

Public Health Messages for Social Behavior Change in the Wake of COVID-19: A Qualitative Study

Fannah Al Fannah Al Araimi¹, Sitwat Usman Langrial² and Salah T. Al Awaidy^{3*}

¹Ministry of Health, Muscat, Oman

²Sur University College, Oman

³Office of Health Affairs, Ministry of Health, Muscat, Oman

Received: 7 December 2020

Accepted: 27 December 2020

*Corresponding Author: salah.awaidy@gmail.com

DOI 10.5001/omj.2021.98

ABSTRACT

Objectives: To study the impact of public health messages on social and behavioural change among recovered patients and general population in response to COVID-19 in Oman.

Methods: Four focus group discussions among recovered COVID-19 patients were organized by the residents of Muscat Governorate through video-conference to collect their insights on public health messages. Upon culmination of each discussion, we held debrief sessions with a particular focus on the responses and making notes of comments. Qualitative themes were also recorded at the end of each focus group.

Results: Of the 40 participants, all participants were COVID-19 recovered cases. The overall mean age was 33.4 ± 28.5 years and 70% (n = 28) were males. From the discussions, we observed a generally positive attitude towards public health messages. However, it was also stressed that the nature of such a behavioural change is so that there is a significant risk for psychological health. Lack of social interaction, for example, has led to lower motivation, a

sense of losing the meaning of life, and personal distress. While all the participants acknowledged and appreciated the efforts made by the government authorities in disseminating and educating the masses on such a large scale using different modes of message delivery, all of them did show a serious concern as to whether they will be able to continue coping with the ongoing situation.

Conclusions: The responses from the participants suggest that although public health messaging brought a significant social change in Oman. However, this conclusion cannot be generalised. Further, there is a continued need for strong public health policies with a particular focus on psychological health.

Keywords: COVID-19, public health messages, social behaviour change, Oman.

Introduction

The coronavirus (COVID-19) pandemic has become a colossal health calamity and calls for large scale social behaviour change.^{1,2} The nature of the ongoing pandemic is such that it has added burden to the health system.³ It has affected every walk of life and significant number of studies have addressed how COVID-19 has crippled life globally. There is evidence that the spread of COVID-19 can be significantly slowed down by bringing social behaviour change.⁴ We have observed different countries taking varying methods to respond to the pandemic. For an instance, Taiwan was among the leaders in administering institutional quarantine and demanding the practice of social distancing.⁵ However, the United States' government showed reluctance in imposing such measures where social isolation initiatives.⁷ Despite a vast campaign comprising of sending out public health messages, it was noticed that people were not readily willing to comply with the recommended practices.⁸ The problematic nature of practicing social distancing is multipronged. Besides other issues, it has resulted in

mass changes in people's work-life⁷ and has raised serious concerns about psychological wellbeing.⁹ The severity of COVID-19 calls for extreme measures, however, the challenge remains to ensure people comply with social behaviour change recommendations. Several studies have been conducted focusing on areas such as Epidemiology of COVID-19^{10, 11} preliminary estimation of the disease¹², and mental wellbeing of the health workers.¹³ As a part of the initiative, public health messages are being sent out to the population to adhere with the precautionary measures. The public health messages comprised of general health advice and the recommendations made by the Supreme Committee for COVID-19, Oman. We are in the midst of an unprecedented era where social isolation, infection fear, boredom, fake information, financial loss, and stigma have affected almost everyone.¹⁴ We examined the impact of public health messages on people in adhering to the recommendations and coping with stress.

Methods

The selection criteria for the focus group discussion was purposive given the nature of the study and that we wanted to include participants who were willing to share the opinions and experiences freely. Such selection criteria is generally applied in focus group discussions. We conducted four online focus group discussions with a total of 40 (12 Females, 28 Males) participants between 8 and 10, August 2020. All participants were Omani citizens from the Muscat Governorate. Online focus groups are generally well accepted when collecting public opinion relating to health issues, especially from the geographically dispersed populations.¹⁵ A total of forty (n=40) recovered patients of COVID-19 took part in focus group discussions. These discussions were held through Zoom video-conferencing.

38 (95%) participants took part in the discussion using both audio/video options while 2 (females) did not utilize the video option. Upon completion of the focus group discussions,

data analysis was performed iteratively so that we could identify emerging themes. As the discussions were recorded, we analyzed the transcripts individually. We also applied negative case analysis¹⁶ to identify any information that was not related to an emerging theme. We continued analyzing the data until we reached the saturation point.¹⁷

Results

Of the 40 participants, all participants were COVID-19 recovered cases. The overall mean age was 33.4 ± 28.5 years and 70% ($n = 28$) were males [Table 1]. Data analysis revealed three major themes: 1) Appreciation for government's efforts for spreading COVID-19 awareness through public health messages, 2) Need for psychological counseling psychological, and 3) fear that not everyone is following social distancing. We also noted some sub-themes that will be discussed below.

Appreciation for Government's Efforts

All participants expressed their appreciation for the government authorities to launch such a massive campaign for sending out public health messages. In their opinion, the messages had a significant impact on how people had gradually started taking COVID-19 seriously and hence the sub-theme was social behavior change. One of the participants, termed this as a "shift in people's attitudes towards social distancing" (Female, Age 26). This was, however, followed by a discussion that revealed a general sense of emotional distress as a consequence of losing social life. Participants spoke about how they were "taking it easy" (Male, Age 23) in the beginning. However, as time passed and a serious spike in COVID-19 cases occurred, people started being fearful of not knowing how to tackle the situation. The swiftness of the government authorities in initiating a nation-wide campaign sharing information as well as precautionary measures "was helpful" (Male, Age 26).

Need for Psychological Counseling

All participants expressed their concerns about growing psychological stress. It was observed that a sudden change in societal norms and behaviours brought with it stress, anxiety, and depression. One participant highlighted the need for “enhanced mental health support”, which we highlight as a second sub-theme. All participants believed that staying at home with no social life was causing a negative psychological effect on people. The pandemic with subsequent social restrictions has made people suffer financially, socially, and mentally (Male, Age 32). The way people had to change their lifestyle in just a matter of days has caused “a great deal of distress” (Male, Age 37). A significant number of participants shared their views about anxiety and depression as they were confined to the boundaries of their homes. Others added that losing jobs within a short period has left many people in acute distress.

Fear that Not Everyone Was Following Social Distancing

All participants stated that they were following the recommendations especially social distancing and will continue to do so even when “things become better” (Female, Age 21). Relating their higher level of civil consciousness to the government’s efforts in educating people, they added that this was not only about an individual, but “other members of the society” (Female, Age 35). All participants expressed their concerns about incidents where people will not adhere to the guidelines. Some participants reported noticing social gatherings in recent times, which is “just unbelievable” (Male, Age 29). The findings from the focus group discussions highlight common views, experiences, and concerns. However, as we applied negative case analysis, we did notice other issues articulated. For example, some participants suggested social isolation, lockdowns and quarantines had a positive side where they had an opportunity to spend more time with their loved ones, sit back and relax, reflect on themselves and plan for the future in a much focused manner.

Discussion

Findings from this study indicate that people in Oman are largely satisfied with the efforts made by the government authorities in educating people against the threat of COVID-19. It can be observed that there is a positive impact of public health messages on the population. It is also noticed that people are accepting a swift social behavioural change. Findings also reveal that there is a general sense of anxiety, stress, and depressive symptoms such as sleeplessness among people resulting from quarantines, lockdowns, financial stress, and social isolation. From the discussions, it was clear that almost all the participants were experiencing anxiety and were thinking of seeking psychological help. The discussions revealed that the negative psychological impact of the ongoing pandemic is based on multiple factors, including but not limited to, lack of social life, joblessness, changed lifestyles, and a general sense of losing freedom. We cautiously suggest that the greatest concern that is revealed from this study is about people's mental and psychological health and how people will cope with a high level of stress, anxiety, and depression, should the pandemic continue to grow for an even longer period. Several of our findings are in line with existing literature on the social needs of society and the adverse effects of social isolation.¹⁷ For example, it was noticed that isolation, joblessness, sense of fear, extended lockdowns led to anxiety and depressive symptoms. Like any research work, this study has its limitations. First, the possibility of biased responses because of social desirability cannot be ruled out, which can be a case in any focus group discussion. Second, none of the participants were above the age of 50, which means we could not record the experiences of participants above the age of 50 years.

Conclusions

The responses from the participants suggest that while public health messages brought a significant social change in Oman. However, this conclusion cannot be generalised especially

because we had a relatively small sample size. The responses also indicated a general sense of fear among the participants about other people not following the guidelines and recommendations made by the Supreme Committee for COVID-19, Oman. Lastly, it is evident that there is a great deal of stress and anxiety that people are going through and we therefore advocate for a sustained effort both in terms of targeting social and behavioral change as well as supporting the population in dealing with psychological stress.

Acknowledgements. The authors would like to thank all the participants for their time and valuable input.

References

1. Holmes EA, O'Connor RC, Perry VH, Tracey I, Wessely S, Arseneault L, Ballard C, Christensen H, Silver RC, Everall I, Ford T. Multidisciplinary research priorities for the COVID-19 pandemic: a call for action for mental health science. *The Lancet Psychiatry*. 2020 Apr 15.
2. Van Bavel JJ, Baicker K, Boggio PS, Capraro V, Cichocka A, Cikara M, Crockett MJ, Crum AJ, Douglas KM, Druckman JN, Drury J. Using social and behavioural science to support COVID-19 pandemic response. *Nature Human Behaviour*. 2020 Apr 30:1-2.
3. Galea S, Merchant RM, Lurie N. The mental health consequences of COVID-19 and physical distancing: The need for prevention and early intervention. *JAMA internal medicine*. 2020 Jun 1;180(6):817-8.
4. Dryhurst S, Schneider CR, Kerr J, Freeman AL, Recchia G, Van Der Bles AM, Spiegelhalter D, van der Linden S. Risk perceptions of COVID-19 around the world. *Journal of Risk Research*. 2020 May 5:1-3.

5. Beech H, Rubin AJ, Kurmanaev A, Maclean R. The Covid-19 Riddle: Why Does the Virus Wallop Some Places and Spare Others?. *New York Times*. 2020 May;3.
6. Mervosh S, Lu D, Swales V. See which states and cities have told residents to stay at home. *New York Times*. 2020 Apr 20.
7. Lunn PD, Belton CA, Lavin C, McGowan FP, Timmons S, Robertson DA. Using Behavioral Science to help fight the Coronavirus. *Journal of Behavioral Public Administration*. 2020 Mar 29;3(1).
8. Coibion O, Gorodnichenko Y, Weber M. Labor markets during the covid-19 crisis: A preliminary view. *National Bureau of Economic Research*; 2020 Apr 16.
9. Kawohl W, Nordt C. COVID-19, unemployment, and suicide. *The Lancet Psychiatry*. 2020 May 1;7(5):389-90.
10. Khamis F, Al Rashidi B, Al-Zakwani I, Al Wahaibi AH, Al Awaidy ST. Epidemiology of COVID-19 infection in Oman: analysis of the first 1304 cases. *Oman Medical Journal*. 2020 May;35(3):e141.
11. Faryal Khamisa, Ibrahim Al-Zakwani, Hamed AlNaamani, Sultan AlLawati, Nenad Pandak, Muna BaOmar, et al. Clinical characteristics and outcomes of the first 63 adult patients hospitalized with COVID-19: An experience from Oman. *Journal of Infection and Public Health*. 2020;13(7):906-913. doi:10.1016/j.jiph.2020.06.002
12. Zhuang Z, Zhao S, Lin Q, Cao P, Lou Y, Yang L, He D. Preliminary estimation of the novel coronavirus disease (COVID-19) cases in Iran: A reply to Sharifi. *International Journal of Infectious Diseases*. 2020 Jun;95:429.
13. Badahdah A, Khamis F, Al Mahyijari N, Al Balushi M, Al Hatmi H, Al Salmi I, Albulushi Z, Al Noomani J. The mental health of health care workers in Oman during the COVID-19 pandemic. *International Journal of Social Psychiatry*. 2020 Jul 8:0020764020939596.

14. Tates K, Zwaanswijk M, Otten R, van Dulmen S, Hoogerbrugge PM, Kamps WA, Bensing JM. Online focus groups as a tool to collect data in hard-to-include populations: examples from paediatric oncology. *BMC Medical Research Methodology*. 2009 Dec 1;9(1):15.
15. Carey MA. Comment: Concerns in the analysis of focus group data. *Qualitative health research*. 1995 Nov;5(4):487-95.