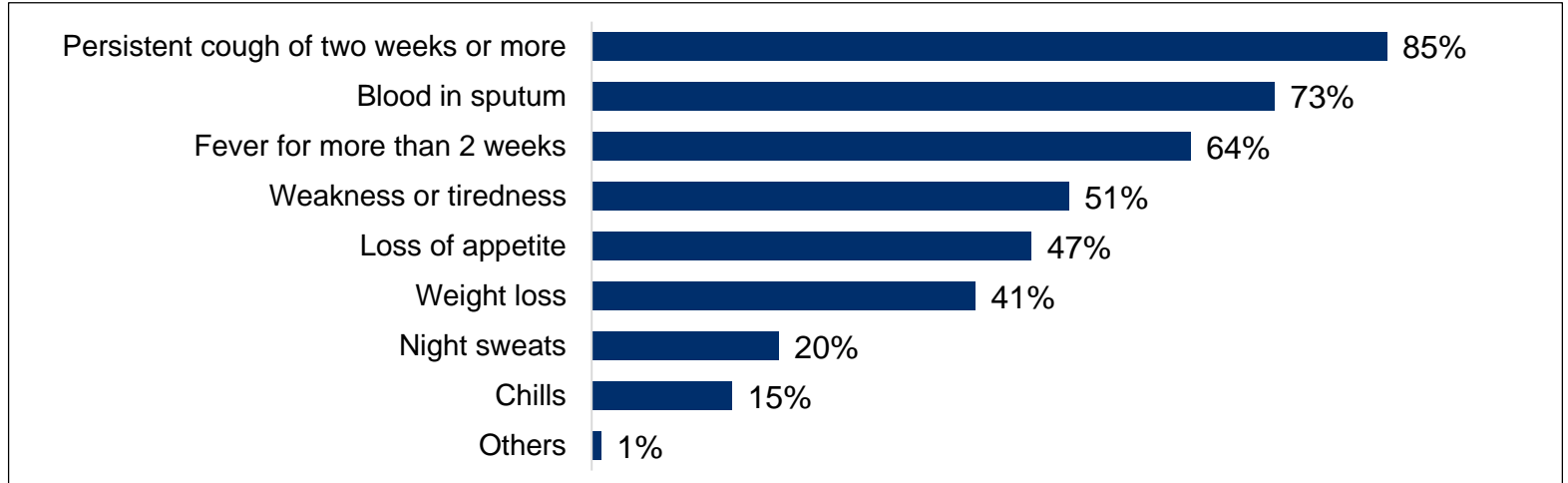
## TUBERCULOSIS:

MEN AND WOMEN BETWEEN 18-  
59 YEARS OF AGE



# High awareness of symptoms of TB

Percent aware (prompted) of TB symptoms

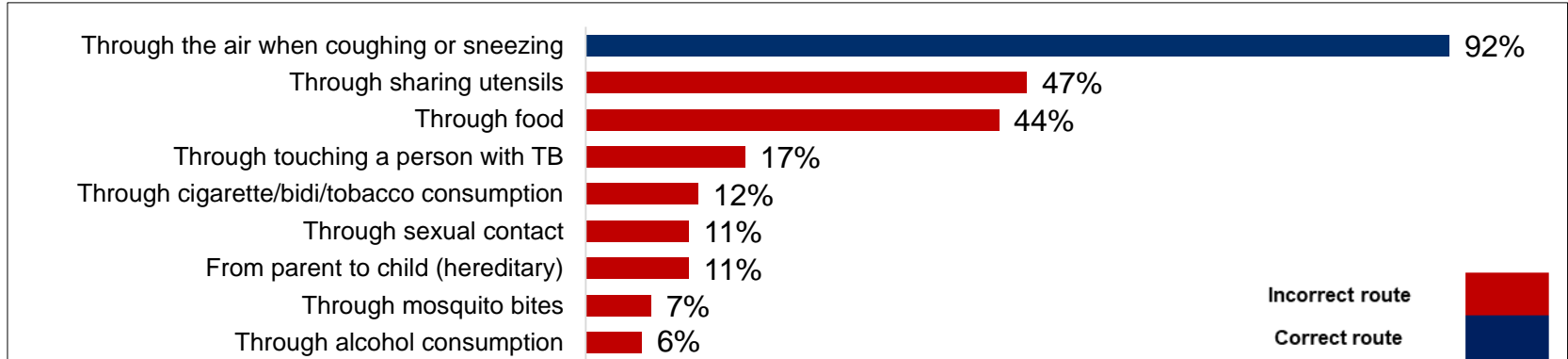


- The **awareness around persistent cough** of two weeks or more was **almost universal** in this target group.
- When prompted with information on other symptoms, awareness was slightly higher than spontaneous awareness.



# Lack of awareness on correct routes of transmission

Percent aware (unprompted) of routes of TB transmission



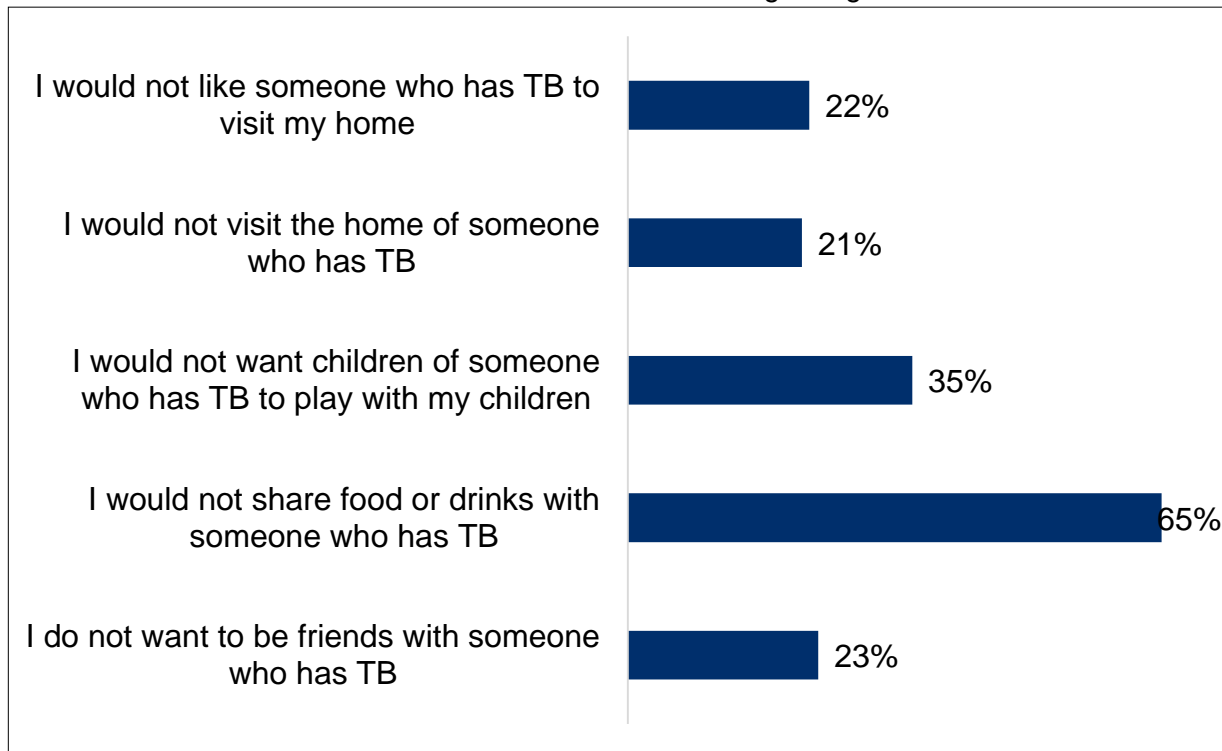
- The knowledge that **TB is transmitted through air** when coughing and sneezing was **almost universal**.
- However more than **2 out of 5 respondents** also reported (incorrectly) that TB can be **transmitted through utensils or by sharing food**.

**The awareness or lack of it on the correct channels of transmission of TB is indicative of prevalent stigma attached to people living with TB (PWTB).**



# Social stigma towards PWTB exists

Percent agreeing with each statement



- Two out of every 3 respondents reported that they would not share food or drinks with someone who has TB.
- This is consistent with the belief that TB spreads through sharing of food or utensils.
- This leads to discrimination against people with TB and their family members/children.

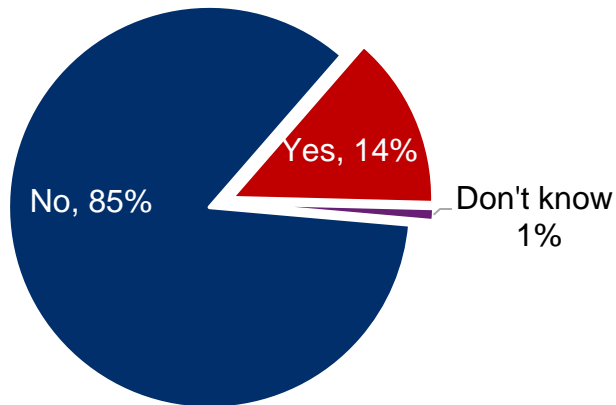
**SHOPS Plus India  
communication addresses  
stigma and discrimination  
against PWTB**



# Secrecy around TB status for a family member

A proxy for stigma around TB

Would you keep TB status secret for a family member?

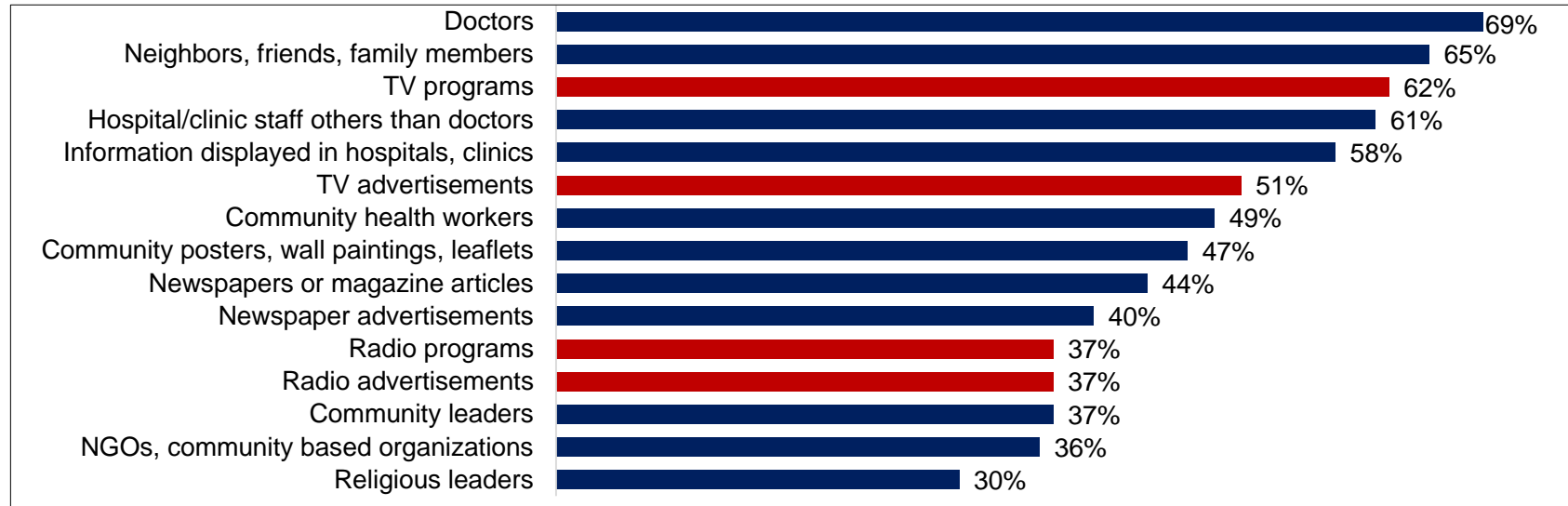


- Only **14% of the respondents** reported that they were **not comfortable sharing the TB status** of a family member.
- This probably indicates social desirability bias in the response because almost two-thirds mentioned that they would not want to share food/drinks with someone who has TB.

• SHOPS Plus is developing an SBCC strategy for reducing stigma against people with TB



## Doctors followed by friends and family are the most trusted source of information on TB



- **SHOPS Plus is working with CTD/RNTCP to develop an SBCC strategy for reducing stigma against people with TB**
- **Being an important source of information on TB, doctors and support staff also need to be sensitized in handling people with TB and their families so as not to reinforce the prevalent stigma against them**



## Highlights

- In spite of high awareness about TB, myths and misconceptions about how it spreads leads to stigma and discrimination against people with TB.
- SHOPS Plus is working with RNTCP/CTD to develop a strategy for reducing stigma against people with TB.
- In addition to mass media communication, its important to sensitize doctors and support staff who are an important source of information on TB for general population.



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