

European Centre for Disease Prevention and Control

# **Survey of healthcare workers' knowledge, attitudes and behaviours on antibiotics, antibiotic use and antibiotic resistance in the EU/EEA**

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# Background

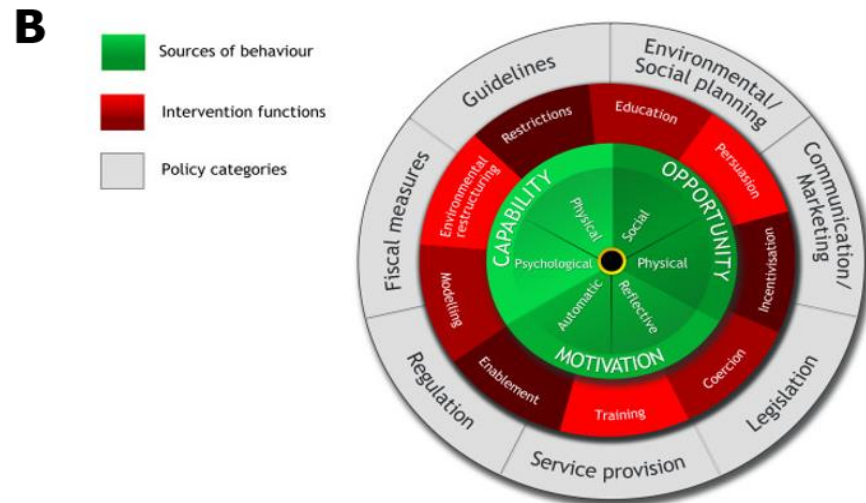


- Several studies have assessed the knowledge, attitudes and behaviours of the general public, healthcare students and individual professional groups in EU Member States regarding antibiotics
- However, there is a lack of literature on the topic including a range of healthcare workers
- This is the first multi-country/multi-professional KAP study of healthcare workers regarding antibiotics, antibiotic use and antibiotic resistance in the EU/EEA

# Study aims

- To provide a broad understanding of healthcare workers' knowledge and perceptions in order to provide an evidence base to support future policy and education changes
- To obtain information to contribute to the evaluation of communication campaigns targeting healthcare workers

# The COM-B behavioural change model



- Capability: The psychological and/or physical ability to engage in a behaviour
- Motivation: The want or need to perform the behaviour more than any other competing behaviours at that moment
- Opportunity: Physical and social factors that prompt or facilitate a given behaviour

# Questionnaire development process

1. Literature review to identify key topic areas
2. Two-round modified Delphi consensus process to develop questions:
  - ✓ Project Advisory Group (PAG), consisting of designated country representatives and selected European health professional organisations/groups
3. Draft questionnaire piloted across EU/EEA countries
4. Translation into 24 official EU languages and Norwegian

# Sampling, questionnaire distribution, and analysis

- Quota sampling approach was used to determine the target survey sample size for each country and professional group
  - Based on the EU healthcare personnel statistics per profession and country
  - 0.2% of the workforce was sought for each healthcare profession in each country (except for nursing professionals, 0.1%)
- Target survey sample size was calculated as 11 931 for the EU/EEA overall
- Questionnaire distributed online by Project Advisory Group (PAG) members, and also promoted via social media (#ECDCAntibioticSurvey)
- Participation was voluntary
- The online questionnaire was open between 28 January to 4 March 2019
- Data were analysed using Microsoft® Excel (2010) and STATA release 15

# Respondents

- 18 365 healthcare professionals responded from across 30 EU/EEA countries
  - NB - Role of PAG in dissemination
- 24 countries met or exceeded their target quota sample size

| Profession  | Quota sample size | Actual number of responses | Percentage of quota sample size (%) |
|---|-------------------|----------------------------|-------------------------------------|
| <b>Physicians</b>   | 3 692             | 7 351                      | <b>199.1</b>                        |
| <b>Nurses, nursing professionals &amp; midwives</b>   | 4 599             | 4 772                      | <b>103.8</b>                        |
| <b>Dentists</b>   | 735               | 1 085                      | <b>147.2</b>                        |
| <b>Pharmacists</b>  | 915               | 3 258                      | <b>356.1</b>                        |
| Other healthcare workers (e.g. hospital managers, pharmacy/dental technicians, allied health professionals) | 1 988             | 1 092                      | 54.9                                |
| Scientists, Others, Unknown   | -                 | 807                        | NA                                  |
| <b>All healthcare workers</b>   | <b>11 929</b>     | <b>18 365</b>              | <b>147.2</b>                        |

# Number of responses and quota sample size by profession, selected countries chosen as examples

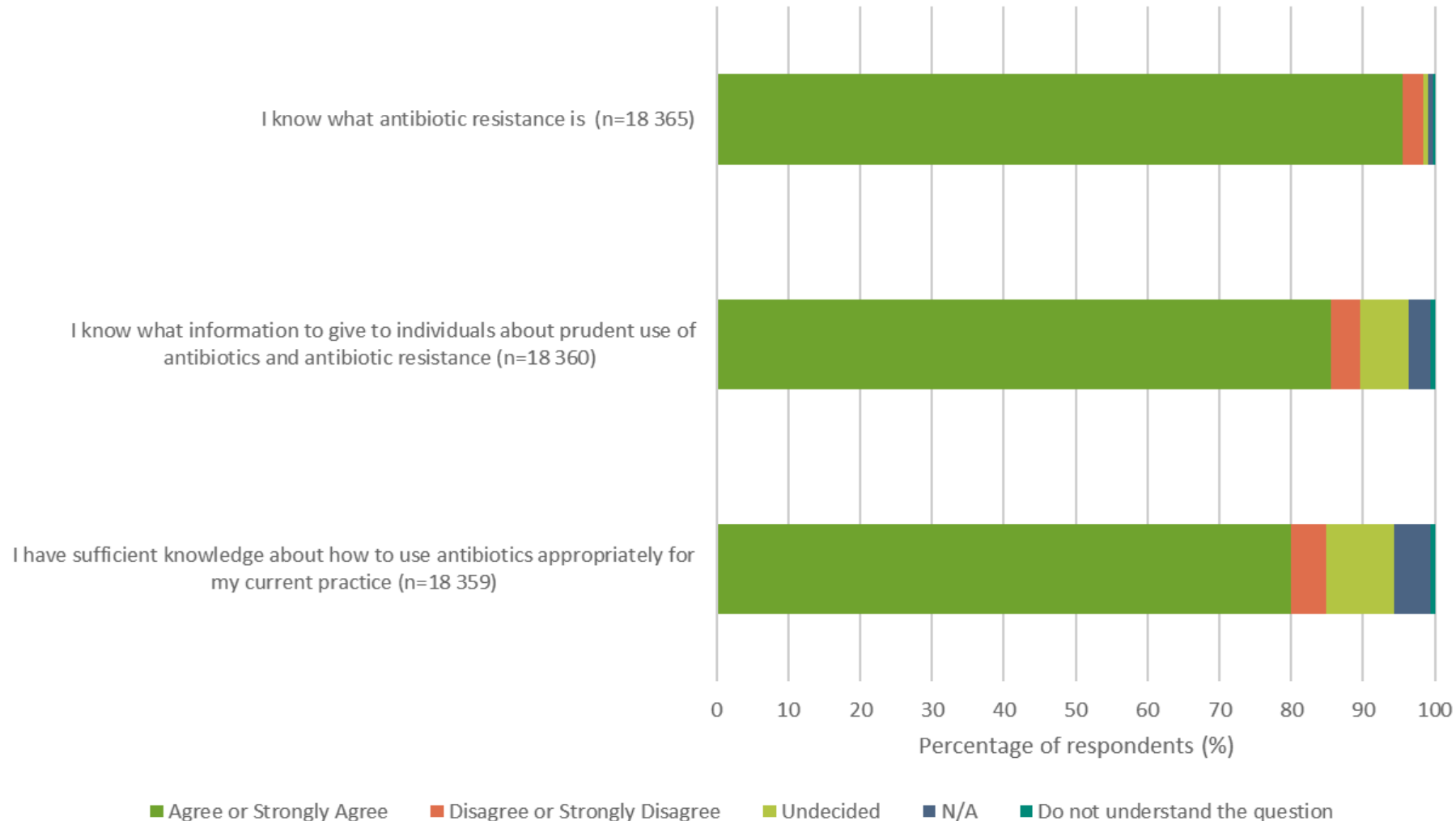
| Country        | Physicians   |              | Nurses,<br>nursing<br>professionals<br>& midwives |              | Dentists   |              | Pharmacists |              | Other<br>healthcare<br>workers |              | Healthcare<br>workers<br>without<br>quota size | Total         |               |
|----------------|--------------|--------------|---|--------------|------------|--------------|-------------|--------------|--------------------------------|--------------|--|---------------|---------------|
|                | Quota        | Total        | Quota   | Total        | Quota      | Total        | Quota       | Total        | Quota                          | Total        | Total  | Quota         | Total         |
| Belgium        | 70           | 177          | 126   | 69           | 17         | 14           | 28          | 86           | 48                             | 33           | 20   | 288           | 399           |
| Czech Republic | 78           | 936          | 89  | 4            | 16         | 1            | 14          | 5            | 39                             | 6            | 12   | 236           | 964           |
| Malta          | 3            | 6            | 4   | 10           | 0          | 10           | 1           | 9            | 2                              | 21           | 1  | 11            | 57            |
| Norway         | 47           | 616          | 94  | 630          | 9          | 38           | 8           | 35           | 32                             | 88           | 59   | 191           | 1 466         |
| Portugal       | 99           | 74           | 69  | 87           | 20         | 19           | 18          | 184          | 41                             | 11           | 11   | 247           | 386           |
| Slovakia       | 38           | 221          | 20  | 179          | 5          | 1            | 8           | 27           | 14                             | 8            | 0  | 86            | 436           |
| <b>EU/EEA</b>  | <b>3 692</b> | <b>7 351</b> | <b>4 599</b>                                      | <b>4 772</b> | <b>735</b> | <b>1 085</b> | <b>915</b>  | <b>3 258</b> | <b>1 988</b>                   | <b>1 092</b> | <b>807</b>                                     | <b>11 929</b> | <b>18 365</b> |

**Beware country comparisons!**

# Settings in which respondents predominantly practice (i.e. >50% of their time)

| Setting  | Number of respondents (%) |
|--|---------------------------|
| Hospital   | 8 972 (49%)               |
| Community (= primary healthcare,<br>e.g. general practice) | 3 982 (22%)               |
| Pharmacy   | 1 742 (9%)                |
| Long-term care facility                                    | 1 071 (6%)                |
| Other  | 2 598 (14%)               |
| <b>Total</b>   | <b>18 365 (100%)</b>      |

# Percentage of respondents who agreed/disagreed with the following statements:

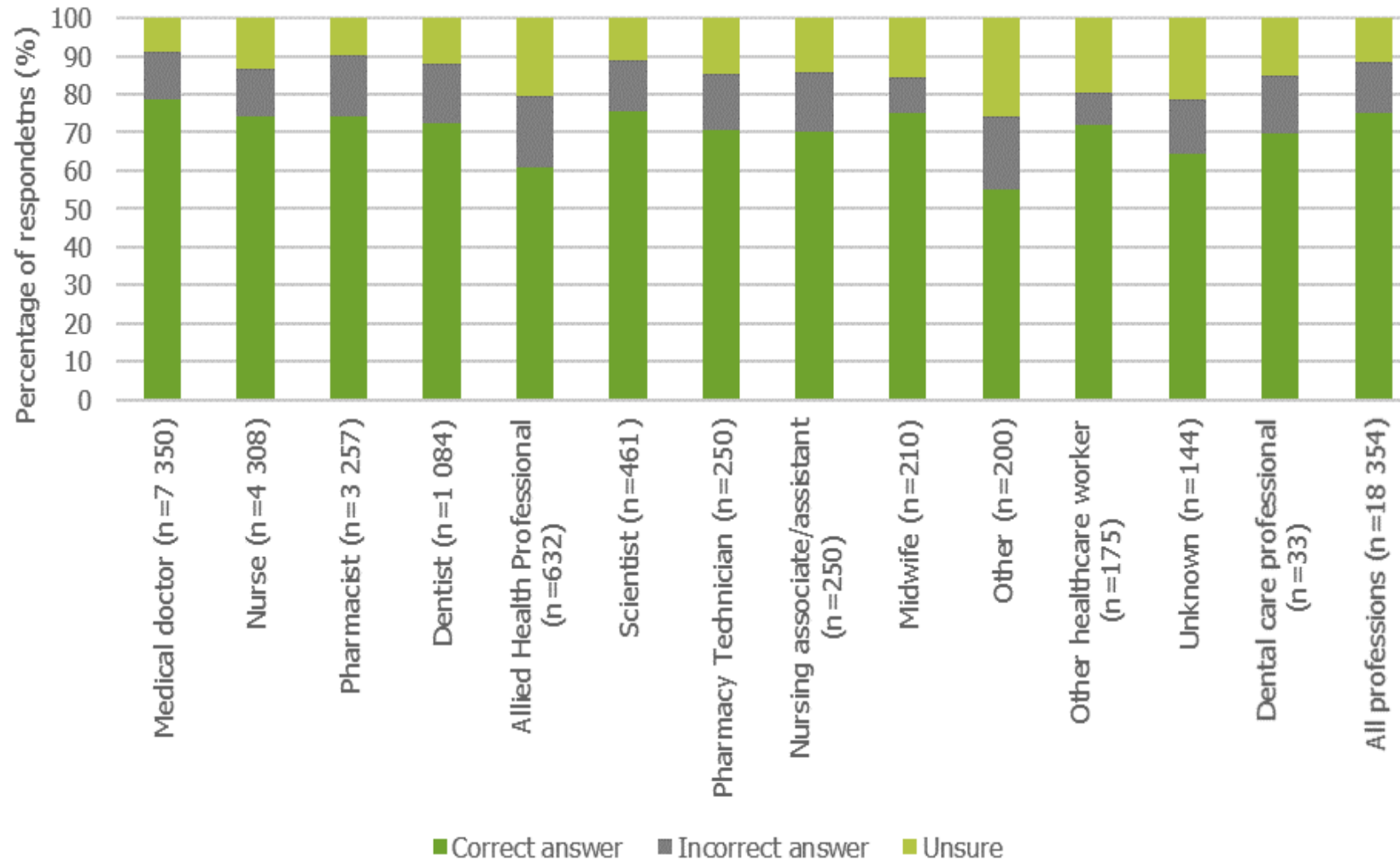


# Percentage of respondents who answered each key knowledge question correctly

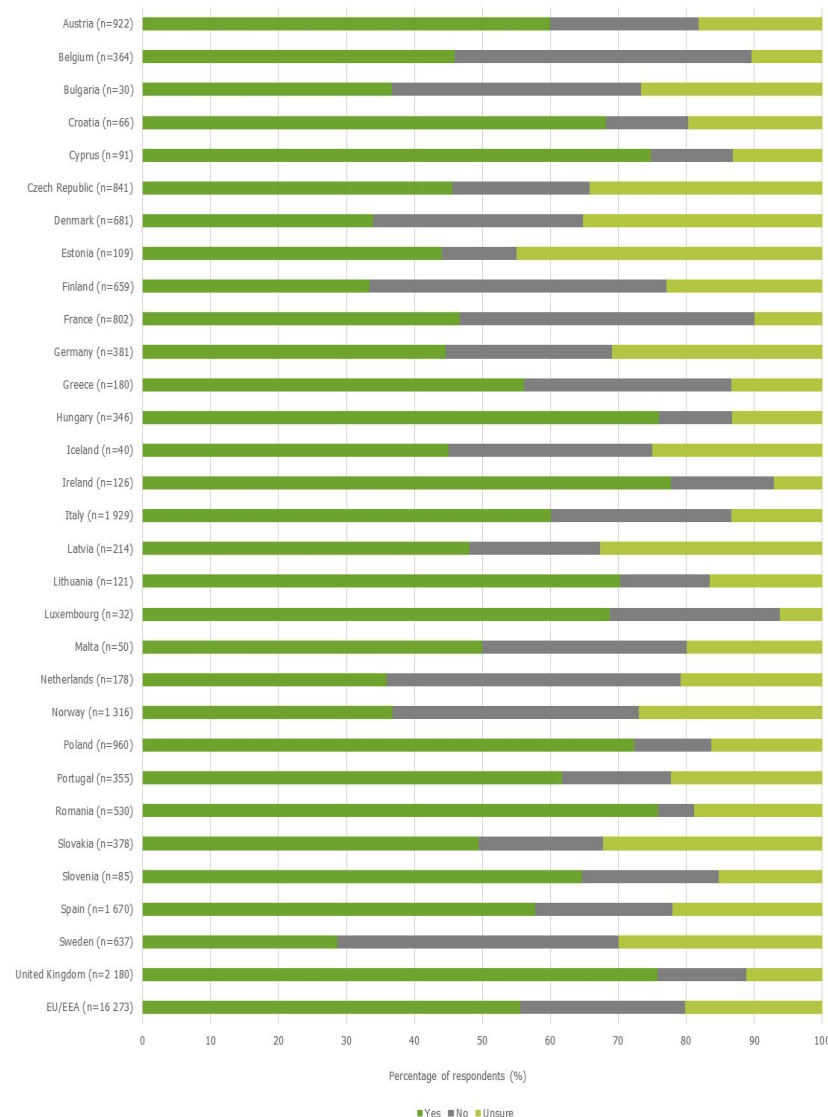
| Key knowledge question (n)  | Correct answer | % Correct (country range)   | % Incorrect (country range) | % Unsure (country range) |
|---|----------------|-----------------------------|-----------------------------|--------------------------|
| <b>Antibiotics are effective against viruses</b> (n=18 357)   | False          | <b>97.5</b><br>(91.7-100.0) | 1.7<br>(0.0-8.3)            | 0.8<br>(0.0-5.6)         |
| <b>Antibiotics are effective against cold and flu</b> (n=18 356)  | False          | <b>97.0</b><br>(89.5-100.0) | 1.7<br>(0.0-7.0)            | 1.3<br>(0.0-8.3)         |
| <b>Taking antibiotics has associated side effects or risks such as diarrhoea, colitis, allergies</b> (n=18 356)   | True           | <b>96.5</b><br>(88.9-98.7)  | 1.9<br>(0.0-5.6)            | 1.7<br>(0.0-11.1)        |
| <b>Unnecessary use of antibiotics makes them become ineffective</b> (n=18 356)                                    | True           | <b>94.0</b><br>(85.3-99.1)  | 4.1<br>(0.0-11.4)           | 1.9<br>(0.0-6.3)         |
| <b>Healthy people can carry antibiotic resistant bacteria</b> (n=18 348)  | True           | <b>88.2</b><br>(66.5-97.1)  | 3.8<br>(0.0-13.0)           | 8.0<br>(2.2-20.5)        |
| <b>Antibiotic resistant bacteria can spread from person to person</b> (n=18 350)                                  | True           | <b>86.9</b><br>(66.7-95.8)  | 7.4<br>(1.4-20.4)           | 5.7<br>(1.8-16.1)        |
| <b>Every person treated with antibiotics is at an increased risk of antibiotic resistant infection</b> (n=18 354) | True           | <b>75.0</b><br>(60.2-93.4)  | 13.7<br>(0.0-29.5)          | 11.3<br>(1.5-21.9)       |

[Compare with results from Eurobarometer: 43% of the general public correctly stated that it is false that antibiotics are effective against viruses]

# Knowledge question: *Every person treated with antibiotics is at an increased risk of antibiotic resistant infection.* Responses by profession

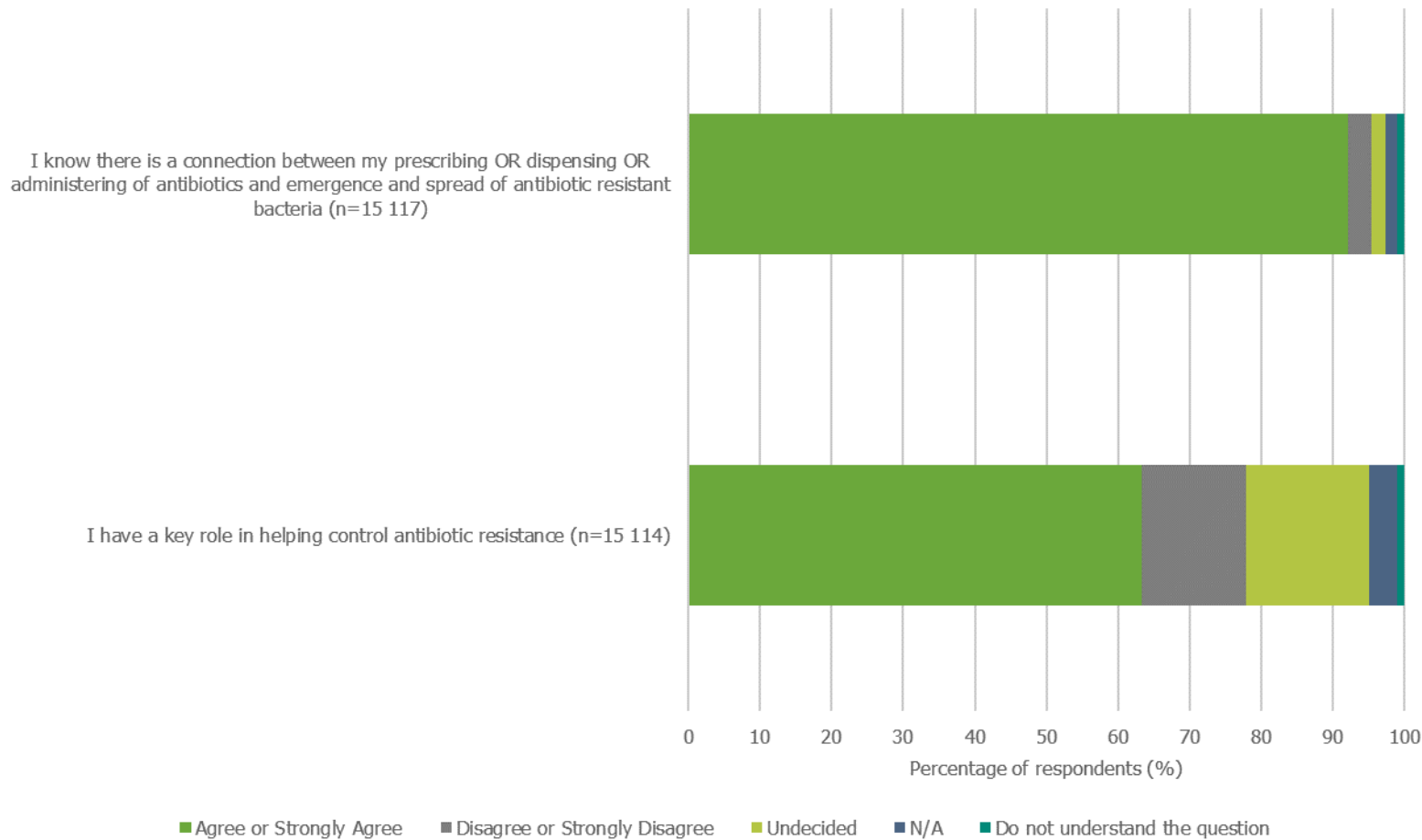


# Percentage of respondents who stated they could list the WHO's 'Five moments for hand hygiene'



- 56% stated that they could list WHO's '*Five moments for hand hygiene*'
- Nurses and nursing associates were significantly more likely than other healthcare workers to perform hand hygiene when dealing with patients or biological material (96% and 92%, respectively)

# Percentage of respondents with direct patient or public involvement who agreed with the following statements



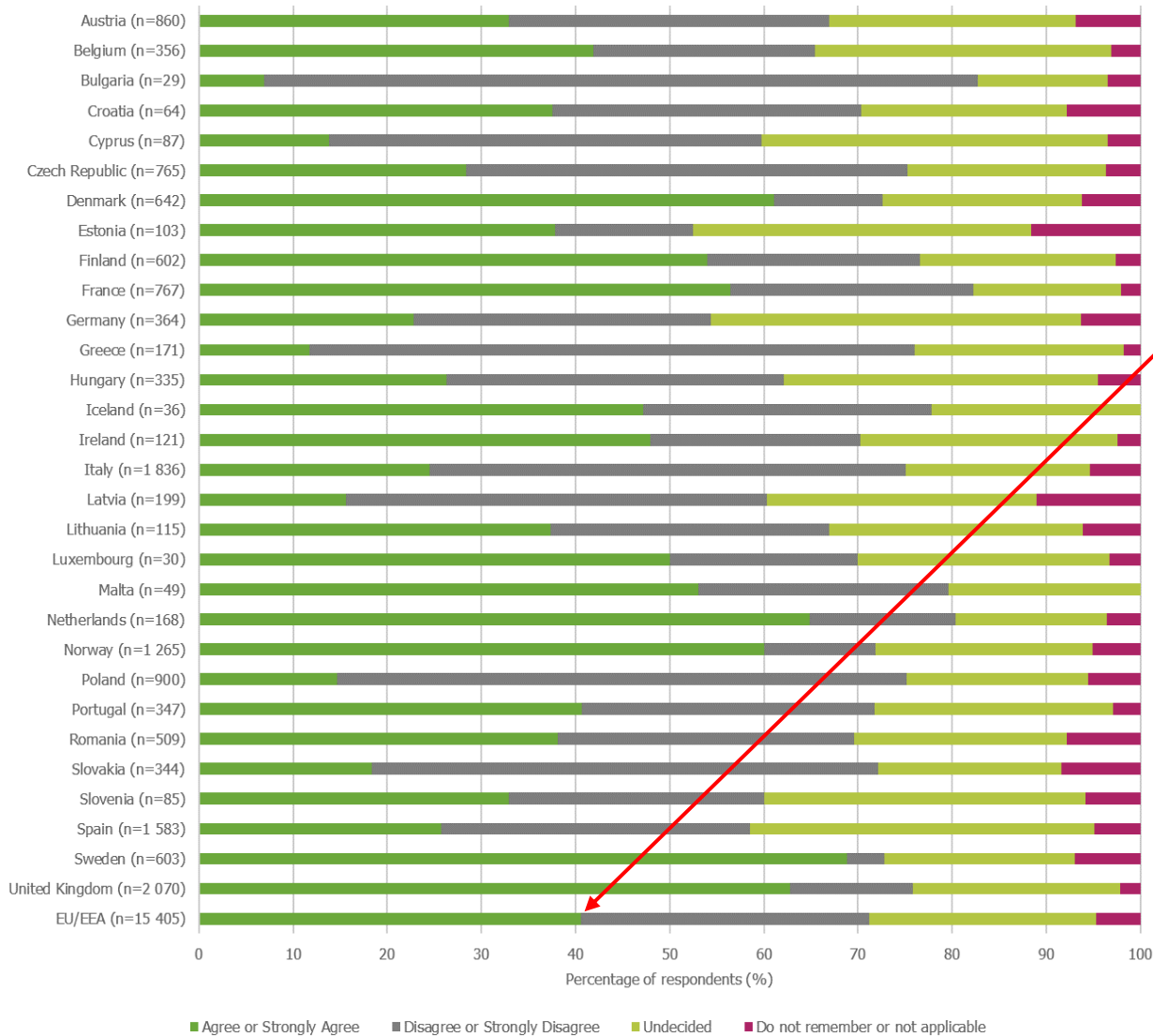
The proportion of respondents who strongly agreed or agreed that they have a key role in helping control antibiotic resistance was **higher for those that work in community settings (65%)** compared to hospital (56%) and other settings (55%)

# Receipt and effect of information about antibiotics

|  | Yes<br>n (%)    | No<br>n (%)     | Unsure<br>n (%) |
|--|-----------------|-----------------|-----------------|
| In the last 12 months, do you remember receiving any information about avoiding unnecessary prescribing OR administering OR dispensing of antibiotics?<br>(n = 16 144) | 9 707<br>(60.1) | 4 913<br>(30.4) | 1 524<br>(9.4)  |
| On the basis of the information you received, have you changed your practice on prescribing OR administering OR dispensing antibiotics?<br>(n = 8 650)                 | 3 641<br>(42.1) | 3 727<br>(43.1) | 1 282<br>(14.8) |

82% of those who have not changed were already following the principles of the messages

# Percentage of respondents who agreed/disagreed that there had been good promotion of prudent antibiotic use and information about antibiotic resistance in their country



# Awareness levels of AMR/antibiotic initiatives

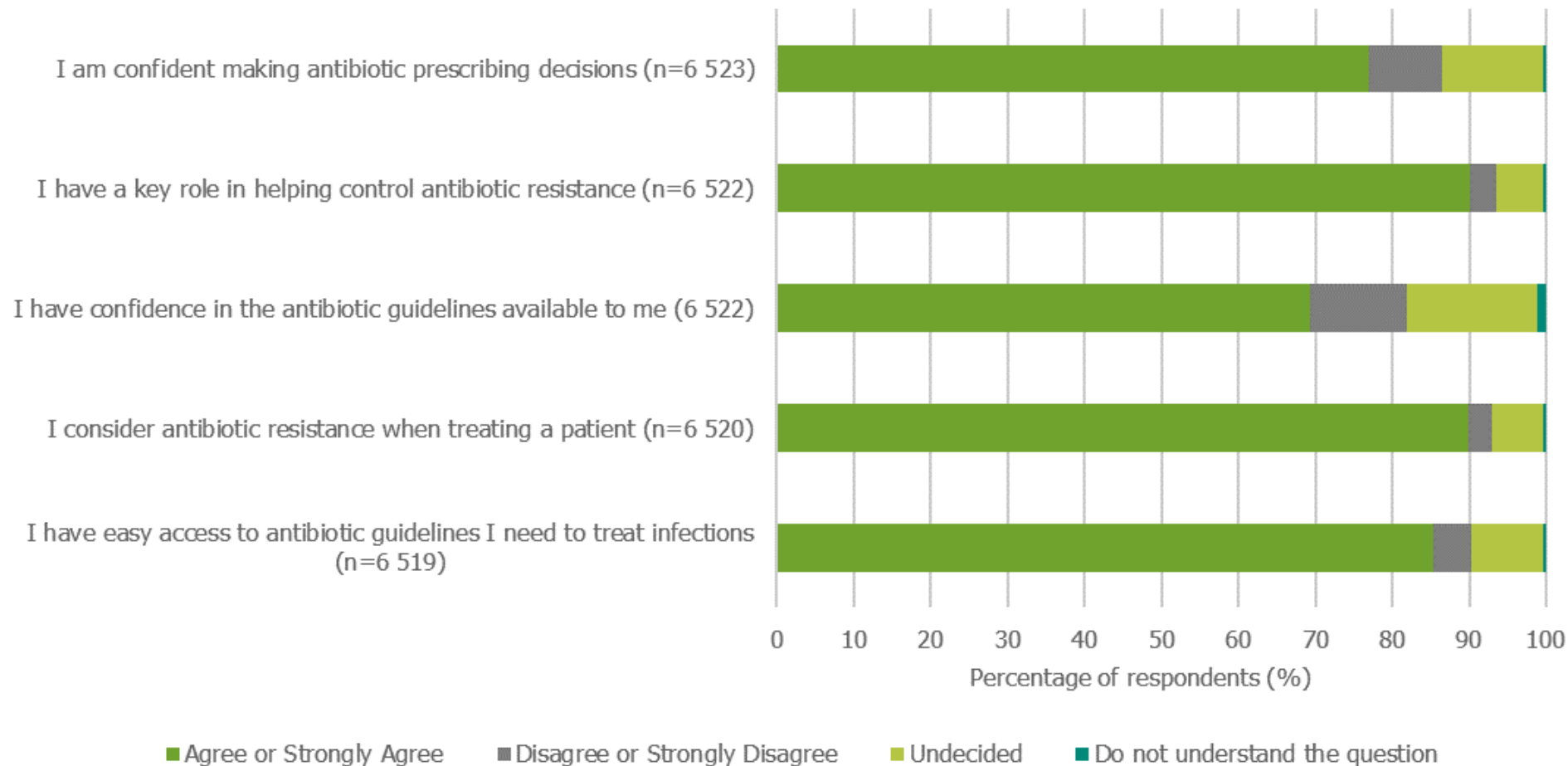


(A) Percentage of respondents who were aware/unaware of whether their country had a national action plan on AMR (n=15 385)

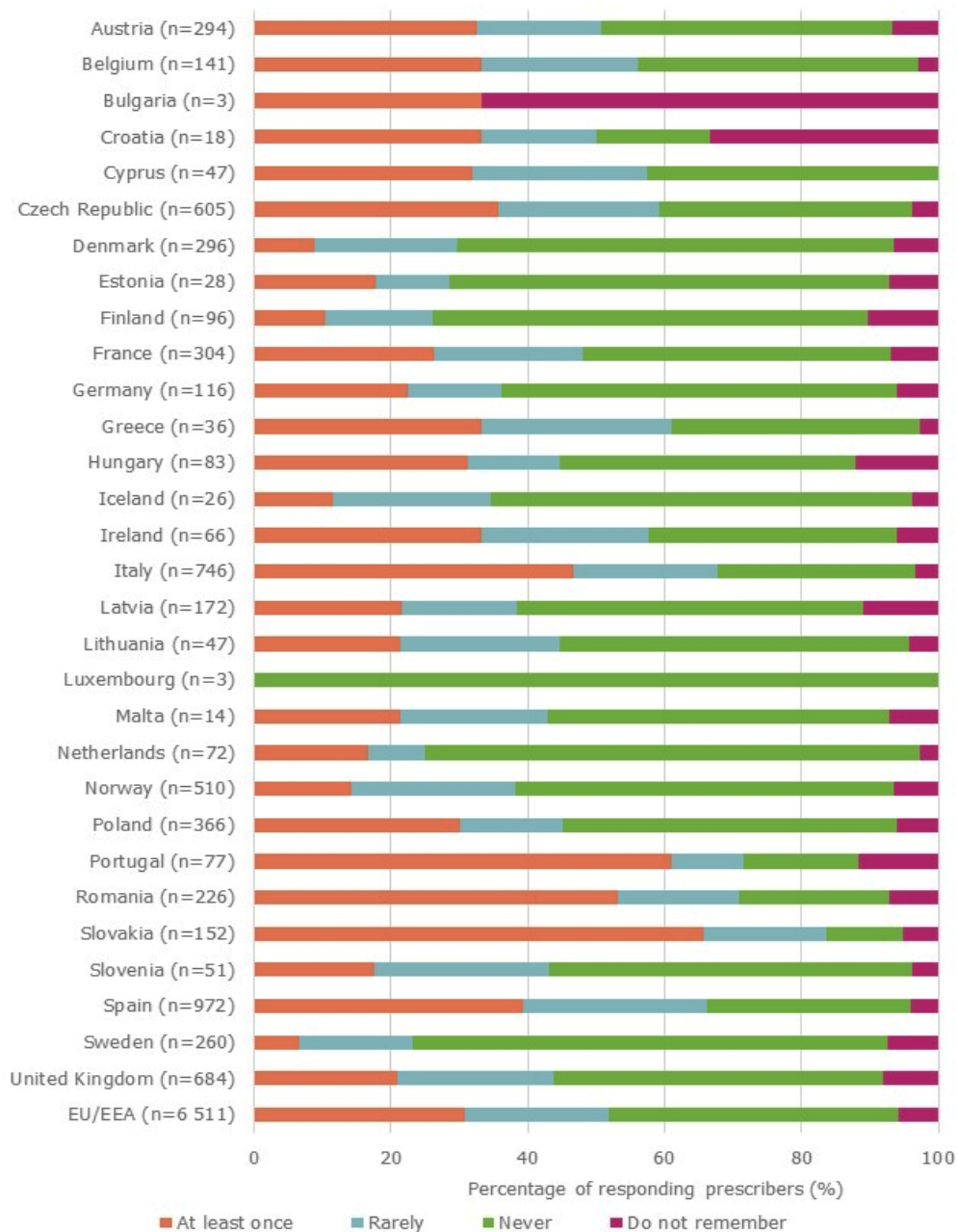
(B) Percentage of respondents who had/had not heard of European Antibiotic Awareness Day (n=15 518)

(C) Percentage of respondents who had/had not heard of World Antibiotic Awareness Week (n=15 397)

# Percentage of responding prescribers who agreed/disagreed with the following statements:



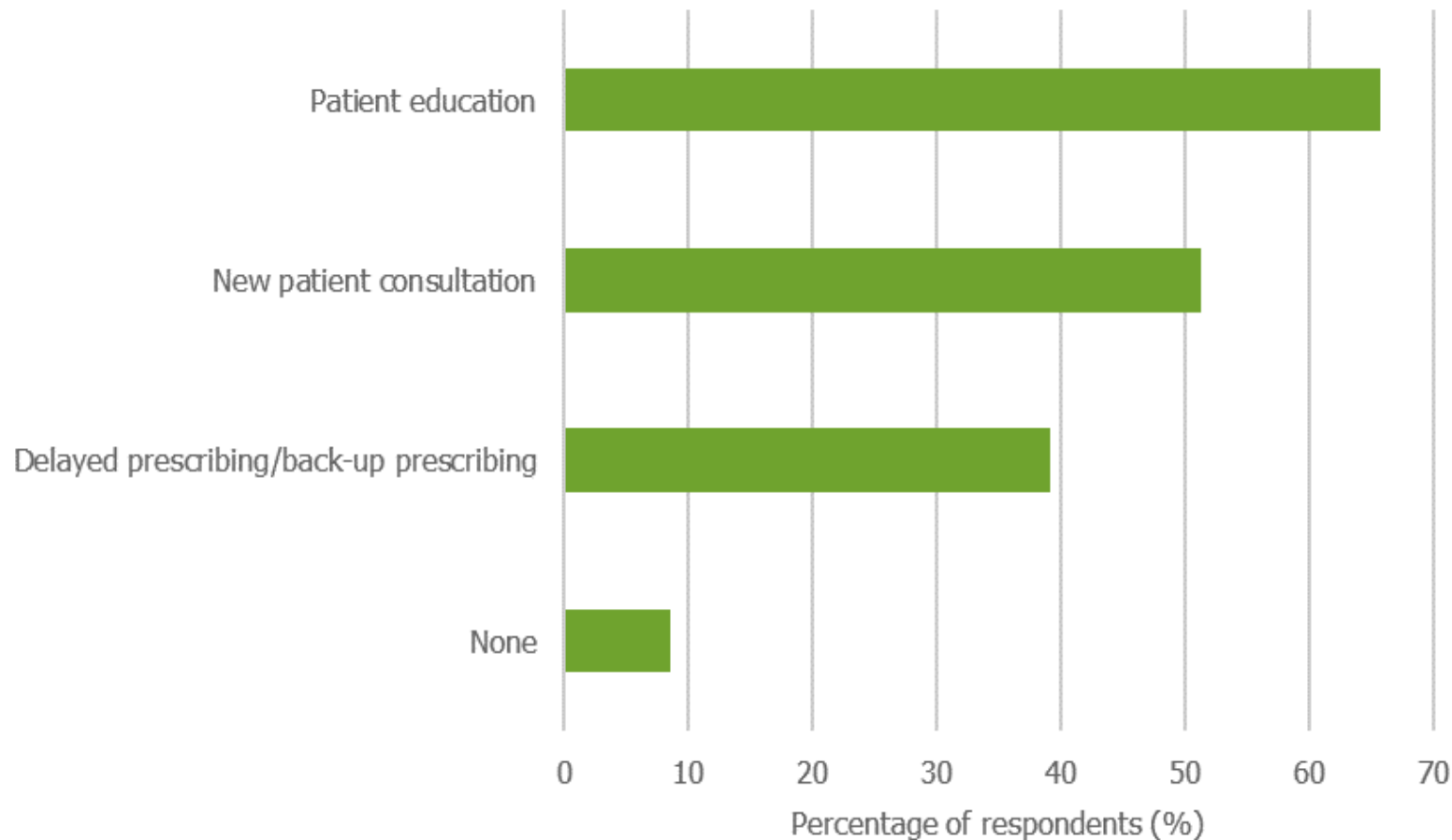
## Frequency of antibiotic prescriptions during the last one week, for which the prescriber would have preferred not to prescribe an antibiotic, by country



Reasons given for prescribers prescribing an antibiotic even when they would have preferred not to:

- **Fear of patient deterioration or fear of complications (43%)**
- Uncertain diagnosis (26%)
- Impossible to follow up on the patient (23%)
- Limited time to explain why an antibiotic may not be indicated (10%)
- Maintaining the patient relationship (8%)

# Percentage of responding prescribers selecting the following as strategies for promoting prudent antibiotic prescribing



# Conclusions



- a) Perceived knowledge about antibiotic resistance is high
- b) Healthcare workers are generally quite knowledgeable about antibiotics and antibiotic resistance (much more than the general public); and doctors are the most knowledgeable professional group
- c) Nurses have the best hand hygiene practices
- d) However, clear knowledge gaps remain, for example in relation to prudent use of antibiotics

## Conclusions (continued)



- e) Nearly 1/3 of respondents have received no information about avoiding unnecessary prescribing/administering/dispensing of antibiotics over the past year
- f) Only around 40% of respondents think there has been effective promotion of good practice and information in their countries
- g) Confidence in the available antibiotic guidelines was expressed by <70% of prescribers
- h) Fear of patient deterioration accounts for 43% of antibiotic prescriptions when the prescriber would have preferred not to prescribe an antibiotic

# Options for action



1. Develop new and/or expand existing educational materials aimed at healthcare workers to ensure that the identified knowledge gaps are filled
2. Particular attention should be paid to those groups of healthcare workers with sub-optimal knowledge, or a self-perception that they do not have sufficient knowledge or skills

## Options for action (continued)

3. Address the factors that influence prescribers to prescribe even where they think it is not clinically necessary
  - Development of rapid diagnostic tests?
  - More promotion of back-up/delayed prescribing?
4. Barriers to providing patients with written resources on antibiotics and antibiotic resistance should be addressed
5. Antibiotic awareness interventions should target both healthcare workers and the community. Multi-faceted interventions occurring on multiple levels can only be effective after addressing locally existing barriers

# ***Survey of healthcare workers' knowledge, attitudes and behaviours on antibiotics, antibiotic use and antibiotic resistance in the EU/EEA (2019). Stockholm: European Centre for Disease Prevention and Control; 2019***

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This report was sent for consultation to The Project Advisory Group - a multidisciplinary group consisting of representatives of each EU/EEA country as well as representatives of EU health professional organisations.