

# **Re-visiting the Front Line health Workers' (FLWs)<sup>1</sup> attending suspected or confirmed COVID-19 patients in Bangladesh: how far the situation improved in a month since the last survey?**

## *Summary of findings*

- Overall, 24% of the respondents still did not receive PPE at the time of survey i.e., during 5-11 May 2020. Compared to the earlier survey during 9-14 Apr. 2020, there has been some improvement in the supply of personal protective equipment especially among the paramedics, however, situation didn't improve much with respect to the quality of the PPE supplied as stated by the FLWs; the rising trend of infection among the FLWs corroborates this
- There has been some improvement in arranging accommodation, food and transport for the doctors but not to the extent necessary, and not for the other FLWs
- More than two months into the epidemic (since identification of the first case of COVID-19 on 9 March 2020), and still there is inadequate training on COVID-19 nature and management as well as use of PPE, especially for the nurse/midwives and the paramedics
- These factors together did little to alleviate the mental health disturbances of all different groups of the FLWs which in itself is going to be a big public health problem, now and post-COVID-19

### **1. Background and method**

A Rapid telephone survey was conducted during 9 – 14 April, 2020 to elicit the perceptions of the FLWs who were directly involved with the management of suspected or confirmed COVID-19 cases in different public and private healthcare facilities in Bangladesh. At that time the FLWs mentioned about substantial lack of PPE and other preventive amenities, poor quality of the PPEs supplied, lack of adequate training on COVID-19 prevention and management and using the PPEs, mental health problems and burn outs from long and arduous duty hours without sufficient rest and constant weariness of spreading the virus to family members etc. At that time they made some recommendations regarding urgent procurement of sufficient number of quality PPEs and training for its proper use, arrangement of accommodations and food at a place near to their work station so that they can get rid of constant weariness of infecting their near and dear ones, roster duty for the attending staff for adequate rest and time to charge up physically and mentally etc. Extensive dissemination activities were undertaken to inform the relevant authorities about the study findings and FLWs' recommendations. Around a month has passed since the study and we thought it will

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<sup>1</sup> FLWs comprising doctors, nurses and other healthcare workers)

be interesting to see whether, and to what extent, any change that has occurred in the areas discussed.

So, we decided to re-interview 50 respondents (out of 60 originally interviewed) on the relevant issues, following the same methodology (see the earlier report). Beside PPE and training, we asked them on different aspects of their recommendations, to check if the recommendations were addressed by the relevant authorities. The re-survey was done during 5-11 May 2020. We present the findings below and discuss its implications.

## 2. Results

In all, we could reach 46 respondents who agreed to be interviewed. Most of the respondents were from public sector facilities in the peri-urban/rural areas (43%) followed by those in the urban facilities (33%), majority being doctors (39%) followed by different categories of paramedics (35%) (Table 1). Forty-three percent of the FLWs worked in the OPDs while 37% worked in both OPD and in-patients.

**Table 1 Characteristics of the respondents**

	Characteristics	% (n)
<b>Facility type</b>		
	Public facility in Urban area (Hospital, International airport)	32.6 (15)
	Public facility in Rural area (Upazila health complex, Union sub centre)	43.5 (20)
	For profit Private facility	2.2 (1)
	Not for profit private facility (NGO)	21.7 (10)
<b>Type of respondents</b>		
	Doctors (MBBS)	28.3 (13)
	Doctors (post-graduate)	10.9 (5)
	Nurses (All types)/ Midwives	26.1 (12)
	Para-medics (SACMOs, FWV, Lab technician etc.)	34.8 (16)
<b>Years of service</b>		
	<1 year	4.35 (2)
	1 – 5 year	19.6 (9)
	>5 year	76.1 (35)
<b>Place of duty*</b>		
	Both outpatient and in-door	37 (17)
	In-door	19.6 (9)
	Out-patient department (OPD)	43.5 (20)
	Emergency	8.7 (4)

\*Multiple response considered

Data disaggregated by the four original categories of FLWs are presented in Table 2. In the intervening period, only 9% received any training on COVID-19 and 20% on proper use of PPE supplied. During this time, 76% of the respondents reported to have received PPE, the proportion being greater for the paramedics (87.5%) than the others, and much greater than the earlier study (58%). However, only 56% of the respondents were found to be satisfied with the quality of the PPE, and only 33% of the nurses/midwives.

**Table 2 Present status of the respondents (All categories)**

		<b>Types of health care professional %(n)</b>				
		<b>Doctors (MBBS)</b>	<b>Doctors (post-grad)</b>	<b>Nurses and Midwives</b>	<b>Paramedics</b>	<b>All</b>
<b>No. of respondents</b>		<b>13</b>	<b>5</b>	<b>12</b>	<b>16</b>	<b>46</b>
<b>Received any training regarding management of COVID19 in last 3-4 weeks</b>						
	Yes	7.7 (1)	-	-	18.7 (3)	8.7 (4)
	No	92.3 (12)	100.0 (5)	100.0 (12)	81.3 (13)	91.3 (42)
<b>Received any training regarding PPE in last 3-4 weeks</b>						
	Yes	15.4 (2)	-	8.3 (1)	37.5 (6)	19.6 (9)
	No	84.6 (11)	100.0 (5)	91.7 (11)	62.5 (10)	80.4 (37)
<b>Received any new PPE/other protective equipment within this time period</b>						
	Yes	76.9 (10)	100.0 (5)	50.0 (6)	87.5 (14)	76.1 (35)
	No	23.1 (3)	-	50.0 (6)	12.5 (2)	23.9 (11)
<b>Satisfied with the quality of newly supplied PPE/other protective equipment</b>						
	Yes	61.5 (8)	60.0 (3)	33.3 (4)	68.8 (11)	56.5 (26)
	No	15.4 (2)	40.0 (2)	16.7 (2)	18.8 (3)	19.6 (9)
	Didn't get any PPE	23.1 (3)	-	50 (6)	12.5 (2)	23.9 (11)
<b>Any change in your duty roster within last 3-4 weeks</b>						
	Yes	69.2 (9)	60.0 (3)	33.3 (4)	25 (4)	43.5 (20)
	No	30.8 (4)	40.0 (2)	50.0 (6)	56.3 (9)	45.7 (21)
	I don't have any duty roster	-	-	16.7 (2)	18.7 (3)	10.9 (5)
<b>Satisfied to work by this roster</b>						
	Yes	69.2 (9)	80.0 (4)	33.3 (4)	18.8 (3)	43.5 (20)
	No	30.8 (4)	20.0 (1)	-	6.2 (1)	2.2 (1)
	Not applicable	-	-	66.7 (8)	75 (12)	54.4 (25)
<b>Arrangement for your accommodation for after duty/quarantine period</b>						
	Yes	46.2 (6)	40.0 (2)	8.3 (1)	12.5 (2)	23.9 (11)
	No	53.9 (7)	40.0 (2)	33.3 (4)	56.3 (9)	47.8 (22)
	Not applicable	-	20.0 (1)	58.3 (7)	31.2 (5)	28.3 (13)
<b>Food is being managed by the authority properly now</b>						
	Yes	30.8 (4)	80.0 (4)	8.3 (1)	12.5 (2)	23.9 (11)
	No	69.2 (9)	20.0 (1)	33.3 (4)	50.0 (8)	45.7 (21)

	Not applicable	-	-	58.3 (7)	37.5 (6)	30.4 (14)
<b>Transport to and from the accommodation is being managed by the authority properly now</b>						
	Yes	61.5 (8)	80.0 (4)	8.3 (1)	56.2 (9)	28.3 (13)
	No	38.5 (5)	20.0 (1)	33.3 (4)	43.8 (7)	39.1 (18)
	Not applicable	-	-	58.3 (7)	-	32.6 (15)
<b>Improvement in your mental health within last 1 month considering above mentioned initiatives</b>						
	Yes	38.5 (5)	20.0 (1)	25.0 (3)	56.3 (9)	39.1 (18)
	No	61.5 (8)	80.0 (4)	75.0 (9)	43.7 (7)	60.9 (28)

Only in case of 43% of the respondents, duty roster was changed, mostly for the doctors (above 60%). Doctors, especially the post-graduates (80%), were satisfied with the change but not the other categories.

Accommodation at or near workplace was arranged for only around 24% respondents, while the proportion being only 8 – 12% for the paramedics and nurse/midwives. Less than 50% of the doctors received accommodation in this way. The same situation is observed for food and what was interesting to note that the postgraduate doctors (80%) were much advantaged in this regard compared to simple medical graduates (31%)! The latter divide was also observed in case of arrangement of transport (80% vs 61.5%). The improvement in mental health status was poor for most categories (around 1/3<sup>rd</sup> of the respondents) except the paramedics (56%).

Finally, we did a comparison between the doctors and other FLWs (Bangladesh's health systems is very hierarchical with doctors at the top) on the above issues (Table 3). Substantial difference were observed with respect to training (on COVID-19 and use of PPE) (proportionately, others received more training than the doctors), change in duty roster and satisfaction with the change (both were greater for the doctors), arrangement of accommodation and food and transport (greater for doctors), and improvement of mental health status (lesser for doctors).

**Table 3 comparison between doctors and other FLWs**

	Types of health care professional %(n)		
	Doctors	Other staffs*	All
<b>No. of respondents</b>	<b>18</b>	<b>28</b>	<b>46</b>
<b>Received any training regarding management of COVID19 in last 3-4 weeks</b>			
Yes	5.6 (1)	10.7 (3)	8.7 (4)
No	94.4 (17)	89.3 (25)	91.3 (42)
<b>Received any training regarding PPE in last 3-4 weeks</b>			
Yes	11.1 (2)	25.0 (7)	19.6 (9)
No	88.9 (16)	75.0 (21)	80.4 (37)
<b>Received any new PPE/other protective equipment within this time period</b>			
Yes	83.3 (15)	71.4 (20)	76.1 (35)
No	16.7 (3)	28.6 (8)	23.9 (11)
<b>Content with the quality of newly supplied PPE/other protective equipment</b>			
Yes	61.1 (11)	53.6 (15)	56.5 (26)
No	22.2 (4)	17.9 (5)	19.6 (9)
Didn't get any PPE	16.7 (3)	28.6 (8)	23.9 (11)
<b>Any change in your duty roster within last 3-4 weeks</b>			
Yes	66.7 (12)	28.6 (8)	43.5 (20)
No	33.3 (6)	53.6 (15)	45.7 (21)
I don't have any duty roster		17.9 (5)	10.9 (5)
<b>Satisfied to work by this roster</b>			
Yes	72.2 (13)	25.0 (7)	43.5 (20)
No	27.8 (5)	3.57 (1)	2.2 (1)
Not applicable	-	71.4 (20)	54.4 (25)
<b>Arrangement for your accommodation for after duty/quarantine period</b>			
Yes	44.4 (8)	10.7 (3)	23.9 (11)
No	50.0 (9)	46.4 (13)	47.8 (22)
Not applicable	5.6 (1)	42.9 (12)	28.3 (13)
<b>Food is being managed by the authority properly now</b>			
Yes	44.4 (8)	10.7 (3)	23.9 (11)
No	50.0 (9)	46.4 (12)	45.7 (21)
Not applicable	5.6 (1)	42.9 (13)	30.4 (14)
<b>Transport to and from the accommodation is being managed by the authority properly now</b>			
Yes	66.7 (12)	3.6 (1)	28.3 (13)
No	27.8 (5)	46.4 (13)	39.1 (18)
Not applicable	5.6 (1)	50 (14)	32.6 (15)
<b>Improvement in your mental health within last 1 month considering above mentioned initiatives</b>			
Yes	33.3 (6)	42.9 (12)	39.1 (18)
No	66.7 (12)	57.1 (16)	60.9 (28)

\*nurse/midwives, paramedics

**Conclusion:**

The findings, at this stage of the epidemic, is lamentable but not unexpected given the problem with leadership and management from the very beginning to tackle the problem in time, coordination within and outside health sector, lack of sufficient resources including human resources and supplies, corruption in procurement e.g., procurement of PPE, and reluctance to include public health specialists and other stakeholders in the fight against the epidemic. There is no doubt that the health system would need radical overhauling if it wants to remain relevant for ensuring health security and achieve UHC by 2030 as committed by the government in different international forums.

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