

# Face shield survey

\* 1.0 Has consent been obtained?

OK

## Demographics

1.1 What is your age in years?

18-24

25-34

35-44

45-54

55-64

65+

1.2 what is your gender?

Female

Male

Other

Prefer not to say

2.0 Have you ever worn a face shield as protection against COVID-19?

Yes

No

2.1 Are you a health worker?

Yes

No

**2.2 If yes to are you a health worker- are you a**

- Nurse
- Doctor
- Community Health Worker
- Nurses aide/auxillary
- Pharmacist
- Physiotherapist
- Surgeon
- Dentist
- Midwife
- Traditional medical practitioner
- Environmental Health Officer
- Laboratory technicians
- Ambulance worker
- Health service manager
- Social worker
- Medical secretary
- Cleaning and sanitation worker
- Other - please specify

**If 'other' please specify**

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**2.3 If no to are you a health worker - are you a-**

- Shopkeeper
- Driver
- Security guard
- Administrator
- Business person
- Mechanic
- Builder
- Lawyer
- Accountant
- Teacher
- Secretary
- Tailor
- Hairdresser/ Barber
- Chef
- Food vendor
- Nanny
- Cleaner
- Farmer
- Other - please specify

If 'other' please specify

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## Health worker questions

**2.4 In your health facility/organisation is there an infection prevention and control policy which details the PPE to be worn in different clinical settings?**

- Yes
- No
- Don't know

**2.5 What type of health facility/organisation do you work in?**

- Primary health care - Ministry of Health run
- Primary health care - Private
- Community health worker- Ministry of health
- Hospital- Ministry of Health run
- Hospital - Private
- Other

**Please specify***what sort of health organisation*

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**2.6 Which of the following items is available or provided by your health facility at this moment?**

- Apron or coveralls
- Goggles
- Hand Sanitizer
- Face shield
- Medical mask
- None of these are available

**2.7 Which of the following items do you buy yourself for use in you health facility at present?**

- Hand sanitizer
- Goggles
- Aprons or coveralls
- Faceshields
- Medical maks
- I don't buy any of these to use at my work

**2.8 In your health facility which form of eye and facial protection do you prefer?***What do you wear if you have a choice*

- mask and goggles always
- mask and goggles when required/ risk assessed.
- mask and face shield always
- mask and faceshield when required/ risk assessed.
- Medical mask only
- Face shield only

**2.8 Why is this your preferred form of face covering or eye protection in health settings?***Please explain why you prefer this form of facial protection in health settings.*

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**3.0 Which is your preferred form of face covering in community settings**

- Fabric mask
- Medical mask
- Face shield
- Both mask and face shield
- I do not have a preference
- I am exempt from wearing a face covering for medical reasons

**3.1 Why is this your preferred form of face covering or eye protection in community settings?**

*Probe - please describe in your own words*

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**3.2 Do your children over 2 years old use a mask or face shield?**

*Answer even if your children only use occasionally*

- Mask
- Face shield
- Both mask and face shield
- They are exempt from wearing a mask for medical reasons.
- I do not have children
- They do not wear any form of face covering

**3.3 When do you wear your preferred face covering ( mask, face shield or both) tick all that apply**

*Detail the circumstances when you wear your face covering*

- Shopping at a market outdoors
- Shopping inside
- At the gym
- At work or at school
- At home, without visitors present
- At home, with visitors present
- At church/mosque or other religious settings
- Socialising inside
- Socialising outside
- In shared or public transport
- In public parks
- other - please specify

**If 'other' please specify**

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**3.4 What influences your decision about what type of face covering to wear? tick all that apply**

- Availability
- Price
- Social acceptability
- Authority from regulations
- Comfort
- Feeling of protection
- Ability to communicate with others
- Public health advice
- I wear what is provided by my employer
- Other - please specify

**3.5 Please specify what influences your decision about what type of face shield to wear**

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**4.0 What do you do with your face shield after wearing it?**

- I try to keep it to use it again
- I discard my face shield after each use

**4.1 How frequently do you clean your face shield?**

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**4.2 What do you clean your face shield with?**

- Soap and water
- Wipe with a dry cloth
- Soak in Chlorine solution 0/1%
- Spray with disinfectant
- I don't ever clean it
- Other please specify -

**4.3 What do you clean your faceshield with?**

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**4.4 What other method do you use to decontaminate your face shield- please explain here**

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**5.0 In relation to face shields, which of the following features is most important to you? - pick up to three choices**

- Good visibility
- Not fogging up
- Others being able to see my face
- Others being able to hear my voice
- Comfortable to wear
- The pressure of the face shield around the head
- The stability of the face shield on my head
- Feeling of protection
- Looking stylish
- Easy to decontaminate and reuse
- Easy to move around in
- How well the face shield integrates with spectacles
- Inexpensive to purchase
- Recommended by someone I trust
- Manufactured locally
- Quality assured by regulatory standards body
- Other please specify

**Other please specify**

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**6.0 Example of face shields**

Please review the following image of a face shield and answer the following questions

*Show image*

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**Have you worn this type of face shield before?**

- Yes
- No

**What is your opinion on this type of face shield?**

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