Knowledge, Attitudes And Practices Towards Lassa Fever Among Health Care Workers In Faranah Health facilities in Guinea

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Background & Objectives

• Lassa fever (LF) is a zoonotic acute viral haemorrhagic fever caused by the Lassa virus.
• Nosocomial infection with high case fatality rate has been described in the hospital settings in many West African countries including Guinea.
• Hospitalized patients with LF may pose a substantial risk to health care workers (HCWs) and to other patients.

General objective

• To assess knowledge, attitudes and practices of HCWs and to determine factors influencing them in health facilities of Faranah district.
Methods

Study design
A descriptive cross-sectional survey with quantitative approach.

Study sites
- 5 health facilities in Faranah district in upper Guinea.
  - The general hospital
  - 2 health centres in urban area
  - 2 health centres in rural area

Study population
- Medical doctors
- Nurses
- Midwives,
- Laboratory scientists
- Pharmacists
- Professional students

Sampling technique
- All of the health care providers working in these 5 public health facilities.
Results (1/4)

• **Sociodemographic characteristics of:**
  – Mean age of respondents was 30.4 years ± 7.7
  – Females 57.4% (112/195)
  – Married 64.6% (126/195)
  – Muslims 80.5% (157/195)

• Out of 195 respondents 32.3% (63/195) had previously not heard of LF.

48.5 % (64/132) had adequate knowledge about LF (p = 50%; 95% CI = 0.4 – 0.6).

95% (125/132) positive attitudes towards a suspected case of LF (p = 95%; 95% CI = 0.91 – 0.97).
Results (2/4)

From Chi square and simple logistic analysis

- Socio-demographic characteristics associated with knowledge were:
  - Sex ($p<0.001$)
  - Marital status ($p<0.001$)
  - Number of years of work ($p<0.001$)
  - Type of facility ($p=0.03$)
  - Availability of PPE ($p<0.001$)
  - Training of the personnel on LF ($p=0.004$)
  - Training of the personnel on VHF ($p<0.001$).

- Factors that were found to be significantly associated with Attitude were;
  - Location of facility ($p=0.02$)
  - Availability of PPE ($p=0.001$)
Results (3/4)

From multiple logistic regression analysis done for knowledge

• Females had reduced odds of having adequate knowledge,
  aOR= 0.4(0.2-0.8) as compared to males.

• Nurses, aOR= 0.04 (0.004-0.3); Student, aOR= 0.06(0.007-0.5); Midwives, aOR= 0.05 (0.007-0.4) had reduced odds of having adequate knowledge on LF as compared to medical doctors.

• Training of HCWs on LF increased the odds of having adequate knowledge on LF, aOR= 14.1(2.3-86.4).
Results (4/4)

From multiple logistic regression analysis done on Attitude,

**Location of facility**

Health professionals in Rural health facilities had significant reduction in their odds of having positive attitudes towards LF $\text{aOR}=0.06$ (0.01 - 0.4) as compared to those in Urban facilities

**Availability of PPE**

Non availability of PPE reduced the odds of having positive attitude towards LF, $\text{aOR}= 0.06(0.01\text{-}0.4)$
Conclusion

- The study revealed a general low level of knowledge of LF disease among the HCWs.
- Most of the HCWs had good attitudes and all of them had good practices.
- Age and number of years of work were found to influence knowledge but not attitudes and practices.
- There was not statistical significant difference between the KAP of health providers working in the general hospital compare to the one of those who were working in the health centres.
- HCWs in urban health centres had better attitudes compare to those in the rural ones.
Thank you!