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ORIGINAL ARTICLE

Awareness about COVID 19 regarding its Symptoms, Preventive Measures and compliance of Preventive Measures in rural and urban areas

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ABSTRACT

Aim: To find out presence of awareness about COVID 19 in people of rural and urban areas

Duration of study: 2 weeks until get maximum participation response

Study design: Cross sectional survey

Method: Questionnaires' proforma was created from WHO and CDC website in google doc online form and was circulated among peoples of urban and rural areas through WhatsApp and Email. Responses were collected through google doc form and rearranged in form of tables/graph or pie chart. Results about knowledge of COVID 19 were presented in frequency and percentages.

Conclusion: More awareness is needed about those COVID19 presentations, preventive measures and compliance of preventive measures which are being missed or not implemented by public so that spread of COVID 19 can be reduced and prevented

Keywords: COVID 19, clinical presentations, awareness, preventive measures, Rural and Urban areas

INTRODUCTION

COVID 19 disease is caused by SARS-COV-2 virus. It has high rate of transmission which occurs via respiratory droplets in form of aerosols coming from infected person in close contact[1]. But it can also spread through contact transmission like coming in contact with person and services which contain the virus[2]. By keeping in mind all these factors who claimed to do this study regarding awareness about COVID 19 regarding its symptoms, Preventive measures and compliance of preventive measures in rural and urban areas. Fever, dry cough, sore throat and shortness of breath are its main symptoms followed by loss of smell and taste, tiredness and diarrhoea etc. sometime GIT symptoms like indigestion, dyspepsia, bloating and constipation come before the respiratory symptoms and fever[3,4,5]. As we are in COVID 19 pandemic, and it is very high concern public health matter now a days there is need to have awareness in real depth about its presentations, preventive measures and the most important is to comply with its preventive measures.

We have planned to do this study to assess real knowledge of COVID 19 in urban as well as rural areas because there are so many myth bursts about COVID 19.it will be beneficial for community about implementation of missing preventive measures against COVID 19 and accept its reality.

METHOD

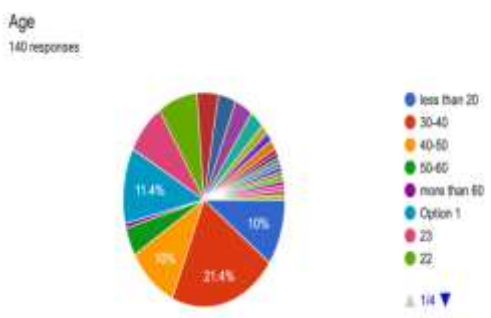
Questionnaires' proforma was created from WHO and CDC website in google doc online form and was circulated among peoples of urban and rural areas through WhatsApp and Email. Responses were collected through google doc form and rearranged in form of tables/graph or pie chart. Results about knowledge of COVID 19 were presented in frequency and percentages. Permission was granted by Ethical Review Board of K. E. Medical University to start this research.

RESULTS

Of the Total 147 responses entered in google doc site maximum response came from 30-40 years (21.4%) followed by 40-50 years and less than 20 years age group both with (10%) as shown in chart. 101(68.7%) were males and, 46(31.3%) were females as shown in bar diagram. 86(59.3%) responders were university level graduates 19(13.1%) uneducated groups followed by college, primary and middle level as shown in pie chart No. 2. 65(44.5%) responders were students and 37(25.3%) were employed followed by 34(23.2%) who were self employed as shown in pie chart No.3 88(60.3%). Responders were unmarried where rest were married (39.7%) ass shown in pie chart No. 04. 58(39.7%) Married responders who participated in survey had 4-6 members in their family followed by 31(21.2%) who have 6-8 members in family as shown in pie chart No. 05. Majority of the participants belongs to middle class family 92(63.9%) which is followed low socio economic class, 47(32.6%) as shown in pie chart No. 06. Majority of participants were from urban area 72(31.4%) and rest were from rural areas, 68(48.6%) as shown in pie chart No. 07. TV was the main source of awareness about COVID 19 in majority of participants 63(43.2%) which was followed by social media sites 48(32.9%), peers 30(20.5%) cable 27(18.5%) and other medias as shown in graph-1. Most of the responders were aware about shortness of breath 110(75.3%) and then fever 105(71.9%), dry cough 92(63%), sore throat 71(48.6%) and other symptoms as shown in graph-2. Regarding preventive measure, hand rubbing with alcohol base sanitizer was the commonest reply given by responders 119(81.5%) which is followed by covering mouth and nose with mask 104(71.2%) and then social distancing 87(59.6%) which is followed by measures like not touching eye, nose and mouth and staying in home.

Majority of participants 88(60.3%) were following hand rubbing with alcohol based sanitizer followed by covering nose and mouth mask 85(58.2%), maintaining social distance of 1 meter remains on third measure with 69(47.3%) and covering mouth and nose by mask and not touching eye, nose and mouth both have 54(37%) as shown in graph-3. Meanwhile other measures are less followed by our responders.

Pie Chart 1



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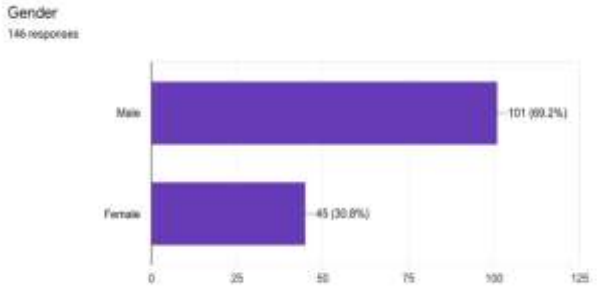
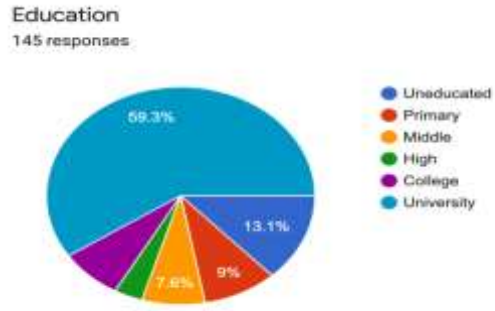
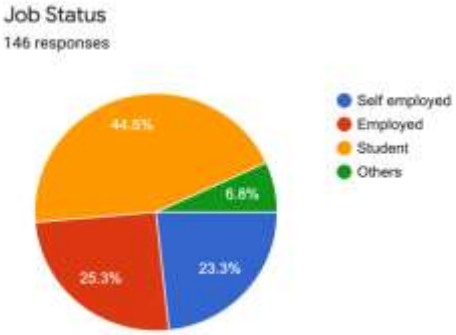


Pie chart 2



Pie chart 3



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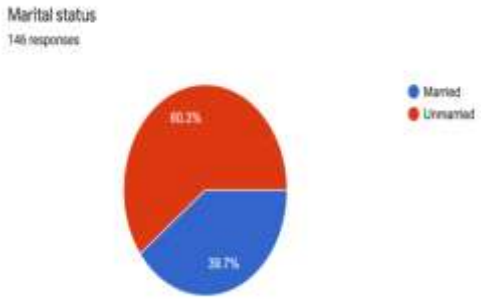
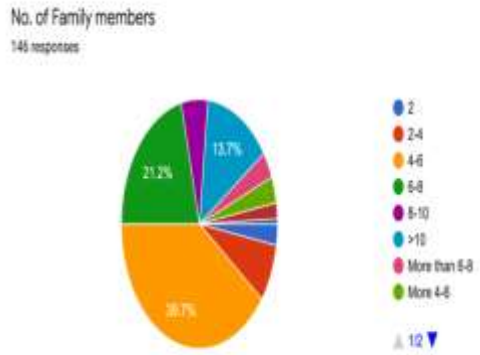
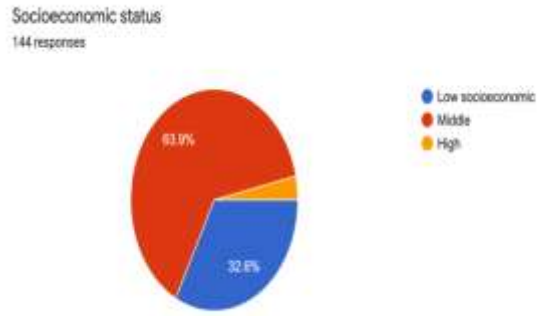


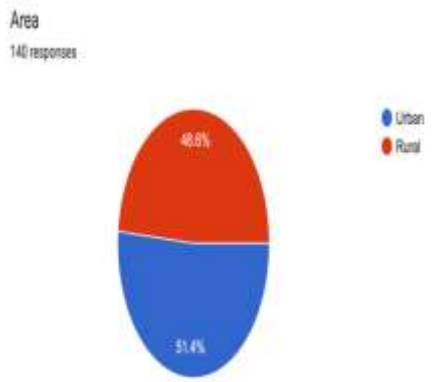
Pie chart 5

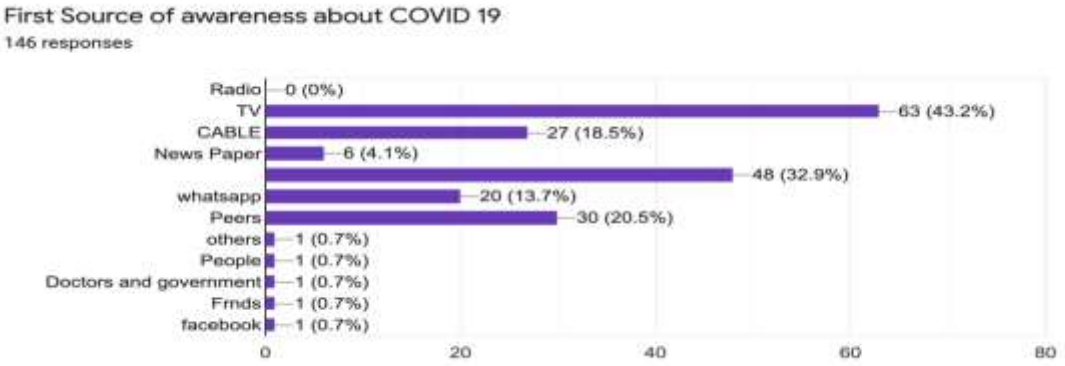


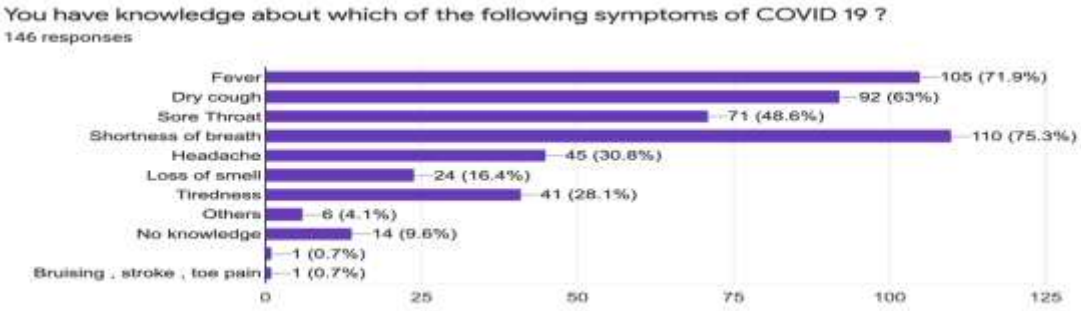
Pie chart 6

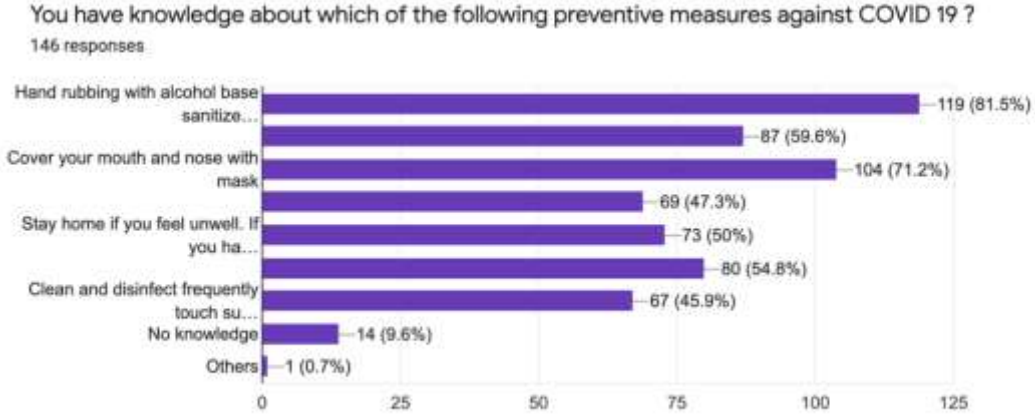


Pie chart 7









DISCUSSION

Pandemic of Covid-19 has badly affected our healthcare system, economy and daily life[6]. It is well known that most patients with Covid-19 have symptoms like fever along with cough and dyspnea[7-10].

We conducted study to assess the awareness of people living in urban and rural area about Covid-19 symptoms and preventive measures against Covid-19. It is observed that there are many myths being disseminated among people about Covid-19 disease and treatment. In our study 101(68.7%) were males & 46 (31.3%) were females in another study 58.5% were males and 41.5% were females[11]. In our study people from urban and rural area are included while in another study done in Saudi Arabia participants were healthcare providers and general public. In our study among 147 participants the most common age group was 30-40 years age followed by second group from 40-50 years age. While in another study second common age group was 20-40. Educational level in our study variant from uneducated to university level while the majority of participants belongs to university (59.3%). In another study majority (66%) had B.A or BSc[11]. Our result showed that 146 out of 147 have awareness about Covid-19 while in another study 90% have awareness about Covid-19[11]. According to WHO 2020c. There is a need to grow public awareness on global level through media organization[12]. In our study there were 147 participants out of which 110(75.3%), 105(71.9%), 92(63%), 71(48.6%) have awareness about symptoms like shortness of breath, fever, dry cough and sore throat respectively. This different level of awareness about different symptoms may be due to knowledge deficient or by different

reports of different symptoms from different countries about Covid-19 disease[13,14].

Second reason for difference in awareness of level may be due to different reports of WHO about disease in early era[9]. Regarding knowledge about preventive measures majority considered hand rubbing as best preventive measure followed by use of face mask, stay at home, cleaning and disinfection respectively similar to another study[12]. This awareness about preventive measure is consisting with WHO emphasis on the importance of regular and proper hand washing[15].

CONCLUSION

we conclude that people from urban & rural area both have sufficient knowledge about Covid-19 symptoms and its preventive measures. But there is need to implement this knowledge in a proper way so that Covid-19 transmission may be prevented. Special campaign should be launched about infection control and preventions practices especially about hand hygiene (Hand rubbing and hand washing) through workshops, webnars , electronic and social media. There is also need to produced awareness about real management of Covid-19 on evidence base rather believing on wrong myths about its management strategy

Conflict of interest: Authors declare they have no conflict of interest

Acknowledgment: participant who took part giving online responses through google doc form

Limitation of Study: the limitation of our study is some of the questions but not filled by respondents.

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