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PERCEPTIONS, ATTITUDES, AND PRACTICES AMONG HOSPITAL HOUSEKEEPERS IN BRAZILIAN HOSPITAL Leonardo de Lima Moura; Claudio Fernando Mahler

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Resumo [Times New Roman 12, bold, centrado]

Palavras-chave: Uma vez que os funcionários de limpeza hospitalar estão expostos a várias situações que podem afetar sua saúde, realizamos um estudo qualitativo em um hospital brasileiro, envolvendo observação direta de funcionários de limpeza. Para a realização da pesquisa, visitou-se áreas de resíduos onde os resíduos são segregados, embalados e transportados. Neste local, o pesquisador procurou estabelecer contato com profissionais de limpeza de diferentes setores do hospital e entender as suas percepções, atitudes e práticas na realização de suas atividades. Os dados foram obtidos através do monitoramento das atividades dos funcionários e pela escuta, privilegiando-se relatórios espontâneos, de modo a minimizar a influência do pesquisador em suas atividades. As informações foram registradas por meio de anotações e, no caso de um relatório espontâneo, foi estabelecido um código de identificação para cada funcionário com o intuito de garantir o anonimato. Com base na pesquisa qualitativa realizada, observamos que os profissionais de limpeza, principalmente femininos, se consideram extremamente importantes para o hospital, mas essa visão não é compartilhada pelos profissionais de saúde. Os funcionários do hospital percebem seus trabalhos como cansativos e são constantemente expostos à resíduos infecciosos sem treinamento adequado e uso de equipamentos de proteção individual apropriados.

Palavras chaves: Funcionários de limpeza hospitalar; Percepções; Hospital; Gerenciamento de Resíduos de Serviços de Saúde

Abstract [Times New Roman 12, bold, centrado]

Since hospital housekeepers are exposed to several situations that can affect their health, we conducted a qualitative study in a Brazilian hospital, involving direct observation of cleaning employees. We visited residue areas where waste is segregated, packed and transported. Here the observer sought to establish contact with cleaning professionals from different sectors of the hospital and tried to understand how their activities are related to healthcare waste management (HCWM). Data were obtained by monitoring housekeepers' activities and by listening to them, observing and noting the answers and performance of their daily activities, to obtain spontaneous reports so as to minimize any researcher's influence in their activities. Information was recorded using notes and, in the case of a spontaneous report, an identification code of the account was established to ensure anonymity. Based on the qualitative research conducted, we noted that cleaning professionals, mostly female, see themselves as extremely important to the hospital, but this view was not shared by health professionals. Hospital housekeepers engaged in tiring work and were exposed to infectious waste without adequate training and safety precautions.

Keywords: Hospital housekeepers; Perceptions; Hospital, Healthcare waste management



Introduction

A positive or a negative perception of their job may affect the quality of life of workers. Concerning healthcare workers, according to Smart et al. (2014), having poor quality of life can produce negative effects such as disengagement from patients, poor attitude on the job and lack of concern, among others.

Regarding the "poor attitude on the job" dilemma, Loveday et al. (2014) investigated the use of gloves, and their potential for cross-contamination and factors that influence their use by healthcare workers. As main results, the authors highlighted that gloves were not appropriately used in 42% of the cases and the decision whether or not to wear was mainly associated with socialization and emotions such as fear and disgust.

Although hospital housekeepers do not have direct responsibility for patient care, they are important because the lack of waste collection leads to accumulation and consequently unpleasant odors and vector proliferation.

By dealing directly with wastes, especially those considered infectious, these professionals are susceptible to accidents, as was observed in a cross-sectional study by Ream et al. (2016) of hospital housekeepers in Goiania, Brazil. As the main results, the authors stated that hospitals presented an accident rate of 26.5%, predominantly percutaneous with hypodermic needles, which involved blood from an unknown source, mainly during waste management.

In addition to the risks related to accidents, these workers, due to working in an environment that exposes professionals to various risks of illness, may develop minor psychic disorders that can lead to insomnia, fatigue, irritability, forgetfulness, difficulty concentrating and somatic complaints such as headache, stomach pain and lack of appetite. In a study carried with housekeeping workers in a public university hospital in the Rio Grande do Sul, Brazil, Marconato et al. (2017) found prevalence of suspected minor psychic disorders of 29.3%. According to the authors, the chances of developing suspected minor psychic disorders were higher among housekeeping workers that did not have enough free-time activities and those taking medications.



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Besides the possibility of suffering accidents and developing psychological problems, these professionals can also develop physical problems due to their work routine. In a cross-sectional study carried out among housekeeping workers in a hospital in Bangalore, Joseph et al. (2016) observed that the prevalence of work-related musculoskeletal disorders was approximately 68.3 % and the pain was highest for lower back and least for ankles.

According to McCaughey et al. (2013), the possibility of being injured or suffering illness on the job can increase levels of stress, job dissatisfaction, and turnover of employees. They found that positive safety perceptions mediate negative injury/illness outcomes and association between partial mediation between injury/illness and job stress.

Due to these results, since the cleaning professionals of a hospital unit, as previously reported, are exposed to several situations that can affect their health, we conducted a qualitative study among hospital housekeepers focusing on the main question: How do hospital housekeepers see the work they do?

2.Methods

The study can be classified as qualitative, because according Taylor et al. (2015), qualitative studies refer to all research that produces as final results descriptive data based on behavior observation and in the speech and written words of the people being studied. Minayo (2011) adds that such research typically focuses on very specific issues, such as meanings, aspirations, attitudes and thoughts. These facts cannot be easily operationalized through variables. In the present study, we investigated the perception of hospital housekeepers about their work through observation of the routine and interviews.

Regarding observation, we opted for direct observation. According to Stake (2016), this is a kind of observation in which the researcher joins the activity as a participant, not only to get closer to the other participants, but to try to learn something from their experience. In the present study, to meet this objective a researcher began to accompany the cleaning professionals full time, including performing some small activities such as transport of waste.

In addition, we sought to meet some characteristics highlighted by Stake (2016) as fundamental for qualitative studies:

1- Interpretive character: In the execution of the research project, we sought to engage in interactions with the hospital housekeepers, experiencing their realities and basing our discoveries on the interaction with them.



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2 - Experimental character: Through this insertion in the work routine of cleaning professionals, we sought to focus on the perceptions of these workers in relation to their practices through direct observation, listening and interviewing.

3- Situational character: The focus of the research was to understand the perceptions, attitudes, and practices among hospital housekeepers.

4-Personal character: We sought to analyze the individual perceptions of each of the hospital housekeepers analyzed and finally to make an overall assessment of the perception of these professionals about their work.

Following the division of qualitative research described by Minayo (2011), the research project was divided into three stages: exploratory phase, field research, and analysis and treatment of documentary material.

Another factor that establishes the qualitative character of the study is the fact of trying, as pointed out by Gibbs (2009), to answer the question "What is happening here", to analyze broadly the characteristics of a particular group, in this case the cleaning professionals of a health establishment. In order to choose the research method used here, we used as a basis the question the article proposes to answer:

"How do hospital housekeepers see the work they do?" Yin (2010) pointed out that issues involving "how" and "why" present a more explanatory research feature, favoring the use of methods such as experiments, historical research and case studies.

Since the intention of the study was to analyze the perceptions, practices and attitudes among the hospital housekeepers, an essential element was to observe their real daily practices, justifying the use of the case study method.

The interviews with the workers were conducted after they had signed the informed consent form. Data were obtained by monitoring and noting their activities and by listening to their comments, giving special importance to their spontaneous reporting, to try to minimize any influence by the researcher in their activities. Information was recorded using notes and in cases of spontaneous reports, an identification code was assigned to ensure their anonymity, using the first three letters of the function and a number, for example, COL1.

Before conducting the interviews, the project was submitted to the hospital managers and the research ethics committee. After approval (Protocol 45388415.7.0000.5257), we held a meeting with the cleaning professionals to elucidate the study's objective and answer any



questions they had about the project. The research ethics committee gave approval for this step to be performed from January to August 2015.

3. Results and discussion

3.1 Hospital housekeeper's perceptions regarding their work

In this study, we interviewed 16 women and 2 men. Regarding the level of education, all employees possessed a high school diploma. After monitoring the hospital housekeepers' activities, they were questioned about their work importance and, after analysis by saturation, examples were given:

"If I don't collect the garbage, it will be mixed with waste from other days, concentrating all trash, bacteria, and flies". (COL2)

"We are the hospital's soul because when garbage increases, more flies appear and the risk of infection to the hospital's patients increases as well." (CLEANER13)

"If we don't clean, this will be a place of infection and bacteria" (CLEANER1)

"The girls and I are fundamental because we take the garbage out and wash the bathrooms" (COL1)

Regarding the reports, different hospital housekeepers highlighted their contributions to the hospital, especially emphasizing the potential negative impacts of not performing their activities. COL2, CLEANER1, and CLEANER13 pointed out that their absence will lead to a proliferation of vectors, bacteria and infections.

The perception of their own importance to the hospital contrasts with the fact these activities are usually perceived as less valuable by society in general, such as cleaning toilets and waste removal. As reported by COL1, they understand that their activities are fundamental to the hospital, to the point that CLEANER13 defined these professionals as the "hospital's soul."

However, as observed among street sweepers and garbage collectors, the importance of their activities does not mean these people receive commensurate remuneration. Many professionals considered that the salary they received did not match the workload and hazards of health care waste management (HCWM).

3.2 Hospital housekeeper's perception regarding the importance given by health professionals to their activities.

Regarding the importance given to their functions by health care workers, the main responses are presented below:



"It's the least valued work; it doesn't have much recognition. Sometimes our own colleagues don't give importance to the job." (CLEANER12)

"Waste is insignificant in the hospital. Waste is only important when it bothers people." (COL1)

"The staff members throw everything on the floor, then say that we did not do the cleaning." (COL2)

"Coexistence with health professionals is not very easy; some don't even look at me." (CLEANER12)

"Sometimes, after a birth, there is blood, feces, and secretions on the floor, and we have to clean it very carefully because many patients have some kind of disease and they do not always warn us" (CLEANER18)

These reports reveal that the importance the hospital housekeepers give to themselves is not shared by health professionals, as described by COL1, who stated that cleaning is the least valued service. It is important to note that this person stressed a lack of recognition even by the cleaning workers themselves.

Society's low perception of this work was also observed in street sweepers, as they had grievances regarding the perception that they are "infected and able to infect", as reported by Velloso et al. (1997) and Lopes et al. (2013). This reverberates among health professionals, since cleaning workers deal directly with potentially infectious waste.

This can be exemplified by the attitude reported by CLEANER12, that even though working in a sector for several years, he still did not have a peaceful coexistence with other staff members. This distancing and discrimination against cleaning workers is similar to what was reported by street sweepers, as demonstrate by Velloso et al. (1997), indicating there is a perception on the part of society that garbage collectors are not like them.

Santos and Silva (2011), in a study among street sweepers and garbage collectors in Fortaleza, Brazil, pointed out that the low perception of this profession can cause a degree of social exclusion of these individuals. The main consequence is the public invisibility delegated to workers considered as menial, and more perceived as absent. This corroborates COL1's statement that "waste is important only when it accumulates".

We expected that health professionals, because they deal daily with people, to present a different attitude toward hospital housekeepers than the attitude of other members of society,



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but this was not the case, as also observed in a study conducted by Leal et al. (2013), who evaluated the influence of educational level on the perception about garbage pickers. They found that people with higher educational attainment, who they expected to have stronger motivation to treat this profession without prejudice, did not do so.

In the specific case of hospital health professionals, it is important to note that many workers, as described by CLEANER18, reported that they cleaned rooms with large amounts blood and secretions without appropriate personal protective equipment (PPE).

This corroborates the fact that workers involved in waste handling have a higher contamination risk due to direct contact and by being closer to the generation of waste, thus having a higher probability to coming into contact with microorganisms that can harm their health, as highlighted by Ferreira and Anjos (2001).

3.4. Hospital housekeepers' perception with regard to workload

The cleaning workers were asked about their workload, and after analysis by saturation, the most significant were:

"Even though I did not have lunch, they were still asking me to do my activities" (COL2)

"There used to be 20 cleaning workers, but now there are only 10." (COL1)

"Employee absence overwhelms everyone because others have to clean the locker room, the white section and cafeteria" (CLEANER3)

"The service is a bit stressful, heavy and tiring" (CLEANER5)

These comments reveal that the cleaning staff thinks they are subject to overload, which was a result, according to COL1, of the 50% staff cutback by the hospital. CLEANER3 added that after the reduction, someone from another area was shifted to cleaning activities.

One consequence was that due to the heavy workload, not having time for lunch is a common occurrence, as highlighted by COL2. The fact that these cleaning workers often have a continuous flow of activities corroborates the observations of Souza and Silva (2011) with garbage collectors and day laborers, indicating that these workers often have no break in their activities.

Furthermore, most of the hospital housekeepers said they did not have sufficient time for leisure activities, which according to Marconato et al. (2017) can increase the occurrence of minor psychiatric disorders.



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It should be mentioned that the cleaners often carry heavy waste bags. The work is described by these people as heavy, tiring and stressful, as described by CLEANER5. This corroborates the results obtained by Joseph et al. (2016), who pointed out that the work involves considerable physical stress. Moreover, it is important to note that most cleaning workers were women. This fact was also observed by Joseph et al. (2016), Martins et al. (2013), Ream et al. (2016), Marconato et al. (2017) and Ni et al. (2017). As noted by Chillida and Cocco (2004), working women tend to face higher stress than male colleagues because they also have to perform housework and care for children.

In addition to the relatively heavy bags, cleaning workers deal daily with potentially infectious waste and sharp objects like needles, as expressed by street sweepers and garbage collectors: "This is the main occupational risk faced by us while collecting waste", according to a statement reported by Ream et al. (2016). Although not reported by any cleaning worker in this study, we observed the occurrence of needle prick accidents involving hospital housekeepers. In one case the worker, not wearing gloves, had the finger pierced by a needle present on the floor of the service room. The occurrence of needle prick accidents was also reported by Lakbala et al. (2012), D'Silva et al. (2016), Ceron et al. (2016) and Ream et al. (2016).

3.5 Cleaning workers' perceptions in relation to training provided

The last question was related to the perception that employees have regarding the training provided for them to work. The most telling answers are presented below:

"When I came here, I didn't receive any training. Neither did the girls when they moved to another sector." (COL1) "

"There is no specific training for waste." (CLEANER1)

"Every hospital you work at, they show you containers, waste rooms and that's it." (CLEANER8)

These statements reveal a lack of training, be it in general to work in any sector, as exposed by COL1, or more specific training for handling hospital waste.

The fact that they do not receive proper training makes these people more susceptible to accidents. Nevertheless, this perception was not shared by all the cleaning workers, since most of them associated accidents with failure in the work process. This is similar to the perception on garbage collectors, according to Velloso et al. (1997), since most of them



consider that the occurrence of accidents at work is more related to the failures inherent in the work process and the lack of appropriate PPE.

In regard to PPE, Ni et al (2017) reported that many Chinese hospital housekeepers were reluctant to use appropriate PPE because these items detract from the efficiency of their practice. This fact was also observed among the hospital housekeepers of the hospital studied, mainly in males, who in many cases collected the garbage without gloves.

Moreover, other cleaning workers also may not see lack of training as responsible for accidents, as found by survey in Rio de Janeiro involving street sweepers Velloso et al (1998). In that survey, the workers considered themselves to be mainly responsible for their accidents. This view that the responsibility for accidents falls solely on workers minimizes the importance of training for the reduction of occupational hazards.

The lack of training for cleaning workers was also reported by Ni et al. (2017), where in Chinese hospitals, hand hygiene knowledge and practice among hospital housekeepers were very poorly disseminated and were associated with a lack of training by supervisors and nurses.

4. Conclusion

Based on the study conducted, we noted that cleaning workers, mostly female, see themselves as extremely important to the hospital, mainly because they consider that without regular cleaning and collection of garbage, the hospital will suffer from the spread of vectors and bacterial infections.

However, hospital housekeepers considered that this view was not shared by health professionals, since they reported that they are usually treated with indifference by these professionals, and only perceived as necessary when garbage and dirt accumulate.

As the workload of these cleaning workers can make this a very tiring job, especially considering that because they are mostly female, they also need to devote time to domestic chores and child rearing. Added to this to the fact that they are continuously exposed to potentially infectious waste, often without adequate PPE for the activities they undertake, and also with insufficient training.

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