



# Institute for Health Metrics and Evaluation

## Data Release Information Sheet

### ***Data Summary***

Dataset name: Premise General Population COVID-19 Health Services Disruption Survey 2020

Project name: COVID-19 Health Services Disruption Survey 2020

Date of release: November 5, 2020

#### Summary:

The COVID-19 Health Services Disruption Survey 2020 is a series of surveys developed to assess the level of disruption to a range of health services resulting from the COVID-19 pandemic and subsequent government mandates and changes in behavior to mitigate the spread of the disease.

This survey was conducted in 76 countries using the smartphone-based Premise data collection platform. Respondents were individual members of the general population. Data were collected from 52,492 respondents. The survey focused on the level of disruption to the provision of general health services, including visits to medical providers and access to medication.

The survey was developed specifically to assess the change in levels of service delivery prior to, and immediately following, the onset of the COVID-19 global pandemic. Data generated from this survey is not intended to be used as an overall estimate of the level of health service delivery.

#### Relevant publications and visualizations:

- <https://www.gatesfoundation.org/goalkeepers/report/2020-report/#GlobalPerspective>

### **Acknowledgements**

#### Contributing organizations:

- Institute for Health Metrics and Evaluation (IHME)
- Bill and Melinda Gates Foundation (BMGF)
- Premise Data Corporation

#### Funders:

- Bill and Melinda Gates Foundation (BMGF)

#### Suggested Citation:

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## Data Files Information

### File Inventory

File Name	Description	Version Date
IHME_PREM_GEN_POP_2020_Y2020M11D05.CSV	Data	November 5, 2020
IHME_PREM_GEN_POP_2020_CODEBOOK_Y2020M11D05.CSV	Codebook	November 5, 2020
IHME_PREM_GEN_POP_2020_QUESTIONNAIRE_Y2020M11D05.PDF	Questionnaire	November 5, 2020
IHME_PREM_GEN_POP_2020_INFO_SHEET_Y2020M11D05.PDF	Data Release Information Sheet	November 5, 2020

### Data Structure

Each row represents one respondent. The respondent is uniquely identified by the variable `observation_id`.

### Codebook

This contains variable names, questions (variable labels), numeric values and labels for coded values, and question types. The codebook is provided in a machine-actionable CSV format.

There are five types of questions found in the codebooks: Built-in data, IHME generated, Select multiple, Select one, and Text. These question types are determined by the survey software program and can be grouped into the following categories:

- Check all that apply: The check all that apply questions are labeled as Select multiple. When multiple responses are selected for “Select multiple” type questions, the “^” character is used as a delimiter between distinct response options
- Single response option: The single response options are labeled as Select one
- Text response: The text response is labeled as Text
- Calculated or pre-populated variables: Any variable that is created by the survey software system, such as time it takes to complete the survey, is labeled as Built-in data. Any variables constructed or calculated by IHME are labeled as IHME generated.

Variable names, labels, and value coding can be found in the file

[IHME\\_PREM\\_GEN\\_POP\\_2020\\_CODEBOOK\\_Y2020M11D05.CSV](#).

## ***Methodological Statement***

### **Data Collection**

Data were collected using the COVID-19 Health Services Disruption Survey 2020 throughout July 2020 using the Premise platform. Premise is a smart-phone based application which provides data collection capabilities throughout the world. The survey was designed by IHME in collaboration with the BMGF, and was implemented by Premise.

Incoming data were reviewed and validated by Premise and then transferred to IHME, where they underwent further verification and were stored in secure databases maintained by IHME.

### **Sampling/Population**

As this survey is intended to capture the level of disruption to health services among the general population, no additional inclusion criteria for respondents were specified other than country of residence.

Premise has developed a network of users around the globe and maintains basic demographic characteristics, such as age range, gender, and country of residence, for each of its users. The survey was made available to all users in Premise's network who were associated with any of the 76 countries where the survey was conducted. A full list of countries for the COVID-19 Health Services Disruption Survey 2020 can be found below.

The sampling strategy utilized for this survey does not yield a representative sample. Please see the Weighting section for more details regarding the strategies used to mitigate the effects of a non-representative sample.

IHME, BMGF, and Premise determined target quotas for each country prior to data collection. Target quotas were based primarily on the size of the Premise user network in a given country. Progress towards target quotas were monitored over the course of data collection. In locations where the number of responses fell significantly below target quotas, Premise actively promoted the survey through measures such as re-engagement campaigns and targeted advertisements in order to increase the number of respondents.

COVID-19 Health Services Disruption Survey 2020 Countries: Afghanistan; Albania; Algeria; Argentina; Bahrain; Bangladesh; Benin; Bosnia and Herzegovina; Brazil; Burkina Faso; Cambodia; Chile; Colombia; Costa Rica; Côte d'Ivoire; Democratic Republic of the Congo; Dominican Republic; Ecuador; Egypt; El Salvador; Ethiopia; France; Ghana; Guatemala; Honduras; Hong Kong; India; Indonesia; Iraq; Italy; Jamaica; Jordan; Kazakhstan; Kenya; Lebanon; Liberia; Lithuania; Malaysia; Mali; Mexico; Morocco; Mozambique; Nicaragua; Niger; Nigeria; Oman; Panama; Peru; Philippines; Poland; Rwanda; Saudi Arabia; Senegal; Serbia; Sierra Leone; Somalia; South Africa; South Korea; Spain; Taiwan; Tanzania; Thailand; Trinidad and Tobago; Tunisia; Turkey; Uganda; Ukraine; United Arab Emirates; United Kingdom; United States; Uruguay; Venezuela; Vietnam; Yemen; Zambia; Zimbabwe

### **Weighting**

Weights for the survey were calculated using the predicted probability of selection based on a representative sample. Global Burden of Disease 2020 population estimates and proportions for age,

gender, and education by country were used as the representative dataset and age and education categories were mapped to Premise survey categories. Weights were calculated as the inverse of the predicted probability of selection in the sample dataset.

Survey weights were calculated using a combined dataset of responses to the Premise General Population COVID-19 Health Services Disruption Survey 2020 and the COVID-19 Health Services Disruption Survey 2020 from ORB and IPSOS. The included survey weights are not accurate when using the Premise General Population COVID-19 Health Services Disruption Survey 2020 in isolation.

## **Imputed Variables and/or Constructed Variables – What was Imputed/Constructed and How**

*observation\_ID*: This variable is automatically generated by the Premise system and then reformatted by IHME. This variable serves to uniquely identify each observation in the data.

*submitted\_time*: This variable is automatically generated by the Premise system and contains the date and time of submission for each observation in the data.

Demographic Information: Premise maintains basic demographic information for all users on the Premise platform. The variables listed below are included in the basic demographic information maintained by Premise, and as such, they do not represent information collected at the time of the survey. Demographic variables maintained by Premise: *gender, age, geography, financial\_situation, education, employment\_status, ethnicity, religion, country*.

*Weight*: This variable was constructed by IHME as the inverse of the predicted probability of selection in the sample dataset. See the “Weighting” section above for further detail.

## **Known Data Quality Issues**

Values which were outside the range of reasonable responses were identified. These responses represent the information provided by respondents and may result from typographical errors, misinterpretation of the question, or another reason. These data were not removed or revised so that users of the data may determine how to resolve these issues.

Select variables for a small proportion of records take on a value of “did not exist”. This is the result of an error in the implementation of the electronic survey.

Ethiopia was experiencing internet blackouts during a significant portion of the data collection time period. The survey remained available to respondents in Ethiopia for an extra week after the close of the survey in other locations, however the number and timing of responses may have been affected by difficulty accessing the internet.

## **Public Use Dataset Notes**

This is a public use dataset. The data have been de-identified. No personally identifying information was collected for his study, however, some variables with open-text response have been replace with “XXXX” to remove potentially sensitive information or unrelated comments, in accordance with IHME’s microdata release protocol. The protocol’s determination for variables that constitute identifiable private information is based primarily on [HIPAA’S De-identification Standard](#).

## ***Additional Information***

### **Terms and Conditions**

<http://www.healthdata.org/about/terms-and-conditions>

### **Contact information**

To request further information about this dataset, please contact IHME:

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These files may be updated periodically, so we appreciate hearing feedback or additional information about how these data are being used.