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Factors Associated with COVID-19 Vaccine Acceptance and Hesitancy amongst other Health Care Workers besides Doctors in ATBUTH Bauchi

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Abstract

The acceptance of COVID-19 vaccine and hesitancy among Health care workers besides doctors in ATBUTH was examined with in order to determine the level of COVID-19 vaccine acceptance among health care workers in ATBUTH and to assess the factors of COVID-19 vaccine non-acceptance/hesitancy among health care workers in ATBUTH. A cross-sectional study was carried out using questionnaires administered to health care workers of ATBUTH. Current studies showed that 70 % of respondents were vaccinated while 40 % were not, reasons given by respondents for accepting the vaccine were: 37 % to avoid travel restrictions, 15 % mandatory by employer, 45 % for protection, while 9 % gave other reasons, those that were hesitant in receiving the vaccine did so for fear of side effects, 35 %, lack of adequate information, 30 %, religious belief, 17 %, while 12 % gave a collection of other reasons. Fear of side effects and limited knowledge about the vaccine appear to be the main reasons for vaccine hesitancy among health care workers in ATBUTH.

Keywords: COVID 19, vaccination, vaccine, vaccine hesitancy, health care workers, ATBUTH.

1. Introduction

More than 89 million COVID-19 cases confirmed and 2 million confirmed deaths were observed worldwide (Workforce, 2021;Halme et al., 2022). The advent of the COVID-19 vaccination was an inspiration of optimism for a return to normal life. Nevertheless, this success is dependent on acceptance and uptake of the vaccine (Pak et al., 2020; Sar1şık, Usta, 2021; Beach et al., 2022). Vaccine-preventable disease epidemics have amplified in recent years (UNCTAD, 2020; Cerda, García, 2021), and there is prodigious public health awareness in monitoring behaviour towards vaccination as well as recognizing influences encouraging vaccine tentativeness and rejection (Allen, Butler, 2017; Soares et al., 2021; Marzo et al., 2022; Galal et al., 2022). Several reasons may be attributed to COVID-19 hesitancy and outright rejection (Soares et al., 2021), they are generally complex and predisposed by many other compounding factors (Sar1şık, Usta, 2021; Beach et al., 2022; Marzo et al., 2022). In light of existing development of various COVID-19 vaccines, the current effort aimed to clarify the obstructions to vaccine uptake amongst other health care workers besides doctors in ATBUTH Bauchi.

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2. Methodology

Study area

Abubakar Tafawa Balewa University Teaching Hospital (ATBUTH) is located in Bauchi town, Bauchi State, North Eastern Nigeria and it is located within my immediate community. It is wellequipped with more than 10 clinical and non-clinical departments with the aim of providing standard health care to both indigent and non-indigent patients.

Study design: A cross-sectional study was carried out using a structured questionnaire administered to health care workers.

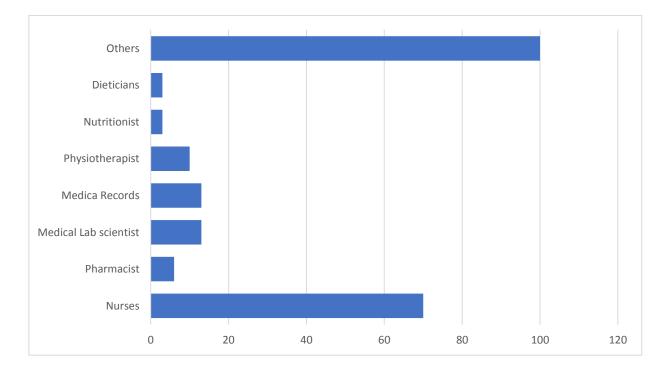
Study population: Consenting Health care workers besides medical doctors of ATBUTH Bauchi.

Inclusion criteria: All Consenting Health care workers besides medical doctors of ATBUTH Bauchi.

Exclusion criteria: Non-consenting Health care workers besides medical doctors of ATBUTH Bauchi.

Data collection: Data was collected using a self-administered questionnaire.

Data analysis: Data was analyzed using Microsoft Office tools.



3. Results

Fig. 1. Distribution of respondents by Cadre

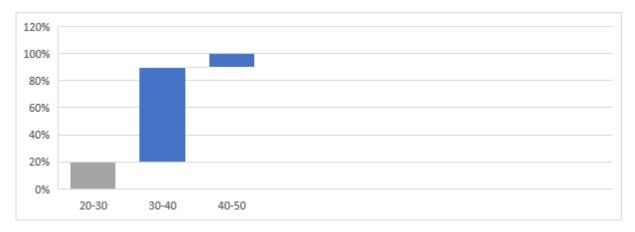


Fig. 2. Percentage distribution of respondents in years

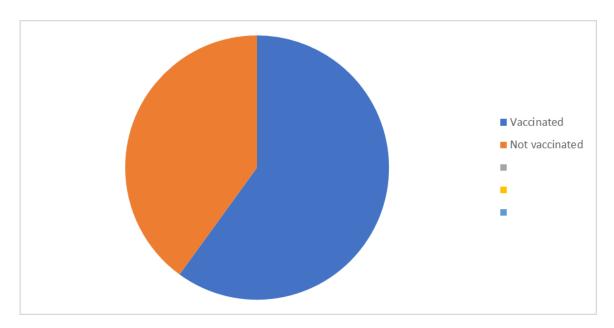
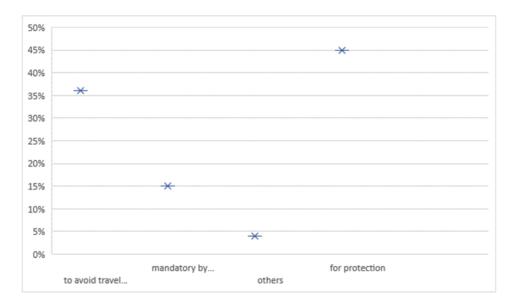
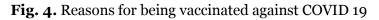


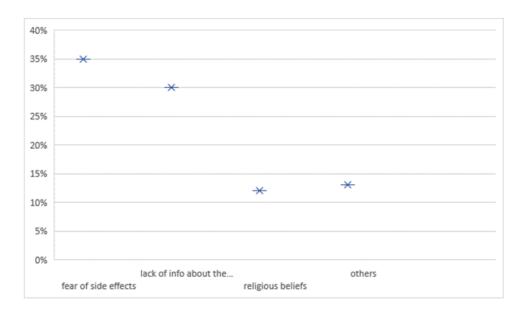
Fig. 3. COVID 19 vaccination status of respondents

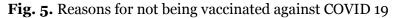




4. Discussion

Vaccine hesitancy results from a multifaceted decision-making procedure, prejudiced by an extensive variety of circumstantial, distinct and cluster, vaccine-specific factors, together with communication and media, past stimuli, religion, culture, gender, and socioeconomic status, politics, geographic barricades, understanding with vaccination, peril acuity, and design of the vaccination sequencer. Current studies showed that 70 % of respondents were vaccinated while 40 % were not, this is in tandem with studies done by UNCTAD (2022). Reasons given by respondents for accepting the vaccine were: 37 % to avoid travel restrictions, 15 % mandatory by employer, 45 % for protection, while 9 % gave other reasons, though the percentages differ, the reasons were similar to those deduced from studies conducted by Marzo (2022). Those that were hesitant in receiving the vaccine did so for fear of side effects, 35 %, lack of adequate information, 30 %, religious belief, 17 %, while 12 % gave a collection of other reasons which were similarly reported by Pak (2020) and Halme (2022). Recently, there is an increase in vaccine-preventable diseases, hence there is an urgent need in monitoring attitudes towards vaccination as well as recognizing influences contributory to vaccine tentativeness and rejection.





5. Conclusion

Covid-19 vaccine hesitancy rates are high worldwide. Strategies need to be adopted to improve vaccine acceptance, thus helping to curb the pandemic.

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