Letter to the Editor

Exploring “mistrust” issues during the COVID-19 pandemic in the Philippines: preparing for a better public health management

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To the Editor,

With great enthusiasm, I find the recent article published in this journal “impeccable” when the authors rightfully highlighted that the “spread of mistrust” worldwide has impacted negatively primary care practice and public health in general during this COVID-19 pandemic. They based this conclusion claiming that even the most advanced countries have had a difficult time grappling with the disease due to nonadherence to the International Health Regulations (IHR) and world leaders undermining the science of managing COVID-19. This undermining from world leaders led to increased deaths due to a lack of testing, contact tracing, vaccine hesitancy, and adherence to public health recommendations.1 With this, I would like to enflsh and validate this claim by exploring what had happened in the public health system of the Philippines. In this way, the country can learn more and be more prepared for a future health crisis.

As of this writing, the World Health Organization (WHO) reports that there were already 3,668,268 cumulative COVID-19 cases and 57,066 deaths in the country.2 As of 7 March 2022, a total of 63.1 million are fully vaccinated and that is only 57.6% of the country’s estimated total population.3 What do these data imply? The country has not yet achieved the longed herd immunity and one of the significant reasons for this is due to the “mistrust” behaviour of the different institutions involved in the public health system. First, there has been a huge demand for COVID-19 self-testing amid a rise in cases from the start of January. The government does not have full confidence in these self-testing kits and has yet to approve a self-administered rapid test. Manufacturers in the country have only recently filed for the registration of self-administered rapid test kits, and 11 are currently undergoing review. Reverse transcription-polymerase chain reaction, or RT-PCR, tests remain the accepted testing kit in the country,4 but even an average-earning Filipino cannot afford it because of its high cost. Second, another “mistrust” attitude is manifested in terms of contact tracing. A year into the COVID-19 pandemic, contact tracing in the Philippines is “deteriorating” in various regions. For each COVID-19 case detected, the close contacts who were traced decreased from 7 to 3 within a month.5 This means that some locals do not put their factual information in the mandatory health declaration forms every time they are asked to after going to public establishments. Third, the unending problem of vaccine hesitancy also seems to be unending. There are still Filipinos who do not trust the essentiality and even the efficacy of the vaccines. There are those in the far-flung areas or remote provinces who think that these vaccines are unsafe and even deadly or the life span of those who are vaccinated is shortened and they only have 2–3 years to live. Vaccines were also viewed as unnecessary to those in older age groups who are not allowed to go out while there are those in the younger groups who felt that others needed the vaccine more than them.6 Lastly, the lack of trust also emanates from the relationship between the government and the public. Some Filipinos are already traumatized by the corrupt practices of some government officials. The country borrowed a record P2.74 trillion in 2020 to fight the health and socioeconomic crises inflicted by the pandemic. Senator Panfilo Lacson had exposed an attempt by some people to pocket $350 million or P16.8 billion in public funds in the form of kickbacks during a Senate hearing on the government’s mass immunization programme.7 On the other hand, some government officials also mistrusted those locals who simply wanted to help their needy fellows by organizing community food pantries during the pandemic. The pantry’s principle was from a popular slogan, “from each according to his ability, to each according to his needs.” A week after the initiative began, over 300 similar donation-driven efforts have popped up across the country. Other variations of the programme were also organized such as community libraries, pharmacies, and even essential needs donation-driven efforts have popped up across the country.

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or terrorists used as a strategy by state agents, particularly law enforcement agencies and the military, against those perceived to be “threats” or “enemies of the state.” Uniformed and armed personnel were seen roaming around various locations and trying to investigate possible rebellion against the state.

With all these elements of “mistrust” coming from both the government and the public, it will indeed be difficult to achieve overall wellness for every family and the whole country in general. The ill attitude influences to a greater extent the proper actuation of every person who is involved in the management of the healthcare system. How can these negative attitude be at least reduced? The government officials should serve as role models in terms of getting inoculated first so that there will be high confidence in the vaccine; practice transparency to the public in all its financial transactions; and instead of maliciously doubting the legitimate acts of the locals, why not help them in organizing these initiatives by offering support like maintaining peace and order or simply assuring that health protocols are observed during the operation. In addition, the public is also expected to have a cooperative, honest, and considerate attitude in treating any government official. They must realize that everybody is capable of mistakes and getting tired. These qualities can motivate these officials to perform their duties well and minimize if not eradicate corruption or abuse of authority. The next important question that needs to be addressed is how can Filipinos engage more in the practice of an improved primary care systems? First, both the government and the public should prioritize the improvement and promotion of health literacy. Health literacy is the degree to which individuals can find, understand, and use information and services to inform health-related decisions and actions for themselves and others. Better health literacy has the potential to improve community trust, alleviate health disparities, and improve the results of the immediate response required in the early stages of a pandemic. With this, the public will have full confidence in the vaccines and drugs, realize the importance of contact tracing, regard the essentiality of health protocols as campaigned by the government, etc. Second, the government should also focus on addressing the inequalities in primary care. This unfair condition is evident in the health programmes, facilities, human health resources, finances, and training. The huge fund of the Department of Health (DOH) must be well spent and allocated in procuring the much-needed drugs and effective vaccines for the treatment and containment of diseases, improving the facilities especially in the remote health centres, and most of all, making the necessary intervention to attend to the plight of healthcare workers. This can be done by holding regular training programmes, an increase and timely release of their wages/allowances, and proper recognition of their great efforts. The COVID-19 pandemic is not over yet. The experience of Filipinos with this health crisis brought a lot of learning and hope which can be a tool for a better healthcare system in the future.

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Data availability
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References
1. Tharmaratnam T, D’Urzo A, Cazzola M. Medical knowledge about COVID-19 is traveling at the speed of mistrust: why this is relevant to primary care. Fam Pract. 2022. Advance online publication. doi:10.1093/fampra/cmac001
2. World Health Organization. Global Philippines Situation [accessed 2022 Mar 9]. https://covid19.who.int/region/wpro/country/ph
3. Our World in Data. Coronavirus (COVID-19) vaccinations [accessed 2022 Mar 8]. https://ourworldindata.org/covid-vaccinations?country=PHL
4. Ravelo JL. Why aren’t all countries self-testing for COVID-19? [accessed 2022 Mar 9]. https://www.devex.com/news/why-aren-t-all-countries-self-testing-for-covid-19-102467
5. Talabong R, Magalong: contact tracing is worsening in PH [accessed 2022 Mar 9]. https://www.rappler.com/nation/magalong-says-covid-19-contact-tracing-worsening/
6. Amit AML, Pepito VCF, Sampaico-Tanchanco L, Dayrit MM. COVID-19 vaccine brand hesitancy and other challenges to vaccination in the Philippines. PLOS Glob Public Health. 2022;2(1):e0000165.
7. Lacsa JEM, Cordero DA. We are here...so where’s the vaccine? Achieving ‘herd immunity’ amid the COVID-19 pandemic. J Public Health. 2021;43(3):e533–e534.
8. Leonen M. What is red-tagging aka red-baiting? [accessed 2022 Mar 8]. https://verafiles.org/articles/vera-files-fact-sheet-why-red-tagging-dangerous
9. Leaf ML, Cordero DA. In the line of duty: a response to the clamor of public trust through a cooperative, honest and considerate attitude towards the government. J Public Health. 2021;43(3):e509–e510.
10. Office of Disease Prevention and Health Promotion. Health Literacy in Healthy People 2030 [accessed 2022 Mar 9]. https://health.gov/our-work/national-health-initiatives/healthy-people/healthy-people-2030/health-literacy-healthy-people-2030
11. Molnar A. Health literacy during pandemic and education. Disaster Med Public Health Prep. 2021. Advance online publication. doi:10.1017/dmp.2021.206
12. Naria-Maritana MJN, Borlongan GR, Zarsuelo M-AM, Buon AKG, Nuestro FKA, Dela Rosa JA, Silva MEC, Mendoza MAF, Estacio LR. Addressing primary care inequities in underserved areas of the Philippines: a review. Acta Med Philipp. 2020;54(6):722–733.