

## Perceptions, Attitude and Practices among Non-medical Ancillary Staff in Pakistani Hospitals Regarding Covid-19

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### ABSTRACT

#### COVID 19-The hidden struggle and strain

Pakistan is the world's fifth most populous country with only a budget of 2% of GDP for healthcare needs. It constitutes a highly decentralized healthcare system for tackling the ongoing pandemic. Hospital service workers provide direct hands-on care on the frontlines but are under informed and underequipped. The rationale for this study was shedding light on the under reported conditions of cleaning staff who live in the shadow of medical staff whose complains on lack of PPE are well documented both by news media and government officials. Since recent reports out of UK indicate that cleaning staff were equally responsible for spreading and catching infections as the medical staff, their working conditions needed to be highlighted and documented. The report aims to highlight the gaps in information regarding the housekeeping staff in hospitals and study the attitude and behavior of the non-medical hospital staff towards the pandemic through surveys and interviews. These were carried out in co-modal methods both online and offline due to literacy issues. The target population was non-medical staff or ancillary staff like workers and administrative personnel and three largest hospitals in Pakistan and all provinces were incorporated for diversity and inclusivity. The study indicated that knowledge on disease isn't ideal, instruction by higher authorities were ambiguous and vaccination coverage was very low. Data generated was analyzed using bioinformatics tools like SPSS and R studio. We also tried to ascertain possible reasons for vaccine hesitancy through interviews, and it was found that trust in local regulatory authorities was low. It was observed the ancillary staff is under informed and mostly kept out of the circulation of information on infection and disease control hence it is not surprising the observed hesitancy to take the vaccines. But with the gradual rollout of vaccines in the country's vaccine initiative and interventional techniques by the medical doctors, the staff seemed readily willing for uptake of both new information and vaccination. This indicates that low coverage of vaccination and low adherence to sanitary protocols can be improved by standardized instruction through all systems in healthcare for better functionality of our country health sector.

**Themes:** Surveys, Vaccine hesitancy, Low-income countries

**Keywords:** Vaccine hesitancy, COVID-19, Cleaning staff

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