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Awareness Among Workers In South Tamilnadu Factory On Precautions On Covid-19

[1]Priyadharshni.R, [2]Abhilasha, [3]Lakshmi T.A,

[1] Saveetha Dental college and hospitals,
Saveetha institute of medical and technical sciences
Saveetha university, Chennai-600077
Email id: priyaramachandran2002@gmail.com

2 Reader,
Department of oral pathology,
Saveetha Dental college and hospitals,
Saveetha institute of medical and technical sciences
Saveetha University, Chennai-600077.
Email id : abilasha@saveetha.com

3 Senior lecturer,
Department of oral pathology,
Saveetha Dental college and hospitals,
Saveetha institute of medical and technical sciences
Saveetha University, Chennai-600077.
Email id : lakshmita.sdc@saveetha.com

ABSTRACT

Introduction- The spread of coronavirus disease caused by novel coronavirus SARS-Cov2 is becoming a life threatening situation all over the globe. In such cases prevention is better than cure.

Materials and methods - A survey was conducted through google forms - a cross sectional study (questionnaire based) across workers in south tamilnadu factory. For which 261 responses were received and recorded.

Result - Over 261 responses majority of them belong to the age group of 20 to 40 and about 73.2% of them are males. Their responses were recorded and validation was done.

Conclusion- Wearing a mask, following social distancing, proper hand sanitation prevents the spread of the disease. From our study we can conclude that workers among south Tamilnadu factories follow proper norms to prevent the spread.

Keywords- Awareness, covid-19, Precaution, Sanitation, innovative technique.

INTRODUCTION

On march 11, 2020 the novel coronavirus outbreak (COVID-19) was declared as a global pandemic by the World Health organisation. It originated from Wuhan, China, and spread to almost all over the world with the impact of COVID-19 many people are affected with spanning health, economics, human behaviour and state of mental well being (1). As the number of death cases increases rapidly, evidence regarding people's psychological reaction towards the global public health crisis becomes more important since it provides insight which helps policy-makers

and practitioners to make an improvement in their health communication, to provide preventive behaviours and also to provide social and emotional support to people who need it (2). Previous studies show that the undergoing ecological threats such as the pandemic, negative emotional response, including fear and the risk perception makes threats to appear more menacing. The widespread fear and high risk perception brings behaviour change in response to the threat apart from the mental stress such as anxiety. In case of COVID-19, there is a rapidly growing literature which shows that the awareness of the disease symptoms, self-perceived risk of contracting disease and fear are salient predictors of preventive behaviours. The fear of COVID-19 was only the predictor of positive behaviour changes like social distancing, among samples residing in UK, found that the engagement in social distancing and washing of hands was most strongly predicted by self-perceived risk of contracting the virus among the study samples in UK over the first few weeks of pandemic. Another study conducted by Wise et al examined the psychological factors and their impacts on human behaviour was studied on a population residing in middle and high income countries (3). Evidence from the close-knit communities where people reside in close proximity had strong social ties in low or lower middle income countries is still a limited factor. But in particular, residents living in these communities are highly vulnerable to the impact crisis due to their limited access to high-quality Healy care services, increased population density, large household size and financial burden.

The economical disadvantage is always tied up with the pre-existing health conditions like diabetes, chronic heart and lung disease which makes the above mentioned population to get exposed to greater risk of death. There is always an increasing need to educate the population in low or lower middle countries to make a better understanding about the psychological and behavioural impact of COVID-19 and also to inform culturally and context appropriate policies for their benefits (4). According to the Indian census 2011, the peri-urban areas which are referred to as areas at the periphery of cities in India which includes a large number of migrant population and finally resulting in over population. Previous research suggests that populations in peri-urban areas have high density and multiplex social networking. The majority of its population lives in poverty and are under threat of food insecurity and unimproved sanitation conditions even before the spread of COVID pandemic whereas after the spread of the pandemic people started sanitising themselves very often and pretty sure about their hygiene in all aspects (5). The government of India has initiated a live update system where the infomercials, text messages to disseminate COVID-19 related information and helps in raising the awareness of public health crisis. As the most important measure against the pandemic, the government of India ordered a nationwide lockdown on march 24th 2020, limiting the movement of its 1.3billion residents. The complete quarantine was implemented across the country till may 30th 2020, after which the restrictions on quarantine were partially relaxed in phases. The economic loss which was incurred by enforcing a lockdown has threatened its growth.

According to the Center for Monitoring of Indian Economy (CMIE), India experienced a huge surge in unemployment by more than 23.5% from march to April 2020 (economic center for monitoring of India - 2020 June). Loss of employment, restriction of essential activity and the social isolation club-led abruptly interrupted the residents. Preventive measures are the current strategy to make a limit for the COVID-19. Early screening, diagnosis, isolation and treatment are required to prevent further spread of the disease. A questionnaire based survey was conducted among workers across south tamilnadu factory about the precautions on COVID-19. (6),(7),(8),(9),(10),(11),(12),(13),(14),(15),(16),(17),(18),(19),(20),(21),(22),(23),(24),(25). Aim of our study is to analyse the knowledge on precautions of COVID-19 among workers in south tamilnadu factory.

MATERIALS AND METHODS

A survey was conducted through google forms - a cross sectional study (questionnaire based) in communities of south tamilnadu from 15th to 20th february 2020. Due to lockdown with some partial restriction and in concern with the spread of the pandemic traditional survey methods like direct visit and in-person interviews to reach factories are avoided. Online web survey techniques are often constrained by internet coverage and literacy gap. The conventional samples are from south tamilnadu factory where google forms are created and shared among workers and their responses are recorded. Workers in factories are included in our study and those who are not working in factories are excluded. Study setting is questionnaire based survey and sample form is workers in south tamilnadu factory. Sample size was 261. Questionnaire are as follows

1. Age
2. Gender
3. Whether you had any mental counselling due to unbearable stress of Covid-19 by contacting toll free numbers
4. Did quarantine affect you economically?
5. Have you come in close contact with someone who tested positive for Covid-19 ?
6. Do you sanitise your hands regularly?
7. Do you think usage of hand sanitizer and face mask will help in preventing the spread of Covid-19?
8. Do you maintain social distancing among your coworkers?
9. Did you follow quarantine rules?
10. How often did you wash your hands?
11. Did you have symptoms of Covid-19?
12. Did screening tests take place regularly?
13. How was your mental status during quarantine?
14. Are you afraid of the secondary Covid-19 wave?
15. Are you provided with hand sanitizers regularly?
16. Did you wear a mask whenever you were out?
17. Are factories regularly sanitised?
18. Whether immunity boosters like zinc and vitamin c tablets are provided?
19. Did you have a heavy workload when compared to pre-Covid-19 scenario?
20. Do you think precautions on Covid-19 make people hygiene in health aspects?

Statistical analysis was done and the results were obtained in the form of pie charts, bar graphs and associations using chi-square. The statistical software used in SPSS version 2.

RESULTS

The survey was conducted among the workers population in south tamilnadu factory. Where out of 280 working population there were 261 overall responses for all the questions which were asked, their responses were collected and recorded in google forms. From our survey reports the majority of the study group is males. Among the working population most of them are in the age group of 20 to 40 years (77%).

Among 96.9% ensures that factorie are regularly sanitized, 3.07% says they were not (Figure 1). Over 93.1% wear masks when they are out and 6.9% aren't wearing masks (figure 2). Among 96.7% sanitise their hands regularly whereas 3.07% dont (Figure 3). Among 95.7% maintained social distancing and 4.21% did not maintain social distancing (figure 4). Among 56.3% of the population had symptoms of covid-19 whereas 43.6% didn have any

symptoms (figure 5). Over 93.8% think that usage of masks and sanitizers reduce the spread of the disease and 6.13% don't think that masks and sanitisers prevent spread of covid (figure 6). Over 54.41% think that screening tests were taken regularly and 20.3%, 12.2%, 7.2% think that screening tests were not taken on a regular basis.

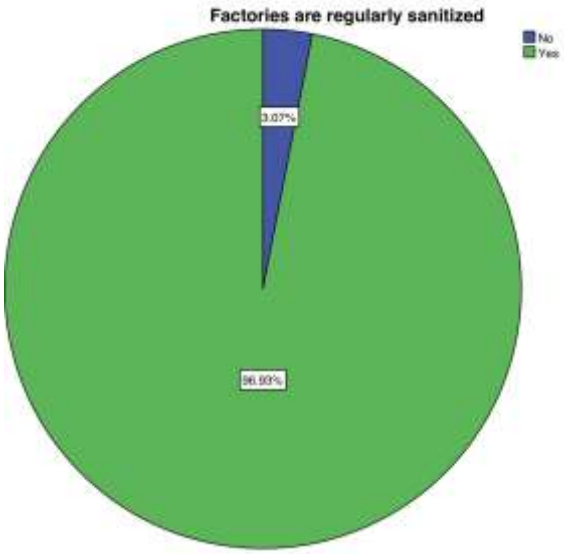

Fig 1 shows the response of the sanitization of the factories on a regular basis. Green denotes yes and blue denotes no. Over 96.9% said that the factories are sanitary in a regular manner and 3.07% said that it's not sanitised regularly. Green represents yes and blue denotes no. Majority of the participants think factories are regularly sanitised,

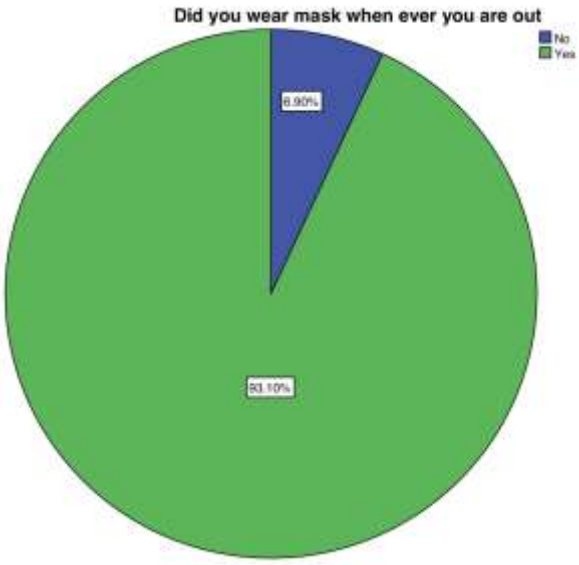

Fig 2 shows the response to wearing a mask. Green denotes yes and blue denotes no. Over 93.1% of them work with their mask and the rest 6.9% don't use a mask when they are out. Majority of the participants wear masks while they are out.

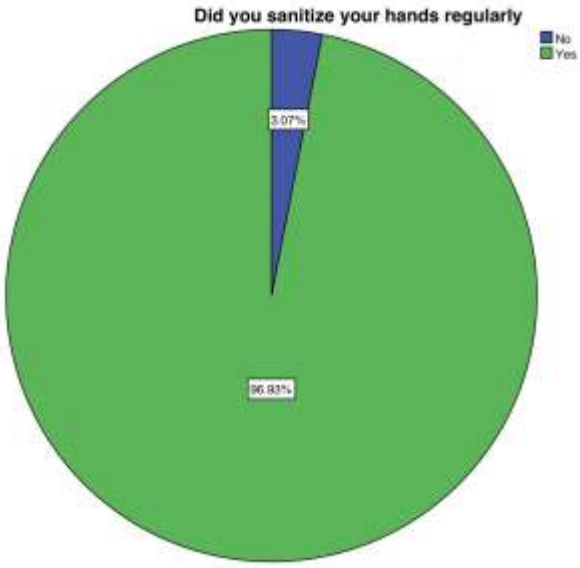

Fig 3 shows about the sanitisation of hands among workers for which 96.7% of them sanitize their hands regularly and 3.07% of them don't sanitise their hands regularly. Green indicates yes and blue indicates no. Majority of them regularly sanitised their hands.

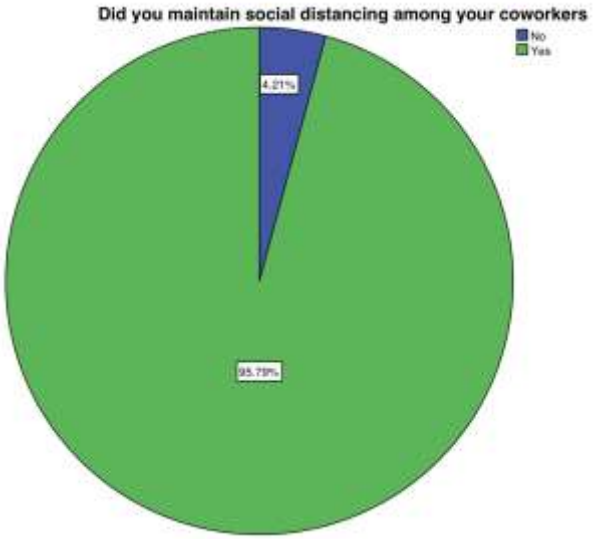

Fig 4 shows the maintenance of social distancing among coworkers. About 95.7% of them maintained social distancing and 4.21% failed to maintain social distancing. Green represents yes and blue represents no. The majority of them maintained social distancing among their coworkers.

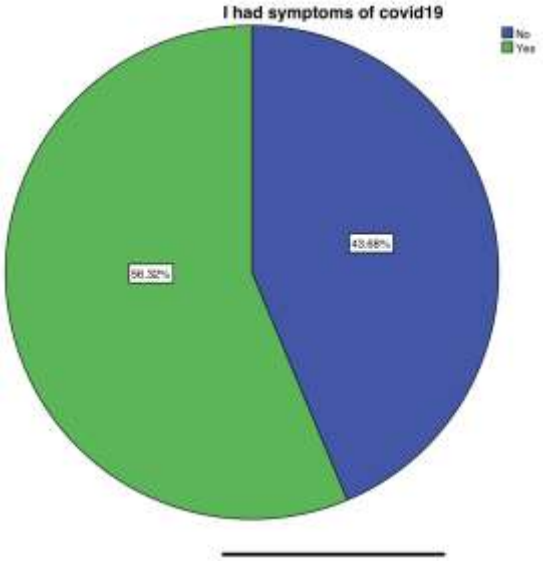

Fig 5 shows about the symptoms of covid-19 in the prevailing days for which about 56.3% of them reported that they had symptoms of covid-19 and 43.6% reported they didn't have any symptoms of covid-19. Green represents yes and blue represents no. The majority of them had symptoms of covid-19.

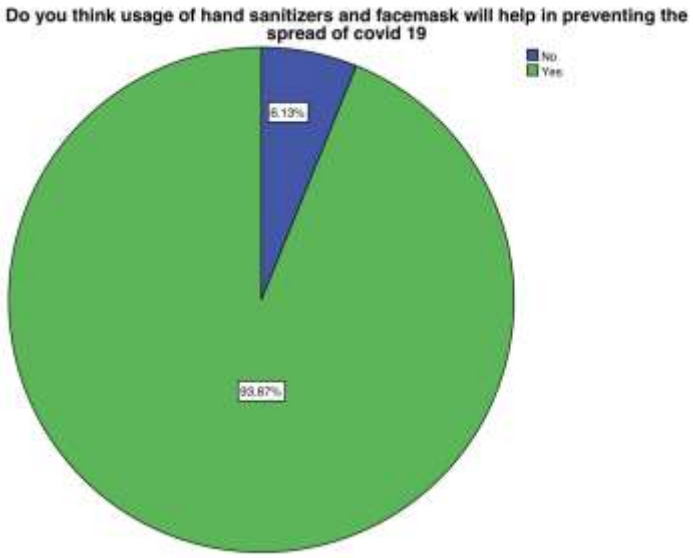

Fig 6 shows the view of the population about the prevention of covid-19 with help of wearing masks and usage of hand sanitizers. About 93.8% of the population believes that usage of all theses may keep themselves away from covid-19 and the rest 6.1% of the population aren't convinced with the above mentioned preventive measures. Majority of the participants agree that usage of sanitisers and face masks prevents the spread of covid-19.

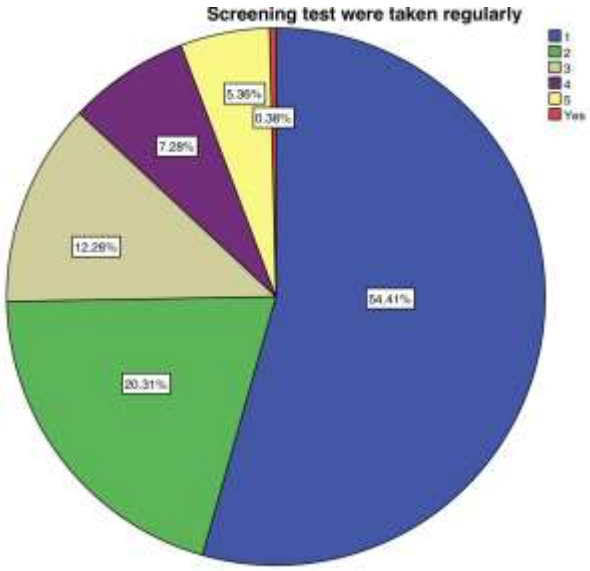

Fig 7 shows about the screening test taken among workers for which 54.41% responded that they were regularly brought in with screening test procedures where 20.31%, 12.26%, 7.28% opted that they are taken and about 5.36% of them responded that they were not taken on a regular basis. Majority of them agree that screening tests were taken regularly.

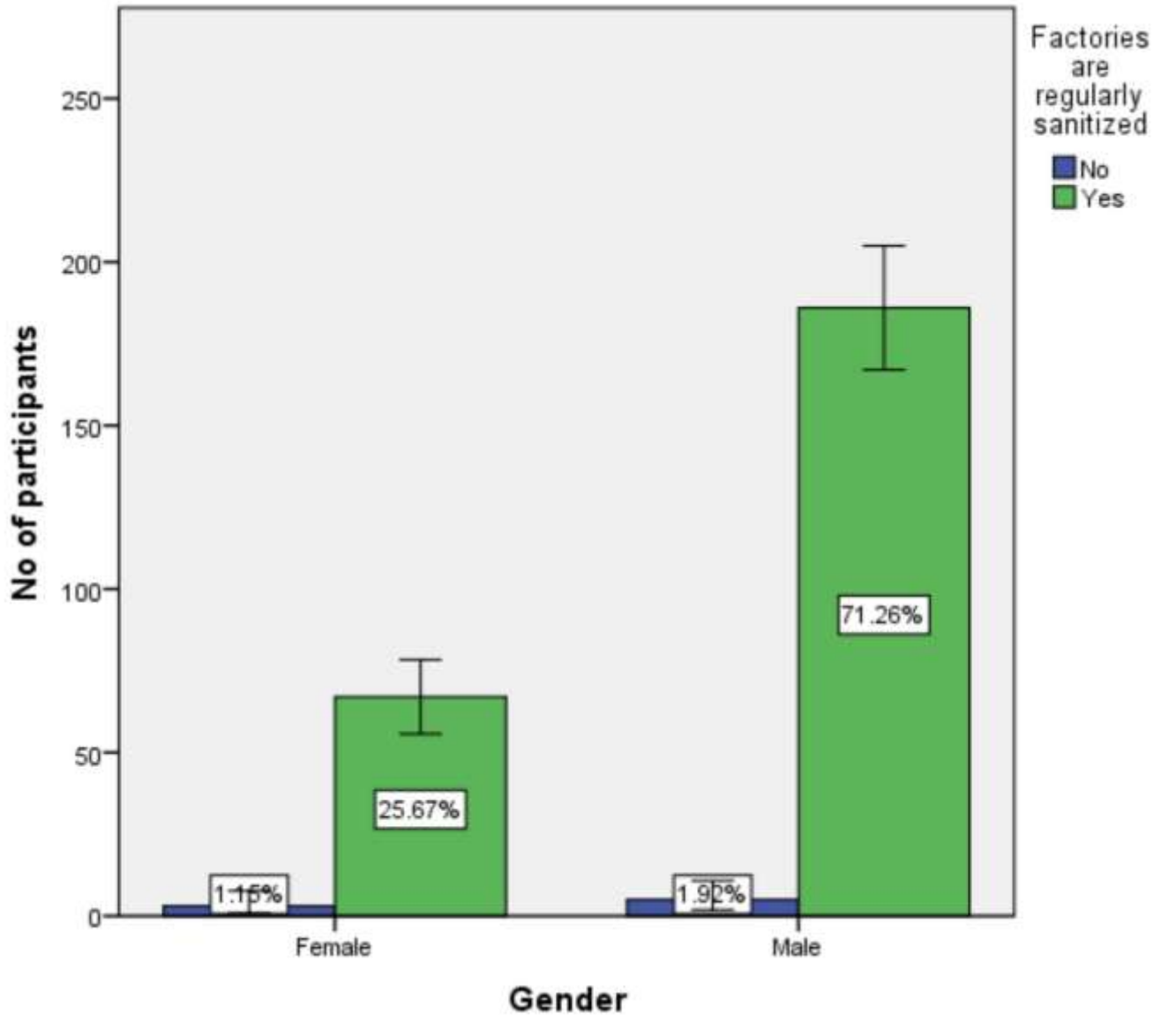

Fig 8: The bar graph represents the association between gender and regular sanitisation of factories. X axis represents the gender and Y axis represents the percentage of responses for the regular sanitisation of factories. Green represents yes and blue denotes no. Both males and females responded to the regular sanitization of the factories. Majority of the population of males think that factories are sanitised regularly. Pearson chi square test shows p value is 0.489, (p>0.05) hence, it's statistically not significant.

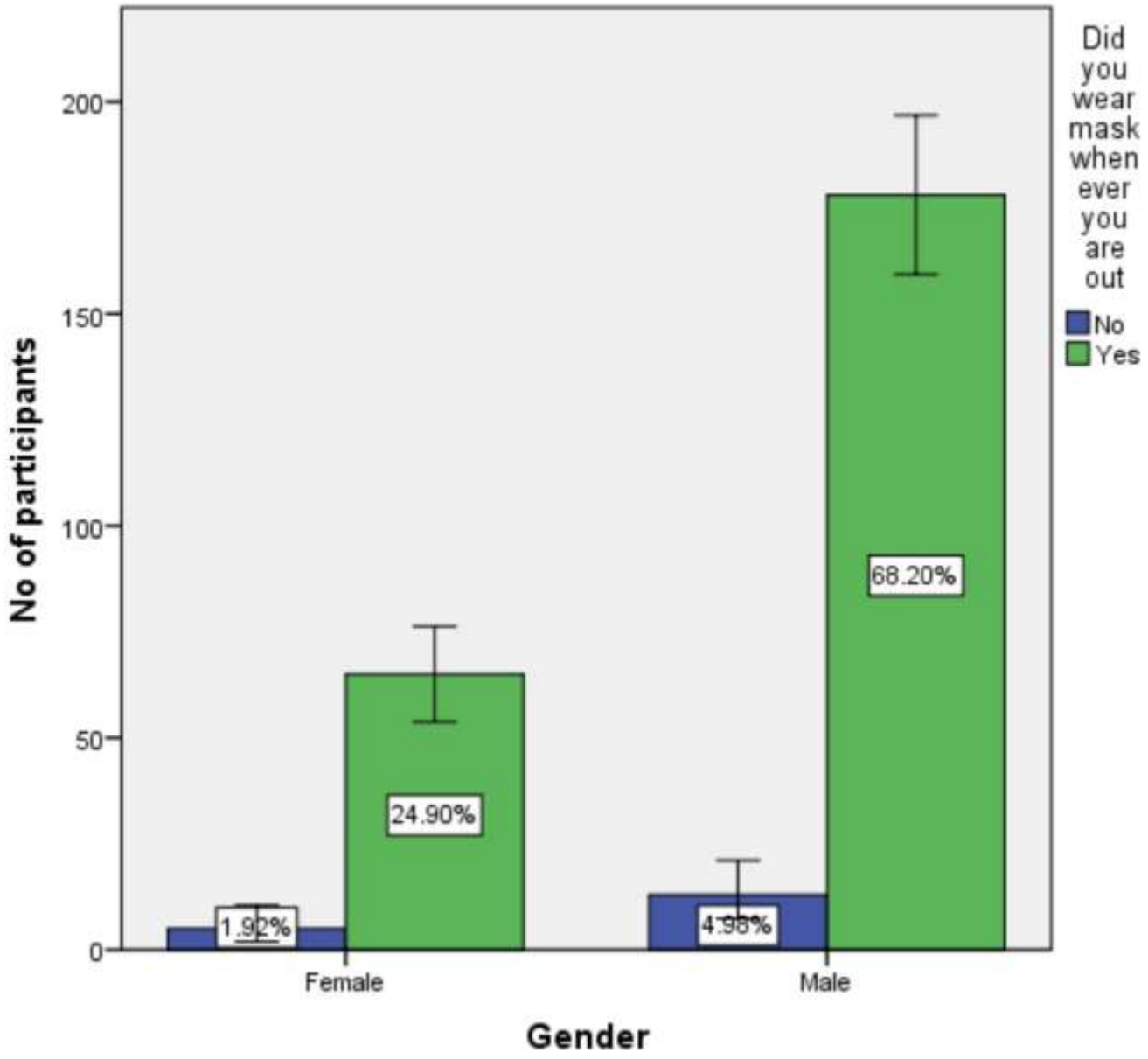

Fig 9: The bar graph represents the association between gender and usage of masks. X axis represents the gender and Y axis represents the percentage of responses for the usage of masks. Green represents yes and blue denotes no. Both males and females responded to the usage of masks. Majority of the population of males(68.2%) agrees that they wear masks when they are out when compared to females(24.9%).Pearson chi square test shows p value is 0.367, ($p>0.05$) hence, it's statistically not significant.

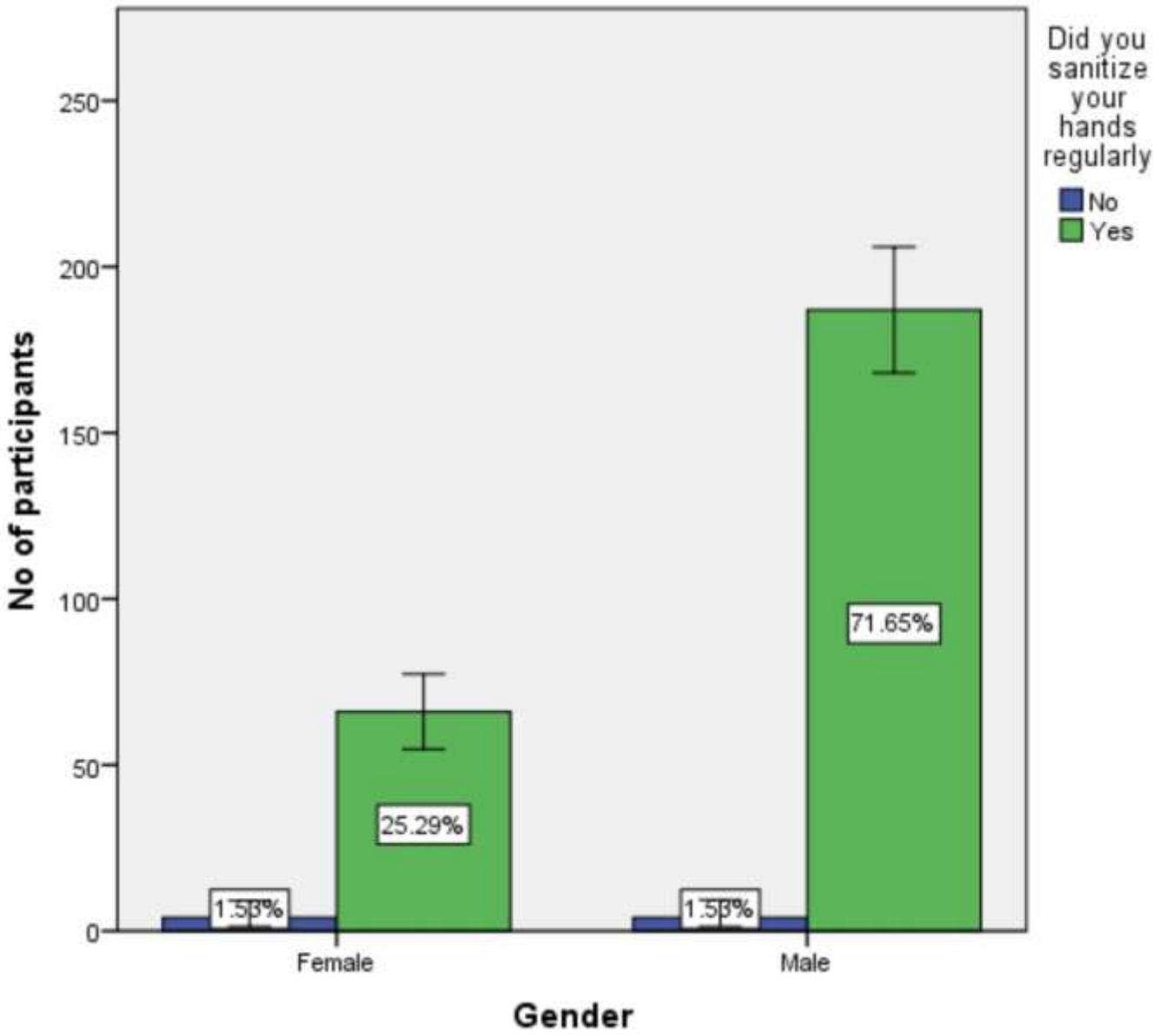

Fig 10: The bar graph represents the association between gender and regular sanitisation of hands. X axis represents the gender and Y axis represents the percentage of responses for the regular sanitisation of hands. Green represents yes and blue denotes no. Both males and females responded to the regular sanitization of the hands. Majority of the population of males(71.65%) get their hands sanitised regularly. Pearson chi square test shows p value is 0.133, ($p>0.05$) hence, it's statistically not significant.

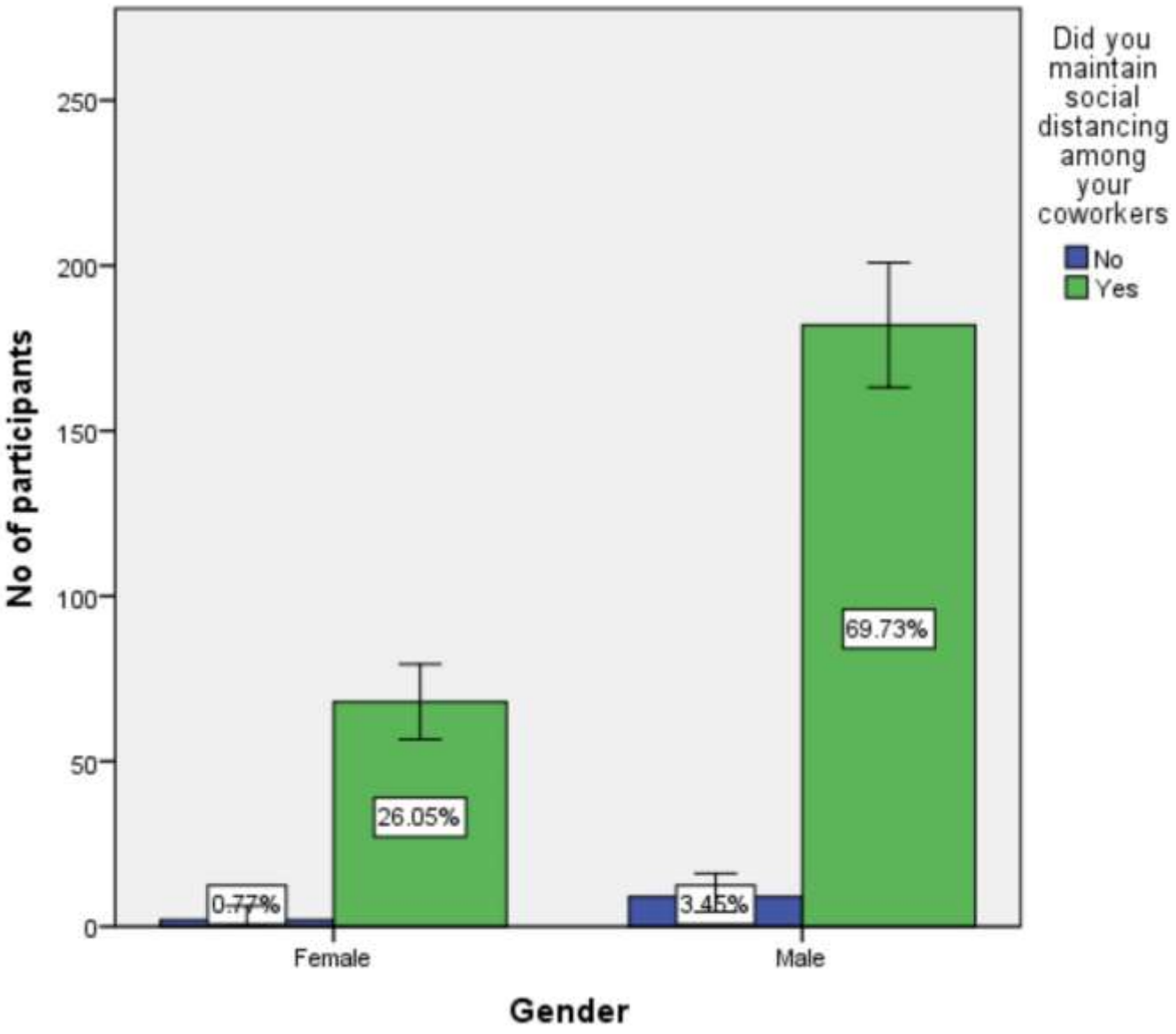

Fig 11: The bar graph represents the association between gender and maintenance of social distancing. X axis represents the gender and Y axis represents the percentage of responses for the maintenance of social distancing. Green represents yes and blue denotes no. Both males and females responded for maintenance of social

distancing. Majority of the population of males(69.73%) maintains social distancing norms with their coworkers. Pearson chi square test shows p value is 0.509, (p>0.05) hence, it's statistically not significant.

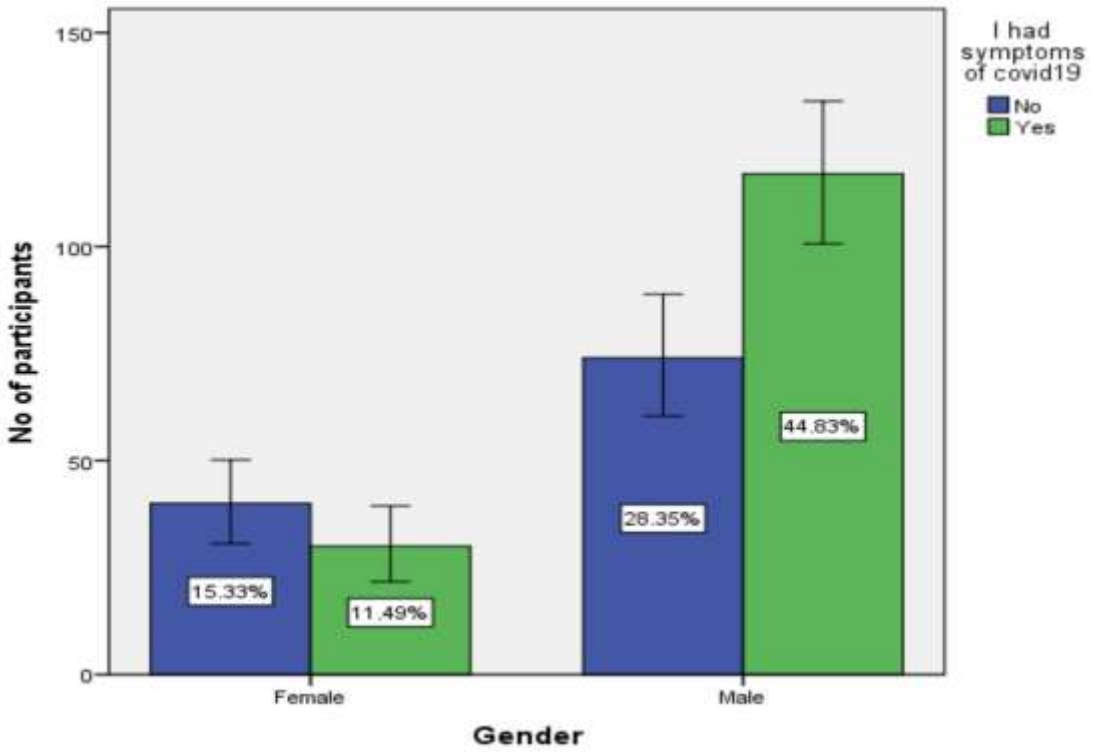

Fig 12: The bar graph represents the association between gender and symptoms of covid. X axis represents the gender and Y axis represents the percentage of responses for the symptoms of covid-19. Green represents yes and blue denotes no. Both males and females responded to having symptoms of covid-19. Majority of the population of males(44.83%) had covid-19 symptoms. Pearson chi square test shows p value is 0.008 (p<0.05) hence, it's statistically significant.

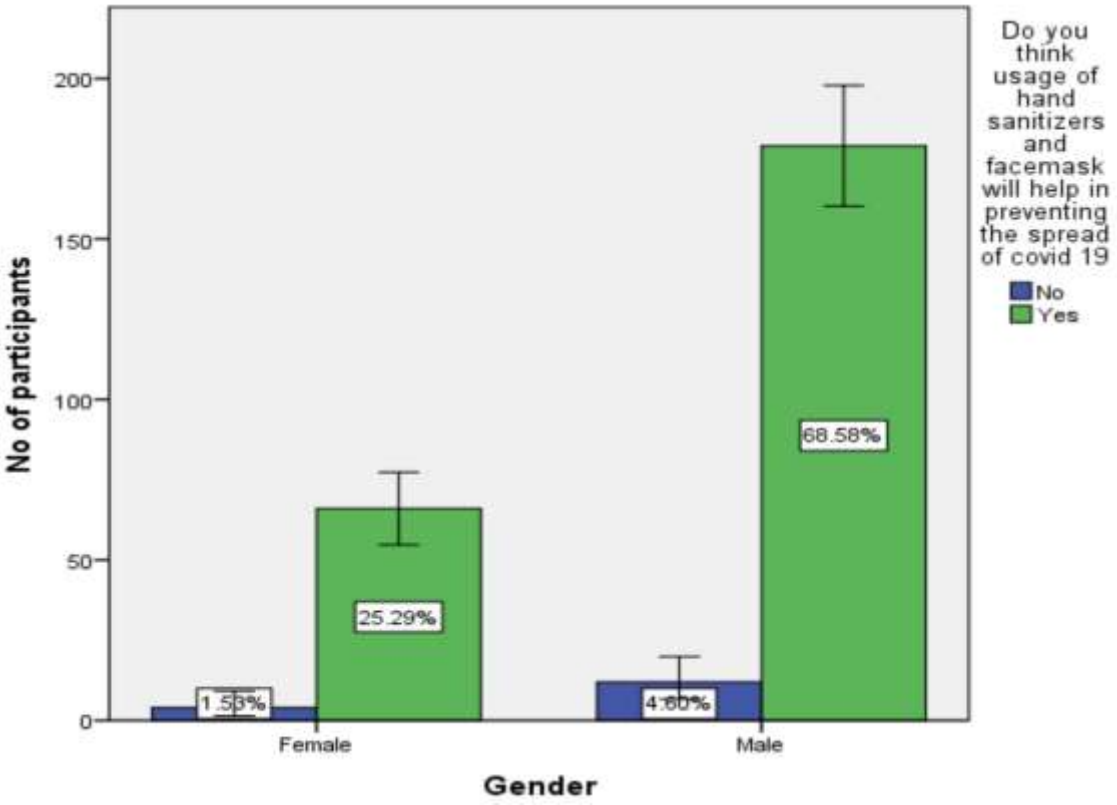

Fig 13: The bar graph represents the association between gender and usage of sanitisers and masks as preventive measures. X axis represents the gender and Y axis represents the percentage of responses for usage of sanitisers and masks as preventive measures. Green represents yes and blue denotes no. Both males and females responded to usage of sanitisers and masks as preventive measures. Majority of the population of males(68.58%) thinks that usage of masks and sanitisers prevent the spread of covid-19. Pearson chi square test shows p value is 0.865, ($p>0.05$) hence, its statistically not significant.

DISCUSSION

In our study we found that the majority of the workers population are aware of the common symptoms of the diseases. Yet, only a small population among them reported to be asymptomatic features of Covid-19, which suggest an important gap in transmission of Covid-19 via asymptomatic people. Asymptomatic patients are proven to be contagious(26,27). Such low awareness among the asymptomatic people may lead to preventive barriers like mask wearing and social distancing. To raise awareness about transmission of Covid-19 and promote preventive measures targeted education and communication programs which emphasise the role of people in the spread of pandemic. These can be delivered through numerous channels like TV and radio programs to reach households. Apart from the change in behaviour the majority of the population reported experiencing increased stress about the finance and lockdown across age and gender(26). This might be due to the fact that large populations belong to sectors below the poverty line and are vulnerable to distress caused due to lockdown. Additionally the lockdown has led to massive unemployment without required social protection, which results in an exodus of migrants with millions of workers fleeing cities and walking miles to reach home ((1).

“Prevention is better than cure “ which proves to be perfect in each and every aspect of life in the same way preventive measures are enforced by the government to enhance the limited spread of Covid-19. Primary preventive measures include regular washing of hands, covering both nose and mouth during the time of coughing and sneezing, discharge of used tissues and mask in proper disposal manner(28). From our study we can keenly observe that the majority of the population followed necessary preventive measures. We can also say that only a minority of our working population acquired symptoms of Covid-19 and a very few among them tested positive for Covid-19 in the prevailing days (2). Masks generally play a very important dual role in viral transmission, in population. At first it prevents the spread of the disease by filtering out the viral particles such as aerosols or droplets and secondly they impact turbulent gas cloud formation and respiratory pathogen emission(29). Previous study demonstrated that masks can either block the rapid turbulent gel which is generated during coughing and direct the jets in much less harmful manner for airborne infection control(30). Additionally for asymptomatic people wearing masks can potentially reduce the risk of acquiring infection from other people when the exact individual wears a mask to protect themselves (5).

Masks can be classified into three categories such as certified, medical and homemade masks. Typically certified and medical masks reduce the influence of virus loads, and could prevent the transmission of human covid and influenza virus from symptomatic individuals(31). Maintaining social distancing could be a challenging factor in crowded localities such as slums. There are more than 13million slums households in the 2011 census. Almost poor and vulnerable even in circumstances with social determinants of health is being compromised. Reporting the increase in washing hands with soaps compared to before Covid-19 circumstances is an indicator of widely promoted preventive measures (32). In particular respondents with symptoms of Covid-19 were more likely to report that they increased hand washing with soap since lockdown. This is consistent with finding that wasting hands with soap was more common when soap and water were together in a convenient place (4). Handwashing using soaps or sanitisation of hands are key preventive measures against the pandemic.

In other studies, awareness on the preventive measures were taken in various parts of India. The current situation requires knowledge about the infection and preventive measures. Our study indicates a significant impact of covid-19 preventive measures on limited sample sizes. Government aided programs or NGO’s aided programs can be organised on rural shades of Tamilnadu for creating more awareness on covid-19 spread. Further studies with larger sample size are needed to clarify the full impact of covid-19 on oral manifestation.

CONCLUSION

The spread of the pandemic which causes wide unemployment for workers in the country is the major cause of the economic crisis among Indians in the initial days of Covid-19. The only way to overcome the circumstance is to follow the necessary preventive measures. The survey conducted across the south tamilnadu factory working population follows the required norms and keeps themselves away from the Covid-19. From the survey it can be concluded that most of the workers are aware of the preventive measures of covid 19. The survey is statistically significant. Most of the workers are following the prevent measures and have knowledge of disease and mode of transmission. Further studies have to be conducted for a clear idea on people's knowledge and their view of the pandemic.

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