



**COVID-19  
RESPONSE**

**WAPOR**  
WORLD ASSOCIATION FOR PUBLIC OPINION RESEARCH

**TEAM  
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# INDIA 2020

## Tracking a Billion Viewpoints...

# Understanding India & #CVoterTracker



# INDIA: A Study Of Contrasts

- Land of a billion people
- Home to 1/6th of humanity on this planet
- 1/3 of world's chronically malnourished children (as defined by UN)
- Almost every 3<sup>th</sup> male and every 2<sup>nd</sup> female is practically illiterate
- More than 300 million still sleep with just one meal a day

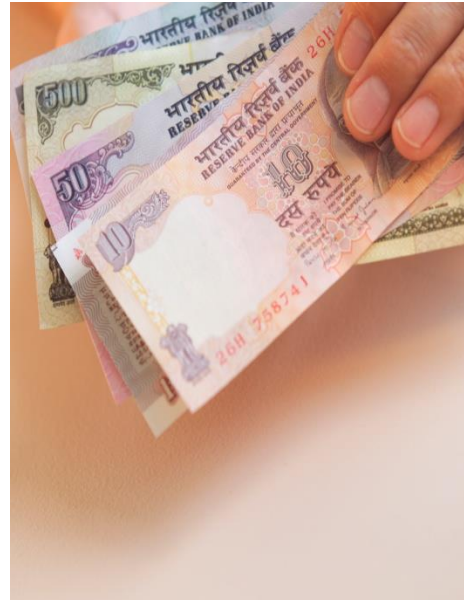
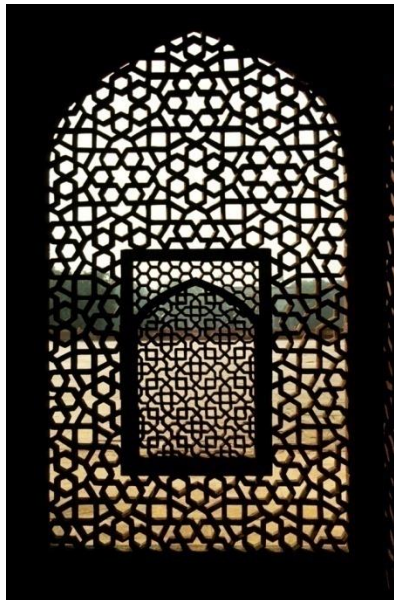


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# INDIA: A Study Of Contrasts

- Biggest democracy with 700 million voters
- >6% growth rate for ten years in row, recession means 4% growth
- One of the five countries with GSLV technology
- Back office of the world with the biggest BPO industry
- A nuclear powerhouse

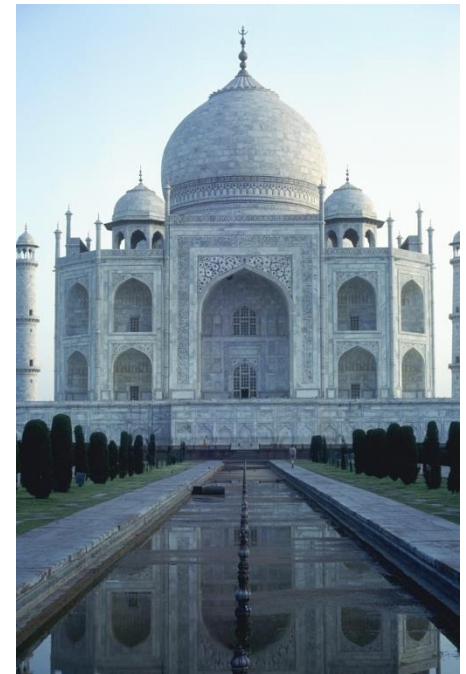
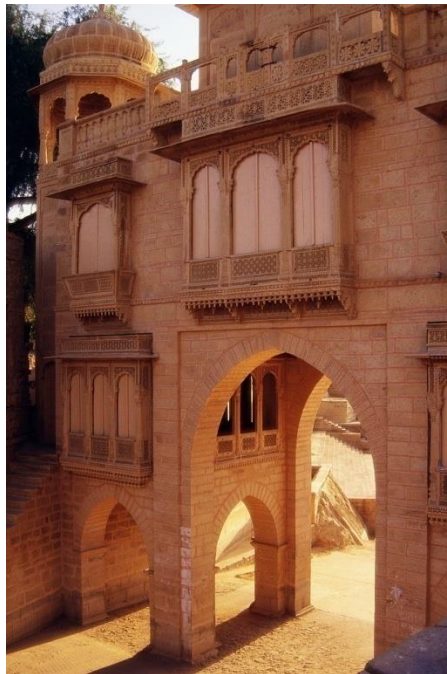


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# INDIA: A Study Of Contrasts

- 20 official languages
- More than 100 major and 2000 minor dialects
- 29 states and 7 union territories
- 7 major religions
- More than 500 major and 3000 minor social caste groups



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# Understanding The Tracker

**The Cvoter India OmniBus is the only Survey Instrument which covers India 100% Geographically and Demographically both. We interview in 10 languages.**

***It is the ONLY Survey Instrument running every week for the last 10 years, and every day for last 1 year***

**It the ONLY regular Survey Instrument in India, which is based on RDD CATI.**

***In the extraordinary circumstances of complete lockdown due to COVID-19 crisis, we have successfully decentralized the CATI process and as on today our 100 plus research colleagues are interviewing from their own homes.***

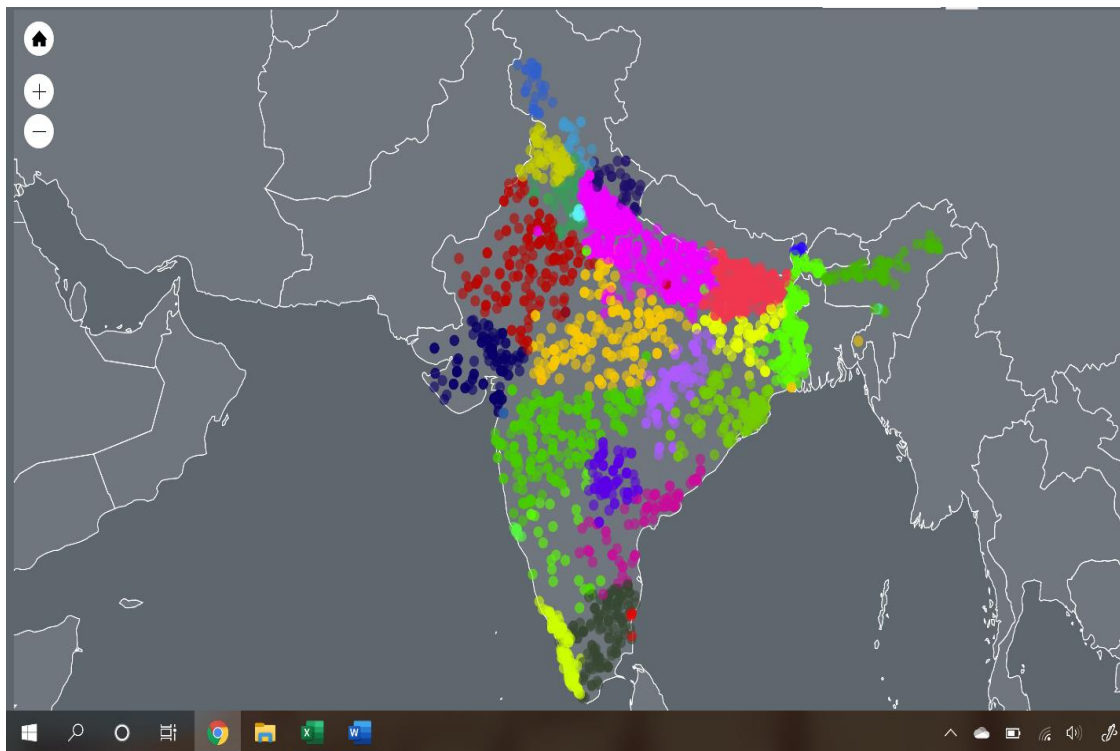


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# Understanding the spread of #CVoterTracker

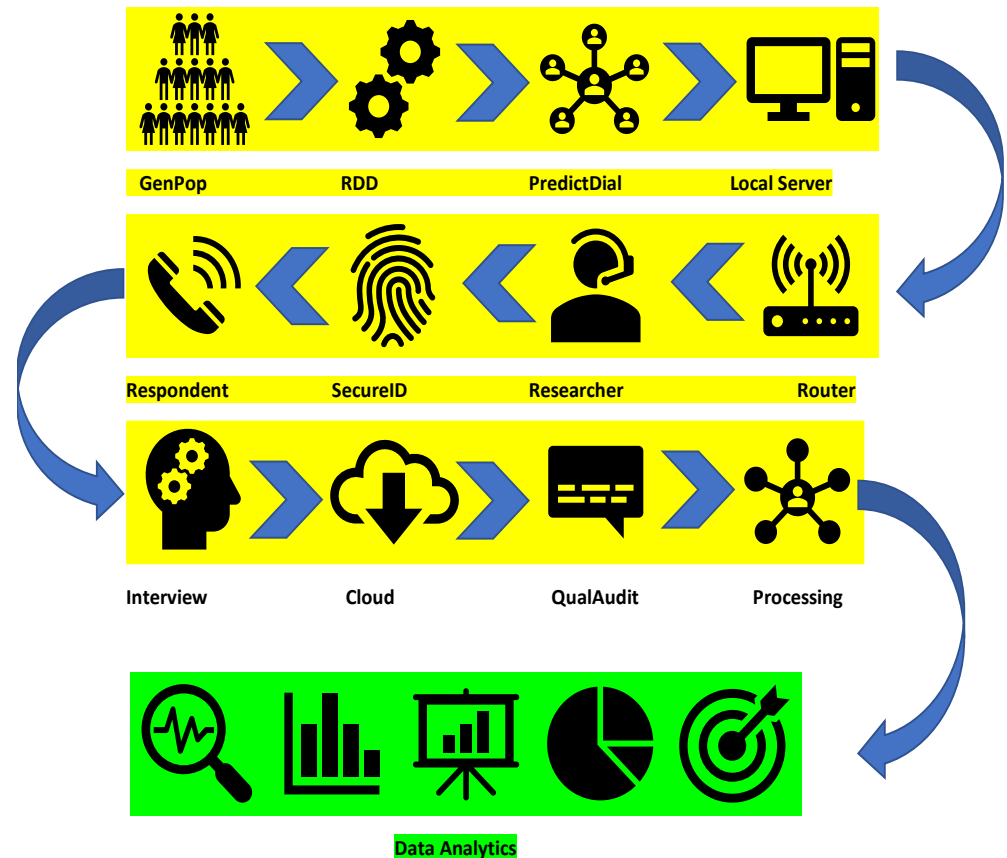
***There are 543 Lok Sabha Areas in India, and more than 4000 Assembly Areas across different states. Our routine OmniBus of 1200 randomly selected respondents covers more than 500 LS areas and more than 1000 random Assembly Segments. This is as diverse spread as it would have been technically possible.***



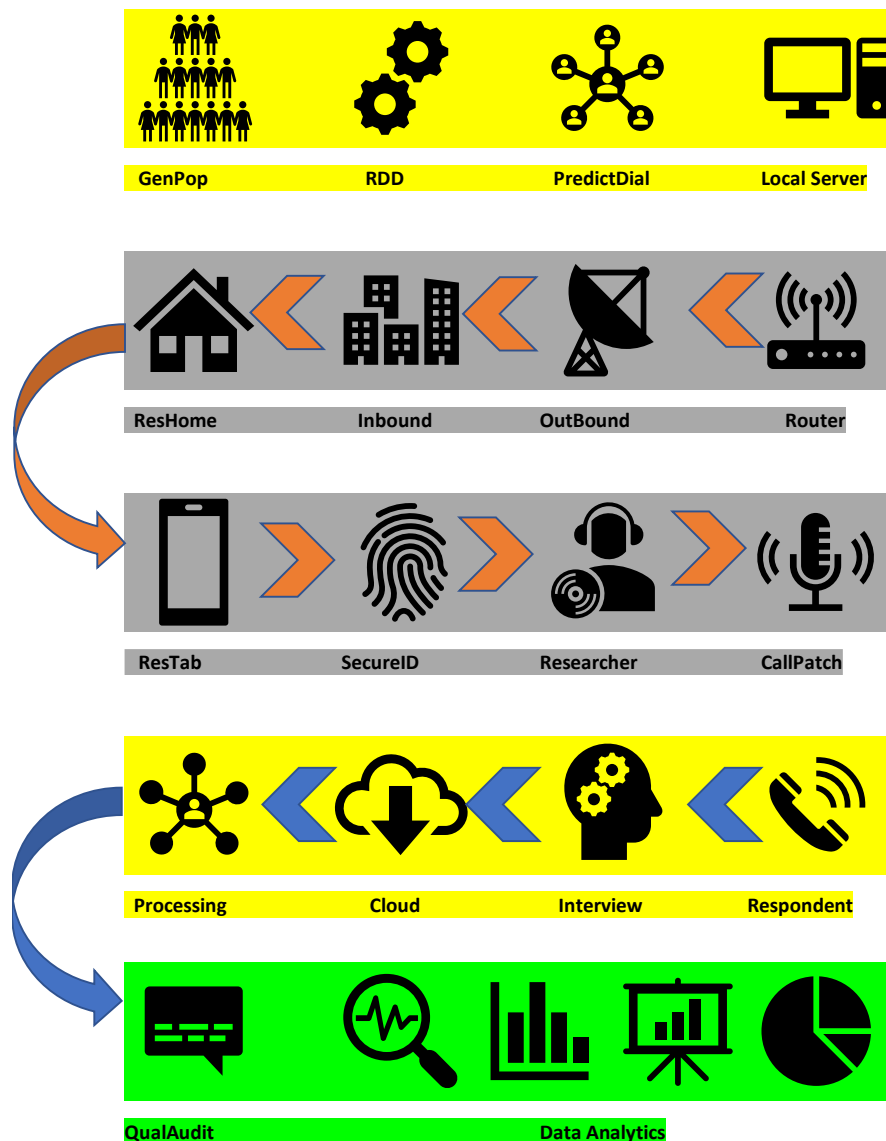
# SOP in routine CATI operations

***In routine operations the RDD is supported by a predictive dialler which forwards the picked up calls to a researcher. In case of India, due to multiple languages, this process involves in treating India as 30 sets of stand alone Universe, much like running a Euro-Barometer.***

***The calls are outbound, followed up by patch up on Computers of different workstations for 125 researchers in New Delhi CATI center.***



# SOP in CATI operations during COVID-19



***In case of decentralized CATI operations, we have now two outbound processes, one handling the routine RDD, and another one patching the call to mobile phone of Researchers in their respective locations. The IT team uses a virtual EPBAX system for technical handshake of these two outbound processes.***

***Thus the researchers do not need Computers at their end to conduct the interview. The interview is conducted on Voice Calls, while the data is entered on the screen of the Android pad using normal data network.***



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## Understanding the bottlenecks

- The efficiency of 1000+ per day has gone down to 600+ per day
- The Sim-docket to be increased from 60x2 to 60x11 for all languages to be accommodated in automation
- The minor languages are run on semi-automation, reducing the number of calls attempted
- Once the telecom service providers accommodate the order for more sim-dockets, it will speed up the process.



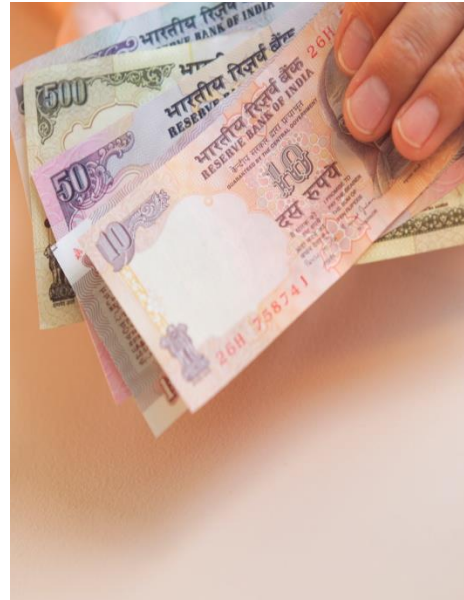
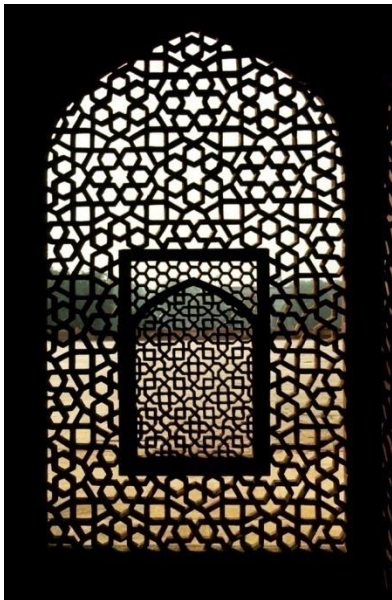
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**Is this the new normal?**

**Are these changes temporary? Or are we looking at new operational paradigm in post-corona world?**

**Female and minorities participation: how are they likely to change in new scenario?**

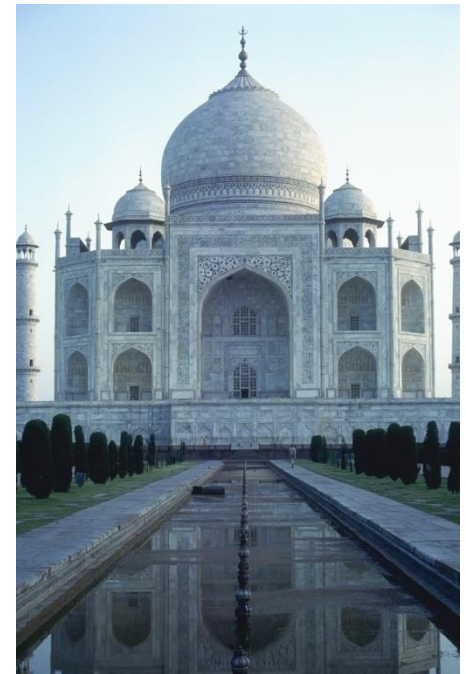
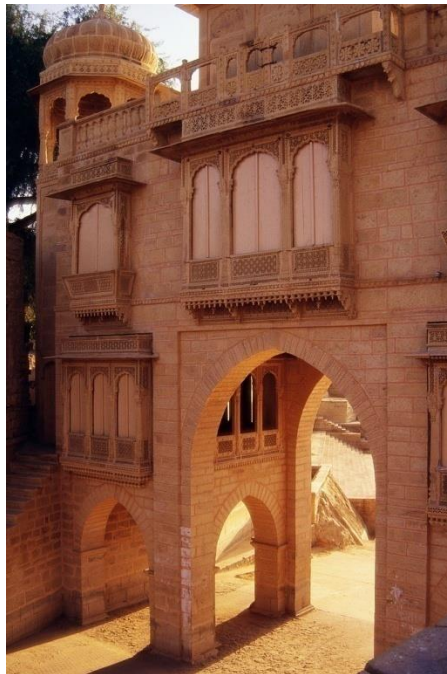


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# Why Online Panels are still not useful in India and other 3rd world countries

- India has almost 92% tele density in terms of mobile subscription
- The incoming calls are free
- Data is cheapest in the world
- Yet availability of Data does not mean digital literacy



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**People can talk on smartphones.  
People can watch on smartphones.  
People can listen on smartphones.**

**But this does not automatically mean they can also  
read or write on smartphones.**

**Reason why CATI works better in 3rd world countries.**



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# What are we asking in #CoronaTracker?

Apart from the routine Tracker questions on issues, wellbeing, media habits, different approval ratings and items used for State Of The Nation shows, we are basically tracking 15 major items in our #CoronaTracker.

<b>Q1</b>	<b>How strongly do you agree or disagree with the following statements?</b>		
<b>Q1a</b>	I am afraid that either myself or someone in my family may actually catch the Coronavirus	1	Strongly Agree
<b>Q1b</b>	I think the Indian government is handling the Coronavirus well	2	Agree
<b>Q1c</b>	I believe the threat from the Coronavirus is exaggerated	3	Disagree
		4	Strongly disagree
		0	Don't know/Can't say
<b>Q4</b>	<b>How many days of Ration/ medicine etc. or money for ration/medicine etc. is available for your family in your house?</b>		
0	Less than a week	3	For three weeks
1	For a week	4	For a month
2	For two weeks	5	For more than a month
<b>Q7a</b>	<b>Have you seen flu like symptoms like high fever, cold, dry cough or similar symptoms in any family member (within your own household) or in your neighbourhood (people who you normally meet in your day-today life)?</b>		
	<b>Note for researchers: If the respondent answers Yes for anyone in this question, then ask the next 3 questions of Q7 b/c/d. If they answer No or DKCS for all three questions, then please skip to Q8 &amp; continue.</b>		
<b>Q7aa</b>	Yes, myself		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7ab</b>	Yes, in my household		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7ac</b>	Yes, in my neighborhood		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7b</b>	<b>If yes, which of the symptoms like high fever, cold, dry cough etc are there?</b>		
	<b>Note for researchers: If there are multiple people with these symptoms in previous question, then ask Q7 b/c/d for the first patient mentioned in previous question. Please ask each question &amp; mark Yes/No.</b>		
<b>Q7ba</b>	High Fever		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7bb</b>	Tiredness		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7bc</b>	Dry Cough		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7bs</b>	Difficulty in breathing		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7be</b>	Cold, nasal congestion, Running nose		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7bf</b>	Body pain		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7bg</b>	Soar Throat / Pain in throat		1. Yes / 2.No 0. Don't know-Cant say
<b>Q7c</b>	<b>If yes, what is the age of the concerned person?</b>		
	Please write down the actual age of patient as mentioned by the respondent. In case they don't know the actual age, please ask them about the approximate age of patient.		



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# *Where to track the #CoronaTracker?*

<http://www.cvoterindia.com/>

[https://medium.com/@news\\_82607](https://medium.com/@news_82607)



Thanks !

Questions & suggestions?

