**Interviewer:** ndiye inuyo m’mene mukudziwira za kukonzekera kuthana ndi matenda a Covid-19, mwina ndisanafunse kwambiri za kukonzekera, mungandifotokozereko ndondomeko imene ma patient amadutsamo akafika pachipatala pano? Tikati ma patient ndikutanthauza amene akuganiziridwa kuti atha kukhala ndi Covid, kapena kuti ma suspect komanso amene ali Covid confirmed cases, akafika pachipatala pano kuti mpaka atulutsidwe mu chipatala, ndondomeko yake amadutsa ati ndi ati?

*According to your knowledge about preparation for Covid-19 pandemic, maybe before I ask much about preparation, can you explain to me about the pathway that patients go through when they arrive at the hospital? When we say patients we mean those suspected cases of Covid, or confirmed Covid cases, from the time they arrive at the hospital until they are discharged, which processes do they go through?*

**PF:** poyambirira ndiye kuti ndiyambire pa gate

*first of all, let me start from the gate*

**Interviewer:** *mmmh*

**PF:** akafika pa gate paja amapangidwa screen, ngati ali ndi zizindikiro zoti uyuyu ndiye kuti atha kukhala kuti ndi suspect

*they get screened upon entry at the gate, if they have symptoms and are possible suspects*

**Interviewer:** *mmh*

**PF:** amampititsa ku ma tent kuja, kumene kuja ndiye kuti kumatengedwa sample *they are sent to the tents, and samples are collected there*

**Interviewer:** *mmmh*

**PF:** Komano pa sample’pa I am not sure kuti imatenga nthawi yaitali bwanji kuti ma results atuluke. Ngati yatuluka negative, ndiye kuti ameneyoyo atha kupitirira kukapanga zimene amapanga. Ngati yatuluka positive

*But then on the samples I am not sure how long it takes for the results to come out. If the result is negative, then it means they can proceed to do what they want to do. If the result is positive*

**Interviewer:** *uh* *huh*

**PF:** amatengedwa I think kukaikidwa ku isolation

*I think they are put on isolation*

**Interviewer:** *okay*

**PF:** ngati ali ndi zizindikiro zoonekera, si ena akumatha kukhala ndi Covid positive koma ulibe zizindikiro

*if they have symptoms, since it happens that others can be Covid positive but without showing symptoms*

**Interviewer:** *eeh*

**PF:** ngati alibe zizindikiro amatengedwa kupita ku isolation

*if they are not showing symptoms they are taken to the isolation centre*

**Interviewer:** ngati ali ndi zizindikiro amapita kuti?

*Where do they go if they show symptoms?*

**PF:** amapita naye ku..ndikukumbukira poyambirira amapita kwa Kameza

*they are taken to..I remember they were taken to Kameza in the beginning*

**Interviewer:** kwa Kameza?

*To Kameza?*

**PF:** komano nthawi ina yake Kameza anayitseka, panali confusion, ma patient aja amapezeka alowa mkati muno

*but then Kameza wa closed at a certain time, there was confusion, patients were found entering into the hospital*

**Interviewer:** *okay*

**PF:** ndikumawasiya m’ma ward’mu. Samukani apa mupite uku, ife nkutisiya kumapeto a ward

*and they were being admitted to the ward. Move from here and go that side, then they left us at the far end of the ward*

**Interviewer:** *okay*

**PF:** *Yah*

**Interviewer:** nanga si ma ward timauzidwa kuti ward ina inali ku ENT, ndiye inuyo zimenezi-

*because we are told that there was another ward at ENT, so, in your view-*

**PF:** I think kumenekoko ndibwera mukandifunsa mwina kumbali yokonzekera I think *I will explain that when you ask me about preparation*

**Interviewer:** chabwino, ndiye pa ndondomeko imene mwafotokozayi, pamene mukuona kuti apapa zinthu zimayenda bwino, ngakhale munafotokoza kuti “iyayi ku lab’ko sindikudziwa kut ma results amatenga nthawi yaitali bwanji kuti atuluke.” Kuchoka pa gate, mwawapanga screening, awatumiza kwa Kameza, mwawabweretsa ku ward, pamene mukuona kuti zinthu zimayenda bwino ndi pati?

*alright, the process which you just explained, in what area do you feel things were going on well, although you have said “no, I do not know how long it takes for the result to come out.” From the gate, after patients have been screened, and have been sent to Kameza, you have brought them to the ward, at which stage do you feel things were going on well?*

**PF:** pamene ndimaona kuti zinthu zimayenda bwino ndi screening ya pa gate yokha *only the screening at the gate is where I saw that things were going on well*

**Interviewer:** *Uh* *huh*

**PF:** pamene pajapo amayesetsa kuti aliyense amene akulowa mkatimu ampange screen, amene ali suspect ampange hold unless amuyeze ma results atuluke *there they were trying to screen each and everyone entering the hospital premises, those who were suspects were held until they were tested and results were out*

**Interviewer:** *Okay*

**PF:** ndikumpititsa kwa Kameza

*They would then take them to Kameza*

**Interviewer:** *Uh huh*

**PF:** komano atangofika polowetsa mkati ma confirmed cases

*but when they reached a point of allowing confirmed cases inside*

**Interviewer:** *mmmh*

**PF:** Pamenepopo ndiye ndinaona kuti zayamba kukhota

*That’s when I started feeling that things were going wrong*

**Interviewer:** *Okay*

**PF:** *yah*

**Interviewer:** chabwino, nde mwina mafunso tsopano okonzekera kubwera kwa Covid-19. Inuyo ngati pa inu nokha munakonzekera bwanji kuti Covid-19 tikanakhala nawo ma case ochuluka kusiyana ndi aja tinali nawo aja, nanga si koyambiriraku tinkanena kuti aah, mmene tinkamvera maiko ena kuti ma case ndi ambiri ndiye kukhala ndi ma case ambiri kwathu kuno maka-maka pa Queens pano, inuyo munakonzekera bwanji ngati pa inu nokha?

*Alright, now let’s go to questions regarding preparation of Covid -19. You as an individual, how did you prepare for Covid-19 if we had more cases than those that we had, at first we were saying aah, when we were hearing about Covid-19 from other countries that there were many cases and if it was here in Malawi especially at Queens, how prepared were you as an individual?*

**PF:** [sighs] personally kukhala ndi ma case ambiri

*[sighs] personally, if we had many cases*

**Interviewer:** *mmmh*

**PF:** sindinakonzeke chifukwa choti mwina ma resources anali ochepa kuti if you can see nthawi imene ija kuti zipangizo zimasowa

*I wasn’t prepared because resources were limited so much so that if you can see at that time there was scarcity of equipment*

**Interviewer:** *yah*

**PF:** ma PPEs samapezeka

*PPEs were not available*

**Interviewer:** *mmmh*

**PF:** so kukonzekera kwake kunali kovuta pa munthu wekha kukonzekera ma cases amene akubwera

*so, preparation was difficult for an individual to prepare for cases coming in*

**Interviewer:** *yah*

**PF:** *eeh*

**Interviewer:** nanga chipatala chinakonzekera bwanji ma case kuti akayamba kuchuluka? *What about the hospital, how was the hospital prepared in case of increased cases?*

**PF:** chipatalanso sichinakonzeke

*the hospital was not prepared also*

**Interviewer:** mukamati sichinakonzeke-

*when you say it was not prepared-*

**PF:** [chipatala sichinakonzeke

*[the hospital wasn’t prepared*

**Interviewer:** *mmmh*

**PF:** ndi zambiri ndakamba kale kuti kusowa kwa zinthu zodzitetezerazi

*I have already said a lot, that unavailability of protective wear*

**Interviewer:** *mmmh*

**PF:** mbali imodzi, chifukwa nthendayi tinayidziwa pakanthawi kuti ooh kwabuka muliri

*On one part. Because we knew about this pandemic sometime back that ooh there is a pandemic*

**Interviewer:** *mmmh*

**PF:** kumene timadziwa kuti pangatalike pangatani mwina kwathu kuno udzafika *where we knew it would come to Malawi no matter how long it may take*

**Interviewer:** *eeh*

**PF:** so ngati chipatala, chimayenera kukonzekera nthawi imene ija even kunoko tilibe case olo imodzi

 *so as a hospital, it needed to prepare at that time even when we did not have a* *single case*

**Interviewer:** *eeh*

**PF:** ma PPE kusunga zokwanira ndithu kuti ikangoti yapezeka kuno

*have adequate PPEs so that when we start having cases here*

**Interviewer:** *mmmh*

**PF:** ndiye kuti kuno tikanakhala kut iwe are almost ready

*then we would have been almost ready*

**Interviewer:** *mmmh*

**PF:** komano chipatala sichinakonzeke, tinalibe malo timangokhala mwina timadalira ma tent amene anamangidwa mosalongosoka mwa “tiyeni tiyeni tiyeni zavuta” *but then the hospital wasn’t prepared, we did not have a place, we were just sitting idle depending on tents which were not properly pitched saying “let’s do it, the situation is bad”*

**Interviewer:** *mmm*

**PF:** yet ngati chipatala mwina timayenera kukhala ndi isolation centre yongokhala yongonena kuti kaya kuli cholera, mmene amapangira a Cholera amakhala ndi malo awo onena kuti Cholera ikagwa chaka ndi chaka savutika

*yet as a hospital we were supposed to have an isolation centre readily available whether for Cholera, like they do for Cholera, they have their own place so that they should not suffer whenever there is an outbreak of Cholera*

**Interviewer:** *mmmh*

**PF:** amadziwa kuti ma patient onse amalowera ukoko

*they know where all those patients should go*

**Interviewer:** *mmmh*

**PF:** ndiye timayenera kukhala ndi malo ngati chipatala

*so as a hospital they need to have their place*

**Interviewer:** *mmmh*

**PF:** not inside the hospital, komano mwina outside the hospital kunena kuti malo awawa kungoti kwabwera muliri kaya ndi Covid, kaya ndi Ebola kaya ndi chani, muliri umenewo usadzatizunguze mutu. Ma confirmed cases onse amene akupezeka tidziwatumiza kumenekoko

*not inside the hospital, but a place outside the hospital in case of Covid, or Ebola or anything, the pandemic should not confuse us. We should be sending all these cases there*

**Interviewer:** *mmmh*

**PF:** chifukwa ngati chipatala kutenga patient, confirmed case kuyilowetsa mkati *because as a hospital you are allowing a confirmed case inside the hospital*

**Interviewer:** *mmmh*

**PF:** M’menenso muli ma patient ena oti immunity ndiyochepa

*where there are other patients with low immunity*

**Interviewer:** *mmmh*

**PF:** ndiye kuti risk tikuperekanso kwambiri kwa ma patient athu aja

*it means we are also putting our patients at risk*

**Interviewer:** chabwino

*alright*

**PF:** ndiye ndikuona ngati chipatala sichinakonzeke mokwanira

*So I feel the hospital wasn’t prepared enough*

**Interviewer:** nanga gulu la anthu lomwe limatsogolera ntchito ya matenda a Covid-19 linapangidwa motani, munali anthu ngati ndani, osati maina a anthuwo koma mwina maudindo a anthu amene anaikidwa mu komiti kuti kakhale kagulu koyang’anira matenda a Covid?

*What about the team which was leading in COVID-19 activities, how was it composed, which people were incorporated, not their names but maybe roles of those people who were put in the committee to oversee activities of Covid-19 pandemic?*

**PF:** gulu limenelili linapangidwa kuchokera kumtundaku, munali ma matron, munali ma anaesthetist amapezeka m’menemo

*the team was composed of people from top cadres, there were matrons, anaesthetist were also in that group*

**Interviewer:** *mmmh*

**PF:** ma nurses anali m’menemo

*nurses were in the team*

**Interviewer:** *uh* *huh*

**PF:** ma doctors’nso anali mmenemomo

*And doctors were also in the team*

**Interviewer:** *mmmh*

**PF:** amenewawa pa ground amayesetsa kuti chinthuchi chikamabwera chisadzativute

*these people were trying hard on the ground so that it shouldn’t be hard to us when the pandemic comes*

**Interviewer:** eya

*yes*

**PF:** koma zimaoneka kuti mwina panali kukokana-kokana mkati mwaomo, nchifukwa zinakhala ngati kuti zafika poti zativuta

 *but it looks like there were disagreements among themselves, because if the pandermic worsened*

**Interviewer:** *mmmh*

**PF:** tikuoneka kuti anthufe sitinakonzeke chifukwa choti koyambirirako anthu amene anali pa ground

*it looks we were not prepared because at first, people who were on the* *ground*

**Interviewer:** *mmmh*

**PF:** ntchitoyi sanayitenge bwino

*did not take their job seriously*

**Interviewer:** *mmmh*

**PF:** *mmm*

**Interviewer:** okay, nanga nkhani ya maphunziro kapena upangiri wa kapewedwe ka matenda a Covid-19, kuchepetsa kufala komanso kasamalidwe ka matenda a Covid-19, zinali zokwanira motani? Izizi mwina ndikutanthauza ngati ma infection prevention measures, zinthu zogwiritsa ntchito ngati za infection preention measures, kuphatikizapo kuphunzira za infection prevention, zinali zokwanira motani kwa anthu ogwira ntchito ya chipatala?

*Okay, what about the issue of training or advice on Covid-19 prevention, reducing the spread of Covid and also care of Covid-19, how adequate were these? What I mean here is infection prevention measures, including learning about infection prevention, were these adequate for staff at the hospital?*

**PF:** okay, ku nkhani ya maphunziroyo ine ndikuona ngati maphunziro anali osakwanira

*okay, on issues of training I feel like training was inadequate*

**Interviewer:** *mmmh*

**PF:** chifukwa chonena kuti koyambiriraku anthu amene amakaphunzitsidwa

*because the people who were trained at first*

**Interviewer:** *mmmh*

**PF:** amakhala anthu amene sakhala pa ground

*were not the ones working on the ground*

**Interviewer:** *okay*

**PF:** mwina anthu amene amakhala mu ma ofesi

*they are maybe people who work in offices*

**Interviewer:** *mmmh*

**PF:** amenewo

*those ones*

**Interviewer:** ndikudziwa mmene zimakhalira mu chipatala cha boma

*I know how things are done in government hospitals*

**PF:** eya, anthu amene anaphunzira si amene anali pa ground

*yes, people who were trainined are not the ones who work on the* *ground*

**Interviewer:** *uh* *huh*

**PF:** tsono zitafika poti iih anthu aphunzire tiwauze zoti kodi tipange bwanji, kodi Covid imafala bwanji, too late matenda aja afala

*The time the situation reached a point of saying iih people have to be trained to tell them how to do certain things, how Covid-19 spreads, it was too late because the pandemic had already spread*

**Interviewer:** *mmmh*

**PF:** amene ali pa ground zinthu zija akuzidziwa mochedwa, pamene iwowo ndiamene amagwira kwambiri patient wina aliyense

*people on the ground knew about these things very late, when they are the ones who mostly deals with patients, each and every patient*

**Interviewer:** *mmmh*

**PF:** sakudziwa kuti kodi patient uja ali ndi chani

*not knowing the status of the patient*

**Interviewer:** *uh* *huh*

**PF:** mapeto ake ndi zija zimapezeka kuti ma health workers ambiri-mbiri akufa, ena akupezeka nayo nthendayi

*it happens that many health workers die in the end, others would have* *contracted the disease*

**Interviewer:** *mmmh*

**PF:** chifukwa choti maphunziro anali ochepa, anabwera mochedwa

*Because training was inadequate, they were trained late*

**Interviewer:** mochedwa, okay.

*Late, okay*

**PF:** mumakauzidwa kuti tiyeni tikaphunzire za Covid, Covid’yo yayamba kale yafika poti mmene timapanga ifeyo kwathu kuno

*By the time you are told to go for Covid training, the Covid pandemic has* *already come and when we were doing this in Malawi*

**Interviewer:** *mmmh*

**PF:** nkuti figure ya dead body ija ikutani-

*the number of deaths was-*

**Interviewer:** [ikukwera

*[rising*

**PF:** ikukwera, ndipamene amati tiyeni tikaphunzire figure

*numbers were rising, that’s when they were telling us to go for training*

**Interviewer:** *uh* *huh*

**PF:** zinazo timangomva kuti, ngati kukhala ndi chidwi ndimmene zimachitikira kuti nthenda isafale kwambiri, akulimbikitsa kwambiri ngati kusamba m’manja

*we were just hearing about it, we were just being curious on how things were done so that the pandemic shouldn’t spread much, when they encouraged people to wash their hands*

**Interviewer:** *yah*

**PF:** ngati tili ku ntchito tivale zodzitetezera

*wear PPEs whenever we are at work*

**Interviewer:** *mmmh*

**PF:** tivale ma mask, zinthu ngati zimenezozo

*We should wear masks, things like those*

**Interviewer:** *okay*

**PF:** ndiye mwachidule ndinene kuti maphunziro sanayende bwino, anayamba kuphunzitsa anthu amene ali mu ma ofesi than anthu amene ali pa ground

*So, in short I should say training didn’t go well, they started training people who* *work in offices instead of those on the ground*

**Interviewer:** *okay*

**PF:** *mmm*

**Interviewer:** chabwino, nanga mwatchulapo nkhani ya kugwiritsa ntchito zodzitetezera, zimenezi zimapezeka bwanji mu nthawi ya Covid’yi kapena tikukonzekera Covid ngati ma mask ndi zinthu zina kaya ma mask, zi ma apron zazikulu-zikuluzi, zimapezeka bwanji kwa ma staff akazifuna?

*Alright, you have mentioned the issue of protective wear, were these available during the time of Covid or when we were preparing for Covid, like masks and other things, the big aprons, were these available whenever members of staff needed them?*

**PF:** timakapanga order ku pharmacy

*we were ordering from the pharmacy*

**Interviewer:** *uh* *huh*

**PF:** ma mask’wo itafika poti yafika povuta amapezeka

*masks were available when Covid-19 reached a climax*

**Interviewer:** *mmmh*

**PF:** komano anadzayamba kukhala ngati akuika malire

*but then they started controlling*

**Interviewer:** *uh* *huh*

**PF:** okhawo amene akugwira ku Covid ward kapena ward ya Covid ndi imene imaoneka ngati kuti imapatsidwa zonse zoyenereka kuziteteza ku muliri uwuwu *only those working in the Covid ward or it looked like the Covid ward was receiving all the necessary PPEs for protection against the pandemic*

**Interviewer:** *yah*

**PF:** tsono ngati ifeyo mwina chimene amati tizigwiritsa ntchito amati tizivala ma apron ndi ma mask, ndi mwina ma glove ngati tikugwira anthu

*Like us we were told to wear aprons and masks, and maybe gloves if we are handling people.*

**Interviewer:** *yah*

**PF:** so, zinali zodandaulitsa chifukwa choti patient amene tikumugwirayo, amene sitinamuvalire full PPE’yo sitikumudziwa

*so, this was worrisome because we never knew the patient we were treating, without wearing full PPE*

**Interviewer:** simukumudziwa yah

*yah, you do not know them*

**PF:** later on umadzapeza kuti patient uja ndi wa Covid positive

*Only to discover later on that the patient is Covid positive*

**Interviewer:** *yah*

**PF:** iwe wamugwira-gwira {laughing}

*yet you already touched them {laughing}*

**Interviewer:** *mmmh*

**PF:** so zinali zochititsa mantha. Ndiye tinganene kutibe sitinakonzeke mokwanira ngati chipatala

*so it was terrifying. And I should say that we were not well prepared as a hospital*

**Interviewer:** *okay*

**PF:** *eeh*

**Interviewer:** chabwino, komano ngakhale zimapezekerabe mosowekera momwemo, anthu amazigwiritsa ntchito bwanji, mukuona kuti panali kusiyana kotani nthawi yoti kunalibe Covid ndi mwina nthawi yoti tayamba kukhala ndi ma case a Covid, anthu kugwiritsa ntchito ma mask, kusamba m’manja?

*Alright, but even though they were scarce, how were people using them, what do you think is the difference between the time when there was no Covid and maybe this time when we have Covid cases, do people use masks, do they wash their hands?*

**PF:** apopo ndiye zimagwiradi ntchito moyenera

*we were being used properly that time*

**Interviewer:** mmmh

**PF:** mwina chifukwa cha mantha

 *Maybe because of fear*

**Interviewer:** uh huh

**PF:** tinazigwiritsa ntchito moyenera kusiyana ndi nthawi imene kunalibe ma cases’wo

 *We used them properly as opposed to the time when we had no cases*

**Interviewer:** eeh

**PF:** koma titangomva zoti kwapezeka ma case atatu ku Lilongwe

*But when we heard that there were three cases in Lilongwe*

**Interviewer:** eeh

**PF:** aliyense unali okuti “mask ali kuti”,

*everybody was like “where are the masks”*

**Interviewer:** eeh

**PF:** sanitizer ali kuti ndikhale naye pa thumba

*where is the sanitizer, I must keep it in my pocket*

**Interviewer:** eeh

**PF:** apopo ndiye zimagwira ntchito yake ndithu mwabwino-bwino muja

*things worked very well that time*

**Interviewer:** okay

**PF:** eeh

**Interviewer:** nanga chipatala chinali chokonzeka motani kuti chithe kupereka chisamaliro chokwanira kwa ma patient a Covid-19 m’mene mukuonera mwina pa nkhani ya infrastructure kapena tinene kuti ma ward, kaya lab chani chani zonsezo kapena kuti ma room a isolation, chinali chokonzekera bwanji?

*How prepared was the hospital so that it should provide adequate care to Covid-19 patients, basing on what you see on issues of infrastructure or wards, laboratory and other things or let’s say isolation room, how prepared was the hospital?*

**PF:** chipatala sichinakonzeke

*the hospital was not prepared*

**Interviewer:** mmmh

**PF:** kuti kunena kuti takonzeka apapa kuti china chake chitangobwera titere, ayi ndinama

*I would be lying if I say we were prepared for anything coming forthwith*

**Interviewer:** eeh

**PF:** chipatala chathuchi sichinakonzeke, chipatala chinakonzeka last minute

our hospital was not prepared, it prepared last minute

**Interviewer:** eeh

**PF:** ndakamba za kwa Kameza

*I have talked about Kameza*

**Interviewer:** eeh

**PF:** atatseka kwa Kameza

*when Kameza was closed*

**Interviewer:** eeh

**PF:** Tikonze ku 1A mwina wa Gynaecology kapena Obs atati wadwala apite kumenekoko

*we should renovate 1A so that Gynaecology or Obs patients should be accommodated in that ward*

**Interviewer:** Mmmh

**PF:** Komano zinachitika mochedwa that’s why ndikunena kuti chipatala sichinatani- *but then this has happened late, that is why I am saying that the hospital was not-*

**Interviewer:** [sichinakonzeke

[was not prepared

**PF:** Sichinakonzeke, koma kukonzekera kwa ma patient in general, not ma staff

*It wasn’t prepared, but preparation regarding patients in general, not staff*

**Interviewer:** mmmh

**PF:** Queens ngati chipatala, sitinakonzeke

*Queens as a hospital, it wasn’t prepared*

**Interviewer:** Ndiye akanati ma case afika mwina 500 pa kamodzi?

*So if the number of cases rose up to 500 at once?*

**PF:** ndiye kuti chabwino panalibe. Mwina akanapitirira chifukwa ndiye kuti infection’yo bwenzi ikumangobwera, chifukwa ngati tikukamba zakuti olo akanafika 100, tsiku limodzi ndiye kuti onsewo akufunika isolation, tikayang’ana ward

*Then there was nothing good. Maybe the figures would have gone up because there would be more infections coming, because if we are saying that the figures reached 100, in a day and all of them needed to be isolated, and if we look at the ward*

**Interviewer:** mmmh

**PF:** ndiye kuti ndi COVID sitingapange anthu mwina 50, achuluka

*and it means that we can not attend to maybe 50 people with Covid, they are just many*

**Interviewer:** mmh

**PF:** ndiye mwina tiziyerekeza kuti anthu 20

 *so, maybe we should say for example 20 people*

**Interviewer:** mmmh

**PF:** mwinanso 15

*or maybe 15*

**Interviewer:** mmm

**PF:** so akanafika 100 ndiye kuti zikanakhala zovuta, kupezeka kusamutsa ma patient ena kuti samukani ku 3A tiikeko ma patient a Covid, so ngati Queens sitinakonzeke

*so, if the number of cases reached 100 then it means it would habe been a problem, we would find ourselves moving patients from 3A to accommodate Covid patients, so as Queens hospital we were not prepared*

**Interviewer:** Nanga ma staff ogwira ntchito tikanakhala kuti tili ndi ma case ochuluka, zikanayenda bwanji, mmene mukuonera inuyo, chipatala chili ndi ma staff okwanira oti atha kupereka chisamaliro kwa ma patient a Covid ikanakhala kuti nambala yakwera?

*What about staff, how would the situation be if we had more cases, in your observation, does the hospital have adequate staff that can provide care to Covid patients if the number of cases increased?*

**PF:** aaah, chipatala chilibe ma staff wokwanira

*aaah, the hospital does not have adequate staff*

**Interviewer:** Ndiye zikanakhala bwanji?

*Then how things be?*

**PF:** zikanakhala zotivuta

*things would be difficult for us*

**Interviewer:** mmmh

**PF:** mwinanso Covid’yi atipatse mwai kuti mwina atiwonjezere ma staff mu zipatalamu

*Covid should also give us an opportunity to increase staff in the hospitals*

**Interviewer:** Mmmh

**PF:** Mwina boma litiganizire, pepani ndipita ku boma, boma litiganizireko eti?

*Maybe government should consider us, sorry that I am mentioning the government, the government should consider, right?*

**Interviewer:** mmm

**PF:** Kuti atiwonjezere ma staff kuchipatala

*They should increase the number of staff in hospitals*

**Interviewer:** mmmh

**PF:** Chifukwa anthu ogwira ntchito kuchipatala asamafunike nthawi imene kwabwera muliri kuti okay chifukwa choti pali muliri apapa tithamangitse tiwonjezere anthu kugwira ntchito

*because staff must not be needed whenever there is a pandemic saying okay let us quickly increase the number of staff working in the hospital*

**Interviewer:** *yah*

**PF:** chifukwa tinali nayo case iyiyi ya Covid

*because we had this case of Covid*

**Interviewer:** mmmh

**PF:** Muliri umenewuwu ukanatipweteka

*the pandemic would hurt us*

**Interviewer:** *mmmh*

**PF:** Tiyeni tingoyamika kuti sunafike povuta kwambiri, unavuta koma siunafike povuta

*let us just be thankful that it didn’t get worse, it got bad but wasn’t worse*

**Interviewer:** *mmmh*

**PF:** Koma kumbali ya ma staff, ma staff ndiochepa

*But on the part of staff, staff is inadequate*

**Interviewer:** *mmmh*

**PF:** chifukwa ma staff amene amatengedwa anali omwewo ochepa oti amagwira ntchito mu ma ward’wo

*because staff that was assigned for this was the same inadequate staff working in the ward*

**Interviewer:** *mmmh*

**PF:** Ndiamene amati uku kuchoke anthu atatu, uku kuchoke anthu atatu. So amapezeka kuti ma patient ena amene ali ndi mavuto ena

*Where they were picking three people from one department, three from another department. So, it was found that some patients had other problems*

**Interviewer:** *mmmh*

**PF:** amapanga suffer chifukwa chosowa staff chifukwa choti staff yambiri yapita kukathandiza-

*they were suffering because of lack of staff since most of the staff had gone to help in the other wards-*

**Interviewer:** [ku Covid

*[In Covid ward*

**PF:** ku Covid

*in the Covid ward*

**Interviewer:** Okay chabwino

*Okay alright*

**PF:** So, boma litiganizire

*So, government should consider us*

**Interviewer:** okay, nanga mmene mukuganizira inuyo..funsoli ndilonena kuti mongoganizira eti? Ndanena kuti tikanakhala kuti mwina tili ndi ma case ambiri, tiyerekeze mwina 100 mwina mmene munanenera muja, mumafotokoza kuti zikanakhala zovuta. Ndiye tioneno kuti tili ndi..nanga si kunali staff amene zinayambika ngati ma staff ku ENT, kenako akuti iyayi 3A ngati ward yowonjezera

*okay, basing on the way you think...the question says, just thinking, right? I have already said, if we had more cases, for example maybe 100 cases like you said before, you were saying that it would have been a problem. So, let’s say we have..there was staff who started working as staff in ENT, later on they assigned ward 3A as an additional ward*

**PF:** mmmh

**Interviewer:** Ndiye tiyerekeze kuti ma ward onsewo adzadza, komano mu ward’mo tili ndi patient woti ndi VIP, chisamaliro chikanayenda bwanji {laughing} mukudziwa kale inu VIP amakhala woti anthu ndithu m’mudzi ndiwodziwika

*So, for example if all the wards were full, and then we happened to have some patients of VIP status, how would care be provided {laughing} you already know that people with VIP status are well known*

**PF:** amasowetsa mtendere akafika pa malo, chisamaliro chikanavuta

*they always bring discomfort, it would be difficult to provide care*

**Interviewer:** mmmh

**PF:** chifukwa aliyense amene ali ku ward’ko ndi patient, onsewo amayenereka chisamaliro

*because everyone who is admitted to that ward is a patient, all of them need care*

**Interviewer:** yah

**PF:** so VIP ngati wabwera, akanakhala kuti wapezeka

*so, if a person with VIP status arrives, if at all there was one*

**Interviewer:** mmmh

**PF:** akanalandira chisamaliro chimene chikulandiridwa chifukwa choti ndanena kale nkhani ya shortage of staff

*they would receive normal care because I have already talked about shortage of staff*

**Interviewer:** *mmmh*

**PF:** ndiye kuti chisamaliro chikanavuta, ndiye bwenzi akulandira chisamaliro chimene-

*it means it would be difficult to provide care, so they would be receiving care which-*

**Interviewer:** [chomwecho

*[the same type of care*

**PF:** Chimene anthu ena akulandira, komabe si mwanena kale kuti ndi VIP

*which other people are receiving, but since you have already said they are VIP*

**Interviewer:** *mmm*

**PF:** Mwinabe enawo akanapanga suffer, amene akanapanga benefit ndi VIP chifukwa anabwera a minister

*Maybe other people would have suffered, it is the person with VIP status who would benefit because a minister came to the hospital*

**Interviewer:** *mmmh*

**PF:** Mmene amakonza ENT amati ma VIP ngati ma ministers

*when they were renovating ENT, they were saying VIPs like ministers*

**Interviewer:** *yah*

**PF:** adzabwera umu, ndiye kuti given ngati wabwera minister ndiye kuti wina uja apangidwa dump

*should be accommodated there, so if a minister arrived, it meant the other person would be dumped*

**Interviewer:** *mmmh*

**PF:** athamangiridwa uyoyo

*and quickly assist that one*

**Interviewer:** wa VIP

*the one with VIP status*

**PF:** Koma chimasaliro chikanakhalabe chovuta even kwa iyeyo VIP’yo chikanamuvutirako

*but care would be difficult even to the VIP, would find it difficult*

**Interviewer:** *mmmh*

**PF:** akanangokhala ndi advantage chifukwa cha position imene ali

*would just have an advantage because of their position*

**Interviewer:** *uh huh*

**PF:** koma chikanakhala chovuta

*but it would be difficult*

**Interviewer:** uh huh, ndiye titengere scenario imeneyo kunena kuti ka care ndithu mwina akanalandirabe

*uh huh, so basing on the scenario where care would still receive care*

**PF:** akanalandira koma pang’ono

*they would receive but a little*

**Interviewer:** ndiye wina kumufotokozera kwake titha kumufotokozera motani kuti..nanga si ena amatha kuona kuti ah ah koma ukuku anthu akuthamangirako kwambiri, ndiye mwina anthu akhoza kuti “aah kodi zikukhala bwanji?” {laughing}

*so how can this be explained to someone… since they observe saying; ah ah people are paying much attention to that side and maybe they would say “aah why is it like that?” {laughing}*

**PF:** Ndizovuta kumufotokozera kwake

*it is difficult to explain*

**Interviewer:** *mmmh*

**PF:** Ndi zija mumatukwanidwa anthu ogwira ntchito, “ooh chifukwa choti ife tilibe maudindo ndiye nchifukwa chake sakutitani-

*This is where staff get insults from people, “ooh because we do not hold any positions, that’s why we are not-*

**Interviewer:** [sakutisamala

*[they are not taking care of us*

**PF:** sakutisamala. Ndiye zikanakhalabe zovuta kumufotokozera kwake {laughter} *they are not taking care of us. So, it would still be difficult to explain this to someone {laughter}*

**Interviewer:** chabwino, nanga nkhani ya mwina chiopsyezo ngati kwa inuyo ogwira ntchito mu chipatala

*alright, what about the issue of risk, people like you who work in the hospital*

**PF:** *mmmh*

**Interviewer:** chiopsyezo chanu mukamaona, kutenga matenda a Covid mukamagwira ntchito ndichotani?

*In your view, what is the risk of contracting Covid-19 while working in the hospital?*

**PF:** chinali chachikulu kwambiri, tinali pa chiopsyezo

*the risk was too high, we were at risk*

**Interviewer:** chimene mumaona ngati kuti chimakuikani pachiopsyezo ndi chani?

*what do you feel is something that puts you at risk?*

**PF:** chimene chimatiika kwambiri pa chiopsyezo ndichonena kuti timapanga handle patient, amene sitikudziwa kuti ndi wa Covid kapena kuti akungodwala, ndi chimfine kapena chifuwa chabe

*What puts us at risk is that we handle a patient, we do not know is ill with Covid or is merely sick, whether it is flu or a mere cough*

**Interviewer:** Uh huh

**PF:** tinali pa chiopsyezo chifukwa sitikudziwa kuti ndindani, 2 or 3 days umva kuti patient umampanga handle uja analitu wa Covid, so tinali pa chiopsyezo chachikulu

*It is risky because we do not know their status, 2 or 3 days later you hear that the patient you were handling is ill with Covid, so we were at a high risk*

**Interviewer:** ndiye zimenezo zinasintha bwanji kapena zasintha bwanji magwiridwe anu a ntchito?

*So, how did this change or how has it changed your performance?*

**PF:** magwiridwe athu a ntchito sanasinthe

*our performance has not changed*

**Interviewer:** *mmmh*

**PF:** mwina chifukwa choti tinazadziwabe kuti eeh Covid yaopsya, tikuyenereka mwina tikamapanga handle patient tizimupanga mosamala

*Maybe because we knew that eeh Covid is dangerous, we must be careful when handling a patient*

**Interviewer:** *eeh*

**PF:** mwina tikupita pa patient, kaya sitinavale PPE komabe tionesetse kuti tavala kaya ndi mask kaya face shield

*we attend to a patient, without wearing PPE, but still we have to make sure that we wear a mask or a face shield*

**Interviewer:** *yah*

**PF:** ma glove ndavala, apron ndavala yokulirapo

*I am wearing gloves, I am also wearing a bigger apron*

**Interviewer:** *mmmh*

**PF:** ndiye kuti ukamamugwira patient uja pang’ono pokha, 60% umadziwa zoti I am protected

*So, when handling the patient you at least know that you are protected 60%*

**Interviewer:** *okay*

**PF:** Komabe kwinaku umakhala ndi mantha

*but you still have fear on the other hand*

**Interviewer:** *mmm*

**PF:** Komano sizinasinthe ndimmene timagwirira ndi pano, kungoti panopa tayamba kukhala ngati tikupanga mosamalitsa pang’ono kusiyana ndimmene timapangira nthawi imeneyoyo

*but then our performance hasn’t changed comparing with now, only that we are now doing things with a lot of care compared to that time*

**Interviewer:** okay, ndiye inuyo pa nkhani yomweyo yoti munali pa chiopsyezo chachikulu kuti mutha kutenga matenda a Covid mukugwira ntchito mu chipatala, nkhawa zanu zazikulu zinali zoti chani, imene inali ngati nkhawa yeni-yeni. Chimakupatsani nkhawa kuti eeh tsono ndikatenga matendawa?

*Okay, so, while on the same issue of your being at high risk of contracting Covid while working in the hospital, what were your greatest concerns, which was like your main concern. What was making you feel concerned saying; eeh what if I get infected?*

**PF:** Nkhawa inali ponena kuti kodi matendawa atati andigwira

*my concern was; what if I get infected*

**Interviewer:** *mmmh*

**PF:** mwatsoka ineyo kukhala m’modzi opita nawo matendawo

*and it happens that unfortunately I am one of the victims to die with Covid*

**Interviewer:** *mmmh*

**PF:** kodi ana anga amene ndikuwasiya kudzikoku adzasamalidwa bwanji

*are they going to take care of my children who will be left behind*

**Interviewer:** *mmmh*

**PF:** Boma lidzapanga chani podziwa zoti ndapwetekeka pantchito

*what will government do knowing that I have contracted the disease while at work*

**Interviewer:** *uh* *huh*

**PF:** nkhawa yanga yaikulu inali pamenepo, imene imasowa yankho poti boma silimakhala open kuti, utati watenga Covid kuntchito

*that was my biggest concern, which had no response since government was not open to say; if one contracts Covid at work*

**Interviewer:** kuntchito eeh

*at work yes*

**PF:** ndikumwalira nayo Covid ija

*and die with Covid*

**Interviewer:** *uh* *huh*

**PF:** ana ako, family yako, iweyo ndiwe bread winner

*your children, family, you are the bread winner*

**Interviewer:** *yah*

**PF:** family yako boma lidzapanga nayo chani

*what will government do with your family*

**Interviewer:** *mmmh*

**PF:** adzathandiza anawa ma sukulu kaya chani

*will they assist my children with school needs*

**Interviewer:** *mmmh*

**PF:** so nkhawa yaikulu imakhala pa family kunyumba

*so, my greatest concern was about my family*

**Interviewer:** ndiye ngakhale somehow mwayankha funso limene ndikanafunsani. Ndiye a boma, achipatala amati chani? Nanga si anthu munawafunsa mwina ku ma training’ko kapena, amayankha kuti chani?

*So, you have somehow answered a question which I wanted to ask. So what does the government, hospital administration say? Since you asked those who were facilitating the training, what was their response?*

**PF:** ineyo sindinamve yankho logwira mtima kuchokera kaya kuchipatala kaya ku boma, palibe

*I never received a concrete answer from either the hospital or government, never*

**Interviewer:** *uh* *huh*

**PF:** yankho lomwe ndinaona ine ndiloti kaya risk allowance

*the response that I got was about allowances*

**Interviewer:** *uh* *huh*

**PF:** komano risk allowance’yo ukayiona ndi moyo wa munthu, risk allowance’yo ndiyochepa, ndiyonena kuti iweyo kuluza moyo wako ndikamene akuperekako, it’s better uluze kamene akuperekako koma usamale moyo wako. Komano kuyankha kuti kapena family tidzayipanga chonchi, sindinamve yankho kuchokera ku boma angakhale kuchokera kuchipatala

*but when you compare the risk allowance with life, the risk allowance is small, if you compare between losing your life to what are paid, it’s better you lose but you should take care of your life. But responding to say maybe this is what we will do to the family, I haven’t heard anything either from government or the hospital*

**Interviewer:** *okay*

**PF:** *mmm*

**Interviewer:** chabwino, ndiye mwatchulanso chinthu china mwinanso chimene ndimafuna kutchula

*alright, you also mentioned another thing which I wanted to say*

**PF:** {laughing} kuzionjezera mafunso

*{laughing} increasing questions to myself*

**Interviewer:** mwatchula risk allowance, kulandira risk allowance ndi kusalandira risk allowance, tikatengera ndi chiopsyezo choti utha kutenga matenda, mgwirizano wake ndiwotani, kuti upatsidwe risk allowance ndikuti usapatsidwe risk allowance ndi nkhani ya chiopsyezo choti utha kukhalabe pa chiopsyezo chotenga matenda a Covid, mgwirizano wake pa zinthu izizi ndiwotani? Mwina tiyiyambe choncho nkhani

*you mentioned about risk allowance, receiving or not receiving risk allowance, basing on the risk that you can contract Covid, what is the relationship between the two, to be paid and not to be paid risk allowance and the issue of risk is that you can still be at risk of contracting Covid, what is the relationship between the two? We can maybe tackle the issue like that*

**PF:** Talifunseninso funsolo?

*Can you repeat the question?*

**Interviewer:** kuti munthu ulandire risk allowance ndikuti usalandire

*to receive and not to receive risk allowance*

**PF:** Mmm, komabe uzikhala kuti ukugwirabe ku ma patient

*mmm, but you will still be handling patients*

**Interviewer:** uzikhala ukugwira ku ma patient. Ndi chiopsyezo choti utha kutenga matenda, pa zinthu ziwirizi, kulandira ndi kusalandira, mgwirizano wake ndiwotani?...kapena ndifunse mwina munjira ina kunena kuti nchifukwa chani anthu amafuna alandire risk allowance kuti akagwire ntchito kumene kuli chiopsyezo choti atha kutenga matenda?

*You will still be handling patients. It is risky that you can contract disease, between the two things, receiving and not receiving, what is the relationship between the two?..or let me ask in another way; why do people want to receive risk allowances inorder to work in an environment where there is a risk of contracting disease?*

**PF:** si nanga dziko lathuli one ndilosauka

*because our country is poor*

**Interviewer:** *Mmmh*

**PF:** ndiye tikamva kuti pena pake pali ndalama koma pali chiopsyezo

*so when we hear that there is money at some place but there is a risk*

**Interviewer:** *mmmh*

**PF:** chimene timaganizira ife sitimaganizira moyo wathu, timayam,ba kuganiza kuti kodi ndalamayi ndikalandira ndalamayi indithandizira apa

*we do not think about our lives, we start thinking of how the money is going to help us when we receive it*

**Interviewer:** *uh huh*

**PF:** ndiye timasiya kaye chiopsyezo chija kuchisiya apo

*and we tend to overlook the risk*

**Interviewer:** eya

*yes*

**PF:** timakapanga kaye zachani-

*we first all think of-*

**Interviewer:** [za ndalamazo

*[the money issues*

**PF:** so timadzazindikira za chiopsyezozi titakumana nazo, ndipamene timadzazindikira kuti mwina ndikanakana kulandira ndalamayi, ine kumenekuku kuli risk’ku ndisapiteko. Komanso sungakane

*and we realize when we experience the risk, that is when we realize to say; maybe I should have refused to receive the money, I shouldn’t go to the risk zone. But then we cannot refuse*

**Interviewer:** *mmmh*

**PF:** chifukwa choti ifeyo tili pano kuthandiza anthu ngati amene aja

*since we are here to help people like those*

**Interviewer:** *Yah*

**PF:** so ngati tinganene kuti sindipitako chifukwa choti-

*so if we say that I will not go there because-*

**Interviewer:** [sindikulandira risk allowance

*[I do not receive risk allowance*

**PF:** sindikulandira risk allowance, ndiye kuti iweyo you are not fit kugwira ntchito ya kuchipatala

*I do not receive risk allowance, it means you are not fit work in a hospital*

**Interviewer:** *mmmh*

**PF:** ntchito ya kuchipatala tingoyenereka kumadzipereka komano anthu amene ali pamwambawo akuyenera aziganizira kuti anthu olo akuzipereka koma akugwira ntchito yotamandika

*hospital work needs commitment but then the people who are on top are supposed to be considerate, to say if people are committed and are doing a commendable job*

**Interviewer:** *Okay*

**PF:** *mmm*

**Interviewer:** ndiye mukuona kuti akapatsidwa risk allowance amayamba mwina maganizo ake amasintha kuti aah mwina poti ndalandira risk allowance mwina ndiye kuti chiopsyezo chotenga matenda chatsika?

*So, do you feel that after they are given risk allowances they start changing their minds to say; aah maybe the risk of infection is low because I have received risk allowance?*

**PF:** aah ayi, amadziwa zoti chiopsyezo chotenga matenda chili high, ndichokwera ndithu

*aah no, they know that the risk of infection is high, it’s really high*

**Interviewer:** *eeh*

**PF:** komano nkhani ndiyomwe ndanena ija kuti umakhala kuti ulibe option

*Buty then the issue is that you had no option as I have already said earlier on*

**Interviewer:** *okay*

**PF:** umakhala ukuyang’ana ka ndalamako kuti ka ndalama kameneka mwina ndinali ndi balance ya mwana ku sukulu, ndikalandira ndikapereka

*much focus was on the money, maybe you had a balance of school fees for your child, I will pay when I receive the money*

**Interviewer:** *eeh*

**PF:** koma risk umakhala zoti ukudziwa zoti ilipo ndithu ndipo ili high

*but deep down you knew that the risk was high*

**Interviewer:** *okay*

**PF:** *mmm*

**Interviewer:** nanga si ndafunsa funso limeneli chifukwa chonena kuti nkhani zinamveka kwambiri kuti anthu ogwira ntchito kuchipatala akunyanyala ntchito, akufuna risk allowance. Ndiye si pena umatha kukhalabe ndi maganizo kuti aah mwina amaona ngati kuti akalandira risk allowance, chiopsyezo chimatsika chotenga matenda, nchifukwa chake ndimafuna ndimve

*I have asked this question because there were a lot of rumours spreading around that hospital staff was on strike, they wanted risk allowances. Sometimes you may think that the risk of infection can become low once you are paid risk allowance, that is why I wanted to hear from you*

**PF:** iyayi, chiopsyezo chotenga matenda sichimachepa

*no, the risk of infection cannot be reduced*

**Interviewer:** *mmh*

**PF:** chimakhala chokwera, komano ifeyo timangopempha ku bomako kuti at least azitiganizira chifukwa timakhala kuti tili pa chiopsyezo chachikulu

*it remains high, but we are just asking the government to at least consider us because we are always at a higher risk of infection*

**Interviewer:** *mmmh*

**PF:** *mmm*

**Interviewer:** okay chabwino. Nanga ndondomeko zoyezera Covid, inuyo experience yanu inali yoti chani, kapena anthu amanena chani zija zomatenga sample mu mphuno kapena ku khosiku, anthu amanena bwanji zaa ndondomeko imene ija?, kapena procedure imene ija, anthu amene anayezetsa kaya inuyo ngati munayezetsapo? *Okay alright. What about testing procedures for Covid, what was your experience, or what were people saying regarding the nasal or throat swab, what were people saying regarding the whole procedure? Those that were tested for Covid or were you tested yourself?*

**PF:** ineyo sindinayezetsepo, ndimaopa

*I have never been tested, I am scared*

**Interviewer:** oho chabwino {laughing}

*Oho alright {laughing}*

**PF:** komano anthu amene anayezetsapowo chimene amalankhula ndichoti ena amati zimapweteka

*but then the people who were tested say that the procedure is painful*

**Interviewer:** *uh* *huh*

**PF:** ena amati kaya zimangonyerenyetsa

*others say it just itches*

**Interviewer:** *uh* *huh*

**PF:** zimene amalankhula zinali ngati zimenezozo

*that is what they were saying*

**Interviewer:** *mmmh*

**PF:** “ooh tiyeni tizisamala, mudzazindikira bwino mukadzapita kukakuyezani Covid, mpamene muidzayambe kunena kunena kuti “eh ndizikhala mozisamala ndisakafike poyezedwa

*“ooh let us be careful, you will feel it when you go for a Covid test, that’s where you will start saying “eh I will stay safe so that I shouldn’t reach a point of being tested”*

**Interviewer:** Uh huh, ndiye inuyo poti mumaopa, njira yabwino yoyezera imene mukanakonda inuyo ndiyotani, nanga si mwanena kuti mumaopa?

*Uh huh, since you say you are scared, how would you like the procedure to be done, since you said you are scared?*

**PF:** njira yake inali yomweyo

*It is the same procedure*

**Interviewer:** *uh* *huh*

**PF:** komano mwina panakhala kuti panachitika kafukufuku wina woti kodi titati tatenga blood kukayeza

*but maybe another research should be conducted which should involve collection of blood and carry out a blood test*

**Interviewer:** *uh* *huh*

**PF:** kodi mu blood muja ka virus kaja sikangapezekemo mmene kamapezekera ka malungo muja

*Can’t this virus be found in blood just as it is found in malaria*

**Interviewer:** *Uh* *huh*

**PF:** mwina mwake njira yake inakakhala ngati imeneyo, chifukwa ambiri chimene amaopa ndi chomatokosana mu mphunocho {laughing}

*if the procedure was done like they do when testing for malaria, because many people are scared of the nasal swab {laughing}*

**Interviewer:** ndiye ikanakhala ya magaziyi mukanalola?

*Would you accept the blood test?*

**PF:** eeh ndikanalola

*Yes, I would accepted*

**Interviewer:** chabwino

*alright*

**PF:** {laughing} iyayi koma ndikanalola

*{laughing} I would have accepted*

**Interviewer:** *mmh*

**PF:** izizi ndikulankhula chifukwa mwina sindinapezeke ndi ma signs a Covid, koma ndikanakhala kuti ndinapezeka nayo ndiye kuti ndikanalolabe, ndikanakhala ndilibe choice, ndikananena kuti nditengeni

*I have said this because I have not had signs of Covid, but I would accept if I had the signs, I would have no choice, I would tell them to perform the test*

**Interviewer:** chabwino, ndiye inuyo mutati mwapatsidwa mpata woti mupereke ma recommendation pa nkhani yopanga prepare kubwera kwa matenda aja ngati mmene anabwerera Covid kapena tinene kuti matenda ena aliwonse owopsya *alright, so if you were given an opportunity to make recommendations on preparation of the onset of a pandemic like it was in the case of Covid or we should say any severe infection*

**PF:** owopsya

*severe*

**Interviewer:** mutati mwapatsidwa mpata woti mupereke ma recommendation anu pa Queens pano, mutha kupanga recommend chani chimene mukuona kuti chitha kumachitika kuti preparation ikhale yabwino?

*If you were given an opportunity to make recommendations here at Queens, which things would you recommend to be done inorder to prepare well?*

**PF:** okay, recommendation yanga itha kukhala yonena kuti matenda tisamakonzekere chifukwa choti tamva kuti kuli matenda

*Okay, I would make a recommendation to say we shouldn’t get prepared because there is a pandemic*

**Interviewer:** *mmmh*

**PF:** tiyambe kukonzekera pamene kulibe mliri’wo

*we should get prepared even when there is no pandemic*

**Interviewer:** *yah*

**PF:** ndiye kuti chimene ndinganene nchonena kuti mwina a Queens atapeza malo

*So I would say that Queens hospital must find a place*

**Interviewer:** *uh huh*

**PF:** ndikumangako isolation centre

*and build an isolation centre*

**Interviewer:** *yah*

**PF:** ikhale yonena kuti china chilichonse chili momwemo

*the isolation centre should be fully equipped*

**Interviewer:** *uh* *huh*

**PF:** kuzikhala anthu woti azitha kusamalirako

*there should be people assigned to take care of the place*

**Interviewer:** *mmh*

**PF:** kaya ndi machine aja kuwapukuta-pukuta

*they should be wiping the machines*

**Interviewer:** *mmmh*

**PF:** kuti kukadzangoti hey kwavuta uku, tisadzatekesekeyi

*so that we shouldn’t panic in case of any problems (pandemic)*

**Interviewer:** anthu azidzangoti-

*people should just be saying-*

**PF:** anthu azidzangoti isolation ilipo, tiyeni pitani uku

*there is an isolation centre, go there*

**Interviewer:** *okay*

**PF:** chinanso ndichonena kuti ngati pa gate aika ma tent paja

*the other thing is that; like at the gate where tents are pitched*

**Interviewer:** *uh* *huh*

**PF:** mwina ma tent aja atati asachuluke ngati mmene pachulukira muja

*if they could reduce the number of tents there*

**Interviewer:** *uh* *huh*

**PF:** mwina atangoika popangira screening

*if they pitched tents to be used for screening only*

**Interviewer:** *Mmmh*

**PF:** akamalowa uku apange screen ma patient, kaya ma guardian kaya ndani

*where patients or guardians would be screened upon entry*

**Interviewer:** *eeh*

**PF:** olo ma staff

*or members of staff*

**Interviewer:** *mmmh*

**PF:** ma tent awiri its enough

*two tents are enough*

**Interviewer:** *mmmh*

**PF:** patient ngati wapezeka kuti ndi suspect, asakhalenso mkati mwa chipatala, atuluke

 *if there is a suspected patient, they shouldn’t stay inside the hospital*

**Interviewer:** *mmm*

**PF:** azipita ku isolation, kaya ndi ma results adzikadikirira kumeneko. Chimene ndingapange recommend kwambiri ndi chimenecho chifukwa choti isolation sitiika mkati mwa chipatala

*they should go to the isolation centre, and wait for the results there. That is what I would strongly recommend because in normal circumstances, an isolation centre is not supposed to be placed inside the hospital*

**Interviewer:** *okay*

**PF:** *eeh*

**Interviewer:** chabwino, kapena pali zina zowonjezera, otherwise mafunso amene ndinali nawo ndiamenewo

*alright, is there anything to add, otherwise these are the questions that I had*

**PF:** china chimene ndingawonjezere ndichonena kuti mwina tiwapemphe a boma *another thing I would like to add is to ask government*

**Interviewer:** *uh* *huh*

**PF:** kukamagwa miliri mwina asamalowetsepo zichito-chito zambiri chifukwa choti mliriwu unakhala ngati unativuta chifukwa cha mmene zinthu zathu zimayendera m’mbuyomu

*that it shouldn’t play tricks whenever there is a pandemic because this pandemic worsened because of how things were done previously*

**Interviewer:** *mmmh*

**PF:** wina amabwera, maka-maka anzathu a ndale, ndisapite kutali atipweteka ndi a ndale

*someone would come, especially politicians, I should not beat about the bush, politicians have hurt us*

**Interviewer:** ndi a ndale

*it is the politicians*

**PF:** otherwise ifeyo mliriwu ukanatipeza koma sukanafika pamene wafikapa *Otherwise the impact of the pandemic wouldn’t have reached this stage*

**Interviewer:** *mmmh*

**PF:** ndiye mwina ndipempheko a bomawa kunena kuti kukagwa mliri

*so I should maybe ask government to say; whenever there is a pandemic*

**Interviewer:** *mmmh*

**PF:** azigwirana manja

*they must unite*

**Interviewer:** *okay*

**PF:** whether a opposition kaya ndi a ruling

*whether those from the opposition or the ruling side*

**Interviewer:** *yah*

**PF:** koma onse chinthuchi adzichitenga limodzi, nkhondoyi nkumenyera limodzi

*they should face the situation together, and fight against the pandemic together*

**Interviewer:** *yah*

**PF:** ma differences adziwasiya kaye uko, komano pa nkhani ya welfare ya anthu

*they should put aside their political differences, and for the sake of people’s welfare*

**Interviewer:** *mmmh*

**PF:** mwina izikhala patsogolo

*people’s welfare should be a priority*

**Interviewer:** chabwino

*alright*

**PF:** eeh, chifukwa mliriwu unatipweteka kwambiri ndithu chifukwa cha anzathu a ndale, apopo ndiye ndimanena olo wina aliyense ndimamuuza

*yes, because the pandemic really hit us because of our politicians, I always talk about this even to anyone*

**Interviewer:** Ndizoona

*it is true*

**PF:** anthu tinafika poti tinatayirira chifukwa chonena kuti aliyense amakuuza kuti matenda kulibe. Anthu m’midzimu tikamaweruka kuntchito tikapita ukawauza kuti abale anzanga Covid is real

*people reached a point where they were careless because politicians were telling us that there is no pandemic. Whenever we were telling people in the village that Covid is real*

**Interviewer:** *mmmh*

**PF:** tiyeni tizitere tizitere, ali “matenda ali kuti? Kunja kulibe matenda uku. Akukuuza kuti kulibe matenda. Ndiye zinthu ngati zimenezo ndizimene zinatipweteka, ndiye ndimangofuna ndinene kuti tizigwirana manja pa nkhani ngati zimenezi

*let’s practice this, let’s practice that, they were saying “where is the disease? There is no pandemic” they were telling you that there was no pandemic. So, these are the things that have hurt us, and I just wanted to say we must be united in issues like these*

**Interviewer:** nanga si ndizovuta kuti munthu yemweyu ukamuuze izi, auzidwanso zina ndiye chabwino.

*It is difficult that the same person be told this, yet they have been told other things, alright*

**PF:** ndithudi

*Sure*