



Public Trust in Government and Adherence to COVID-19 Preventive Guidelines in Uganda

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ISBN



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Introduction

According to the World Health Organization (WHO) the coronavirus disease (COVID-19) caused by the 2019 novel coronavirus (SARS-CoV-2) rapidly spread across the globe from December 2019. On March 11, 2020, the WHO declared a global pandemic (WHO,2020); and, on 14 April, 2020 there were 1,773,084 confirmed cases and 111,652 deaths, while Uganda registered 54 cases with no fatality.

The Uganda Government through the Ministry of Health with assistance from other relevant ministries, WHO office, Kampala and NGO developed policy guidelines to prevent and control the spread of COVID-19 disease at the outbreak of the disease in March, 2020. The guidelines were developed for specific sectors namely; public places, quarantine centers, village health teams, for burials and uniformed personnel. COVID-19 Task Forces were formed at national, district and subcounty levels with specific terms of references. The main work of the task forces was to enforce guidelines for the prevention of COVID-19 transmission.

This policy brief is based on research on COVID-19 that analyzed the influence of public trust of government on community adherence to guidelines on COVID-19 prevention. The study was conducted among urban dwellers in Nakawa Division, Kampala Capital City, among truck drivers in Malaba Town Council, in Tororo district, among pastoralists in Panyangara sub-county in Kotido district; and refugees in Adjumani, Arua and Yumbe districts.



Following Government guidelines: Health workers wearing protective suits lower the body of a COVID-19 victim for burial at a graveyard in Gulu, northern Uganda. (Courtest of Sally Hayden/SOPA Images/LightRocket via Getty Images)



In the initial stages of COVID-19 outbreak in 2020, Government guidelines included school closures. Here a group of students leave for home after their school was closed due to the pandemic.

Research objectives and methods

The aim of the research was to determine how adherence to COVID-19 pandemic preventive guidelines can be improved among the study communities. The specific objectives were: (1)

Establish how culture, information, attitudes and practices unique to targeted communities influence the risk of COVID-19 transmission; (2) Promote culturally sensitive radio and mobile phone communication to enhance awareness of the COVID-19 prevention; specifically, the relevance and the importance of community engagement and local solutions; (3) Examine the role of trust in health rganization with the aim of building local community capacity to respond to pandemics, and to gather local evidence that can inform health policy and humanitarian response

Trust in health services

Trust is defined as a set of expectations that patients has from the doctor and the health

care system to help them heal (Caterinicchio RP, 1979). This set of expectations includes appropriate diagnosis, correct treatment, non-exploitation, genuine interest in the welfare of the patient and transparent disclosure of all information. Trust has also been defined as an optimistic acceptance of vulnerability in which the patient believes that the doctor will do what is best for the patient (Hall MA, et.al. 2001); or, as Straten et al. (2002) articulates it, “being confident that you will be adequately treated” when health care is needed; and trust should be “useful as a performance indicator of the health care system and the professions working in it” (Westert et al., 2008). Research by Lara et al. (2017) demonstrated that sensitization efforts on disease prevention led by respected community leaders can result in trust and behavior change that prevents the spread of Ebola disease. Public trust therefore can be among the influences for the adoption of the government preventive guidelines developed to prevent the spread of COVID-19 pandemic. This analysis focuses on factors that determine trust in government health services and how trust influence adherence to disease prevention guidelines.

Results of COVID-19 Research

The research found that factors that influenced public trust of government were public belief that government does the right thing for people (80.7%) and that government tells the truth (77.1%).

Government doing the right thing includes providing the right information to the public on how to protect themselves from contracting COVID-19, enforcing the diseases prevention guidelines and providing treatment if they contract the disease. About half of respondents (48.5%) however revealed that they didn't trust government because government does not tell the truth. This lack of trust should be addressed by the government telling the truth and providing adequate and quality health services, to avoid reduction of uptake of COVID-19 prevention guidelines.

Focus group discussions revealed population trust in government at the beginning of coronavirus outbreak. This was because the public witnessed the seriousness of District COVID-19 Task Forces in responding to the outbreak by dissemination of information to prevent infections, strict enforcement of COVID-19 prevention guidelines, disease surveillance, quarantining the infected, treatment of the sick. Later however, public trust of government later waned due to lack of effective enforcement, poor disease surveillance and closure of quarantine; ending of contact tracing of suspected cases; lack of COVID-19 response materials and equipment; and finally contradiction between prevention messages and actions of government officials. In Tororo district for instance, the police arrested SOPs violators and put them in overcrowded trucks thereby violating the SOPs they preached.

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A Safe Boda operator sanitizes to prevent the spread of COVID-19 a customer before riding her to destination

Conclusions

It has been established by the COVID-19 research government response to a pandemic is critical in generating public trust and making the public adopt prevention guidelines. These may include dissemination of accurate information on the pandemic, enforcement of disease prevention guidelines, and providing treatment to the sick. This is because government actions demonstrate the level of government to preventing the pandemic and treatment. Contradiction between government official policies/guidelines and the actions of her officials result in mistrust of health services, and refusal to adhere to diseases prevention guidelines. Previous research revealed dimensions of trust in health care to include perceived competence of the doctor, assurance that treatment, loyalty to a doctor or health facility and respect for the doctor, fidelity, honesty and confidentiality.

Determinants of trust comprised comfort of patients with communication and shared language, conveying accurate information and honest communication of risks, communicating preventive messages by trusted and respected community leaders, personal involvement of the doctor/healthcare provider with patients, doctor/healthcare provider behavior and approach, health awareness and economic factors (cost of service).

Policy Recommendations

The following recommendations are made for policy improvement:

1. The government should improve health care services by addressing the factors that build trust including: competence, assurance of treatment, quality health facilities, better working conditions of the health workers, honesty and confidentiality, effective communication with patients by use of local languages, involvement of trusted community leaders in planning and delivery of health messages, improving doctor/healthcare-patient relations, increasing health awareness and making health services affordable.
2. Information provided about COVID-19 should be accurate to create and sustain public trust for community adherence to disease prevention guidelines and practices at all levels.
3. The behavior and actions of government officials should not contradict government information provided on COVID-19, and in the event that contradiction occurs, explanations should be promptly provided to the public.
4. Myths and false beliefs about the pandemic should be promptly counteracted by correct information in an educative manner so as to promote adherence to government guidelines.
5. Prompt treatment should be provided to the sick to convince the public that government is committed to protecting their lives to increase trust in health services.



Schools are operating under strict COVID-19 guidelines like physical distancing and wearing face masks.



To beat the virus today and ensure better health outcomes beyond the pandemic, hand hygiene, especially through handwashing with soap have been emphasized as a top priority

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