Assess the Level of Knowledge and Psychological Awareness Regarding Covid–19 Pandemic Among Local Vendors and Daily Wagers Residing in Kota (Raj.): A Survey Study

Dinesh Sharma[1], Neha Sharma[2]

Abstract

Background: Coronavirus disease 2019 (COVID-19) is an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The disease was first identified in 2019 in Wuhan, the capital of China's Hubei province, and has since spread globally, resulting in the 2019–2020 coronavirus pandemic. This marvel has prompted a gigantic open response; the media has been announcing persistently across outskirts to keep all educated about the pandemic circumstance. Every one of these things are making a ton of worry for individuals prompting elevated degrees of nervousness. Pandemics can prompt elevated degrees of stress; Anxiety is a typical reaction to any distressing circumstance. This survey endeavored to assess the level of knowledge and awareness regarding covid-19 pandemic among local vendors and daily wagers residing in Kota (Raj.) *Methods:* In view of the nature of the problem selected and objective to be accomplished descriptive survey research approach was considered appropriate to assess the level of knowledge and awareness regarding covid-19 pandemic among local vendors and daily wagers residing in Kota (Raj.). Non-probability convenient sampling technique was used to select the samples.*Results:* Descriptive and inferential statistics were used for analysis. Findings revealed that mean score of knowledge was 22.09 with standard deviation 6.58. This indicates that local vendors and daily wagers residing in Kota had moderate knowledge and awareness regarding covid-19 pandemic. In the present study it is evident that the demographic variables such as Age, sex, religion and income per month, the calculated chi square value is less than the critical value at $p<0.05$ level of significance, So null hypothesis is accepted and research hypothesis is rejected. While Demographic variables such as educational status and previous sources of information regarding covid-19 pandemic, the calculated chi square value is high than the critical value at $p<0.05$ level of significance, So null hypothesis is rejected and research hypothesis is accepted. *Conclusion*: Findings revealed that mean score of knowledge was 22.09 with standard deviation 6.58. This indicates that local vendors and daily wagers residing in Kota had moderate knowledge and awareness regarding covid-19 pandemic.

Keywords: Knowledge; Awareness; COVID-19; Vendors and daily wagers,Kota.

Introduction

Background of the study

Coronavirus disease 2019 (COVID-19) is an infectious disease caused by severe acute respiratory syndrome

Author Affiliation

[1]Lecturer , Department of Psychiatric Nursing, , Govt. College of Nursing, Kota Rajasthan, [2]Private Clinic, Department of Dentistry, B 4, Krishna Nagar, Road No-1, Near Bajrang Nagar Police Chowki, Police Line, Kota

Corresponding Author Neha Sharma, Private Clinic, Department of Dentistry, B 4, Krishna Nagar, Road No-1, Near Bajrang Nagar Police Chowki, Police Line, Kota Rajasthan.

E-mail: yash.sharma500@gmail.com

coronavirus 2 (SARS-CoV-2). The disease was first identified in 2019 in Wuhan, the capital of China's Hubei province, and has since spread globally, resulting in the 2019–2020 coronavirus pandemic.[1]

Early COVID-19 infections were linked to a live animal market in Wuhan, China, suggesting that the virus was transmitted from animals being sold as exotic food to humans. COVID-19 is mainly spread from person to person through airborne droplets that are coughed or sneezed out by an infected person. People may also get a COVID-19 infection by touching something that has the virus on it and then touching their own mouth, nose, or eyes. The newly identified coronavirus that causes COVID-19 has been called SARS-CoV2 although it is slightly different from the coronavirus that causes SARS.[2]

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease, COVID-19, to be a Public Health Emergency of International Concern. World Health Organization (WHO) stated that there is a high risk of COVID-19 spreading to other countries around the world. In March 2020, WHO made the assessment that COVID-19 can be characterized as a pandemic. WHO and public health authorities around the world are acting to contain the COVID-19 outbreak. However, this time of crisis is generating stress throughout the population. The considerations presented in this document have been developed by the WHO Department of Mental Health and Substance Use as a series of messages that can be used in communications to support mental and psychosocial well-being in different target groups during the outbreak.[2]

Common symptoms include fever, cough, and shortness of breath. Other symptoms may include muscle pain, sputum production, diarrhoea, sore throat, abdominal pain, and loss of smell or taste. While the majority of cases result in mild symptoms, some progress to pneumonia and multi-organ failure. As of March 25, 2020, the overall rate of deaths per number of diagnosed cases is 4.5 percent; ranging from 0.2 percent to 15 percent according to age group and other health problems.[2]

The COVID-19 pandemic in India is a piece of the overall pandemic of coronavirus ailment 2019 (COVID-19) brought about by serious intense respiratory condition coronavirus 2 (SARS-CoV-2). The first instance of COVID-19 in Quite a while, which started from China, was accounted for on 30 January 2020. Starting at 29 May 2020, the Ministry of Health and Family Welfare have affirmed a sum of 165,799 cases, 71,106 recuperations (counting 1 relocation) and 4,706 passing's in the country.[3] India as of now has the fourth biggest number of affirmed cases in Asia with number of cases breaking the 100,000 blemish on 19 May 2020.[4] India's case casualty rate is moderately lower at 3.09%, against the worldwide 6.63% starting at 20 May 2020.[5] Six urban areas represent around half of every single announced case in the nation–Mumbai, Delhi, Ahmedabad, Chennai, Pune and Kolkata.[6] As of 24 May 2020, Lakshadweep is the main district which have not revealed a case.

There is no particular treatment for this infection, so human services suppliers treat the clinical side effects (for example fever, trouble in breathing) of patients. Strong consideration (for example liquid administration, oxygen treatment, and so forth.) can be exceptionally viable for patients with side effects.[7]

The point of this investigation is to survey the degree of information and mindfulness with respect to covid-19 pandemic among nearby merchants and day by day bets dwelling in Kota (Raj.) which can be useful for the individuals and the well-being authority. It is critical to evaluate the information and familiarity with the general population towards significant and predominant irresistible sicknesses. Such data gives standard information to avoidance and control of these maladies through instruction based study.

Material and Methods

In the current investigation, 140 local vendors and daily wagers residing in Kota (Raj.) are chosen, who satisfied the choice standards were chosen as test for the examination. Advantageous inspecting procedure includes the choice of subjects who are accessible at the ideal spot during the hour of information assortment. The example for the examination was chosen dependent on the consideration and rejection standards by advantageous inspecting.

Inclusion Criteria:

➢ Local vendors and daily wagers those are accessible at the hour of information assortment.

➢ Local vendors and daily wagers who are willing toparticipate.

Exclusion Criteria:

➢ Local vendors and daily wagers who are not ready to take an interest in this examination.

➢ Local vendors and daily wagers who are not accessible at the hour of information assortment.

Selection and Development of Tool

Tools were prepared on the basis of objectives of the study. An organized information survey was utilized for the information assortment as it is viewed as the most fitting instrument to evoke the reaction from members. An outline was set up to help in the development of the device. Two parts were considered for the arrangement of the device and inquiries for the device were partitioned under these two segments: general Information, Causes, symptoms and Prevention of disease.

Description of The Tool

After an extensive review of literature and discussion with the experts, structured knowledge questionnaire was developed. Organized information survey was

set up to evaluate the knowledge and psychological awareness level of Local vendors and daily wagerson anticipation of contamination rewgarding basic information on covid-19 pandemic.

The device utilized in the current investigation comprised of:

Section A: Socio-Demographic Variables:

This section has 6 items. They are: Age, sex, religion, monthly income, educational status, previous sources of information regarding covid-19 pandemic.

Section B: Structured Knowledge Questionnaire Regarding Basics Of Covid-19 Pandemic.

This section has 20 items with various aspects on general information, causes, Symptoms and prevention of infection regarding covid-19 pandemic.

Scoring of Items:

For section B, a score of 1 mark apportioned for each right answer and a score of 0 for each wrong answer. In this way an aggregate of 20 imprints were given for information appraisal. To decipher the degree of information, the scores were circulated as follows:

Table 1:

S.no. No.	Max Score Achieved	Interpretation
1	>50%	Inadequateknowledge
2	50-75%	Moderately adequateknowledge
3	<75%	Adequateknowledge

Reliability:

Table: -2 (N= 140)

S.No.	Socio-demographic variables	Categories	Frequency	Percentage%
1.	Age in years	21-25	28	20.00
		26-30	50	35.72
		31-35	42	30.00
		36 and Above	20	14.28
2.	Sex	Male	84	60.00
		Female	56	40.00
		Transgender	00	00.00
3.	Religion	Hindu	116	82.85
		Muslim	18	12.85
		Christian	04	2.85
		Sikh	02	1.45
4	Income per Month	Up to 3000	70	50.00
		3001-5000/	40	28.57
		5001-10,000/	30	21.42
		10,001 & more	00	00.00
5.	Educational Status	Illiterate	97	69.28
		Up to Primary	38	27.14
		Secondary	05	03.57
		Hr. Sec. & above	00	00.00
6.	Previous sources of Information	Health personnel	38	27.14
		Mass media	78	55.71
		Family & friends	24	17.14
		Others	00	00.00

Table no.-3(N= 140)

S.No.	Knowledge	Frequency	Percentage%
1.	Inadequate knowledge <50 %	43	30.71%
2.	Moderate adequate knowledge 50-75%	84	60.00%
3.	Adequate knowledge >75%	13	21.66%
	Total	140	100

Table :-4 (N= 140)

S. No.	Socio-demographic variables	Categoriesw	Frequency	Knowledge And Psychological awareness		df	Chi Square $(x2)$	Signifi.
				Below mean	Above mean			
1.	Age in years	21-25	28	22	06			
		26-30	50	37	13	3	0.7458	N.S
		31-35	42	33	09			
		36 and above	20	14	06			
2.	Sex	Male	84	65	19	1	03172	N.S
		Female	56	41	15			
3.	Religion	Hindu	116	87	29	3	1.3208	N.S
		Muslim	18	15	03			
		Christian	04	03	01			
		Sikh	02	01	01			
4	Income/ month	Up to 3000/-	70	58	12	2	3.9428	N.S.
		3001-5000/-	40	27	13			
		5001-10,000/	30	21	09			
5	Educati-onal Status	Illiterate	97	83	14	2	20.1238	S.
		Upto Primary	38	22	16			
		Secondary	05	01	04			
6	Previous sources of Informa-tion	Health personnel	38	16	22	2	33.4438	S.
		Mass media	78	71	07			
		Family& friends	24	19	05			

Note: S.- significant,   N.S.- Not significant

The reliability of the tool was established by using split half method. Utilizing the acquired qualities coefficient relationship was finished with the assistance of Speaeman Brown equation. The reliability was done manually. Reliability score acquired as 0.936 which implied that the Tool is good.

Procedure For Data Collection

In the wake of assessing level of knowledge and psychological awareness regarding covid-19 pandemic among Local vendors and daily wagers residing in Kota, a survey study has been planned. The time of information assortment was a month, in the period of April 2020 to 2020. The reason and nature of the investigation was disclosed to every subject and got their oral assent. The organized information poll was managed with respect to covid-19 pandemic and each example possesses taken time for 10 min. later conveyance of Information Booklet to the subjects.

Data Analysis

The analysis and interpretation of data of this study are based on data collected through Structured Knowledge Questionnaire to assess the level of knowledge and awareness regarding covid-19 pandemic among local vendors and daily wagers residing in Kota (Raj.). The results were computed using both descriptive and inferential statistics based on the objectives of the study.

Objectives of The Study

1. To assess the level of knowledge and psychological awareness regarding covid-19 pandemic among local vendors and daily wagers residing in Kota (Raj.).

2. To find out the association between knowledge and psychological awareness of local vendors and daily wagers residing in Kota (Raj.) regarding covid-19 pandemic with selected socio demographic variables.

3. To prepare and deliver an information booklet regarding prevention of infection regarding covid-19 pandemic for local vendors and daily wagers residing in Kota (Raj.).

Hypothesis

H_0: There is no significant association between the knowledge scores and selected socio demographic variables.

H_1: There will be significant association between the knowledge scores and selected socio demographic variables.

Organization Of The Study Findings

The analysis of the data is organized and presented under the following sections:

Section I: Frequency and percentage distribution of samples according to demographic variables.

Section II: Assessing knowledge and psychological awareness regarding covid-19 pandemic among local vendors and daily wagers residing in Kota (Raj.)

Section III: Association between level of knowledge and psychological awareness among local vendors and daily wagers and selected socio-demographic variables.

From table 4, it is evident that the demographic variables such as Age, sex, religionand income per month, the determined chi square worth is not exactly the basic incentive at $p<0.05$ level of essentialness, So null hypothesis is acknowledged and research hypothesis is dismissed.

In Demographic variables such as educational status and previous sources of information, the determined chi square worth is high than the basic incentive at $p<0.05$ level of essentialness, Sonull hypothesisis dismissed and research hypothesisis acknowledged.

Conclusion

The findings of this study suggest that local vendors and daily wagers residing in Kota (Raj.) who had significant level of educational status have good knowledge and awareness with respect to COVID-19 pandemic. Likewise good COVID-19 knowledge and psychological awareness is related with higher level of previous sources of information like education provided by health professionals including medical doctors, Nurses, pharmacists, ASHA and Paramedical staff can play an important role in prevention of covid-19 pandemic from spreading.

Recommendations

Based on the discoveries of the current examination and remembering the impediments of the investigation, the accompanying suggestions were proposed for additional exploration. The accompanying exploration based suggestions are drawn:

- The study can be duplicated in various settings with bigger examples, in this way the discoveries could be summed up better.

- A study should be possible to evaluate the adequacy of the data booklet arranged as result of the examination.

- Develop and elevate compelling project to improve the information on wellbeing experts on prevention of covid-19 transmission.

- Improve educational plan put together preparing other awareness programs with respect to counteraction of disease draws near.

- The medical caretakers ought to be given some in-administration instruction or ought to be offered opportunities to endeavor workshops or meetings on increasing awareness and prevention regarding covid-19 pandemic.

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