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RESEARCH ARTICLE

PERCEPTION TOWARDS COVID APPROPRIATE BEHAVIORS - A CROSS SECTIONAL STUDY AMONG NURSING STUDENTS FROM SOUTH INDIA

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Abstract

Background: 2019-nCoV (also called SARS-CoV-2) is a single stranded RNA virus comingunder the same genus beta coronavirus as severe acute respiratory syndrome coronavirus 1(SARS-CoV-1) and Middle East respiratory syndrome coronavirus (MERS-CoV). Adherence to COVID-19 appropriate behavior plays a crucial element in tackling the pandemic crisis.

Objectives: To assess the perception towards COVID associated factors and appropriate behaviours among the nursing students.

Methods: A cross-sectional study was conducted among representative sample of nursing students (n=79) aged 18 years or more between May to July 2021. Data on COVID appropriate behaviours based on guidelines published in the official website by the Ministry of Health and Family welfare, Government of India were collected online using a self-administered and semi-structured questionnaire. The descriptive and inferential statistics were analysed using SPSS version 22.

Results: Among 79 participants, 62 (78.4%) were from rural residences and 47 (59.4%) were from nuclear families. The majority of them (79.7%) perceived COVID 19 as a serious condition. Newspapers (54%) and social media (47%) were considered as significant sources of information on COVID appropriate behaviours.

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Introduction:-

2019-nCoV (also called SARS-CoV-2), since its first outbreak in 2019, pandemic has spread throughout the world hampering every aspect of life and also, causing millions of deaths worldwide [1]. COVID appropriate behaviours, vaccination and right treatment at right time are the most important ways to tackle COVID 19. Success of vaccine drive is challenged by individuals and groups who delay or refuse it [2]. Similarly behaviours changes and delay in seeking medical help are affecting many patients. This hesitancy towards vaccine and their behaviors can be due to

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numerous reasons like social influences concerns on safety, past negative experiences, lack of awareness and knowledge etc.[3] Understanding the perception regarding the COVID 19 vaccine, behaviors and treatment seeking help can help understand and tackle this situation. Understanding the perception regarding the COVID appropriate behaviours and treatment seeking help can help the government agencies to tackle this pandemic situation more effectively. Our study aimed to assess the perception towards COVID associated factors and appropriate behaviours among the nursing students.

Methods:-

The study was conducted during the period of lockdown in Karnataka for a period of 3 months from May to July 2021. Institutional approval was obtained before conducting the study. Using the COVID appropriate behaviours (CAB) published in the official website by the Ministry of Health and Family welfare, Government of India, a questionnaire was designed to know the knowledge, attitude and practice of CAB. A pilot test was done among the medical staff, medical students, nursing students and general public to make the necessary and relevant modifications in the questionnaire. The final questionnaire along with the consent form was sent to nursing students to collect the information on CAB. All consented voluntary participants more than 18 years old was requested to fill the questionnaire. Data were collected using a self-administered, online survey via Google forms due to the complete lockdown during COVID. Students were invited to complete an anonymous online survey through WhatsApp. The data collected were reversibly coded and confidentiality of participants was maintained.

Results:-

Socio-demographic characteristics of study participants are given in Table 1. A total of 79 nursing students were included in the study with a response rate of 100%. The mean age of the respondents was 19.62 years with a range 18-23 years. Seventy-six (96%) of respondents were females and all were unmarried. The majority, 47 (59.4%) came from nuclear family. The majority belonged to above poverty line 50 (63.3%). Twenty two (28%) had at least one family member above 65 years and 57% (45) had at least one family member below 18 years. The majority, 62 (78.4%) of the respondents reside in rural area. Christians constitute majority of the participants, 51(64.5%). All the participants had heard about COVID 19 and 79.7% considered it as a serious condition, which needs to be taken care.

Table 1:- Socio-demographic characteristics of study participants.

Variables	Responses	Frequency	Percentage	
Sex	Males	03	04.0	
Sex	Females	76	96.0	
	Single	14	17.7	
Type of family	Nuclear	47	59.4	
Type of family	Extended	03	03.7	
	joint	15	18.9	
	Urban	16	20.2	
Place of residence	Rural	62	78.4	
	slum	01	01.2	
	Hindu	26	32.9	
Religion	Christian	51	64.5	
	Others	02	02.5	
Ration card	BPL	29	36.7	
Ration Card	APL	50	63.3	
	3	07	08.8	
Number of family members	4	33	41.7	
Number of family members	5	30	37.9	
	6	09	11.4	
Number of family members	None	57	72.0	
above 65 years	At least 1	22	28.0	
Number of family members	None	34	43.0	
below 18 years	At least 1	45	57.0	
BPL – Below poverty line	APL – Above pover	ty line		

Newspapers (54%) and social media (47%) were considered as significant sources of information on COVID appropriate behaviours whereas 43% of considered discussion with family member, friends, doctor or other healthcare worker as significant source of information. Radio and NGO's were perceived as insignificant source of information by more than 20% of study participants (Table 2).

Table 2:- Source of information on COVID appropriate behaviour perceived as Significant or Insignificant.

	Source of information	Significant	Insignificant
		Frequency (%)	Frequency (%)
1	TV news	38 (48%)	10 (13%)
2	Radio/FM	21 (27%)	18 (23%)
3	Newspaper	43 (54%)	08 (10%)
4	Government agencies	35 (44%)	08 (10%)
5	NGO	23 (29%)	20 (25%)
6	Social media	37 (47%)	08 (10%)
7	Discussion with family member	34 (43%)	07 (8.9%)
8	Discussion with friends	34 (43%)	04 (5.1%)
9	Doctor	34 (43%)	13 (16%)
10	Nurses and other health care worker	34 (43%)	13 (16%)

Majority were of the opinion of greeting without physical contact for 53 (67.1%), 'Namaste' for 43 (54.4%) or waving hands 23 (29.1%) whereas 2.5% opted for greeting with physical contact. The minimum physical distance to be maintained when going to shop for essential products was perceived as 2 feet by 25 (32%), 3 feet by 14(18%), 4 feet by 9 (11%), 5 feet by 12 (15%) and 6 feet by 19 (24%) respectively. The minimum distancing norm when in a room / office with other people was perceived as 2 feet by majority 24 (30%) and 5 feet as 6.3% of study participants. The following behaviours were considered as very important in preventing spread of corona virus by more than 50% of study participants [Figure1]. Avoiding touching eyes, nose, mouth (65.8%), washing hands frequently and thoroughly (65.8% and 64%), covering nose or mouth while sneezing or coughing (72.2%) and regularly clean and disinfect the frequently touched surfaces (58.3%). Avoiding crowd, (2.5%), unnecessary travel (1.2%), seeking information from credible sources (2.5%) and seeking psychosocial support in case of stress (2.6%) was considered not at all important which is a surprising fact. Majority felt it is important not to discriminate against COVID positive patient, 10.2% felt it as slightly important and 2.5% considered it as not at all important.

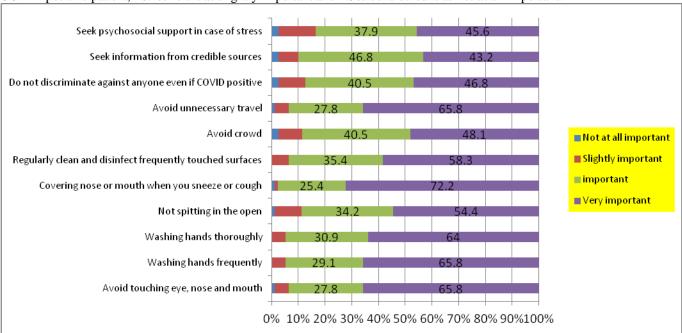


Figure 1:- Level of significance of following behaviors in spreading corona virus.

The majority of participants (67%) avoided forwarding unverified social media messages while 49% checked for credibility of these messages. Thirty seven percent of participants deleted these unverified social media messages while 9 to 11% of participants forwarded the messages to their family members and friends. Around half of the participants (54.4%) considered face cover/ mask limited the spread and protects the community at large from COVID 19 whereas 30.4% did not know to whether face cover/ mask will be useful to limit the spread of COVID 19.

Table 3:- Place of residence and significance on source of information.

Source of information	<u> </u>	Urban	Rural	P	Df	χ
TV	Insignificant	3	07	0.0003		15.7
	Somewhat significant	7	24		2	
	Significant	6	32			
Radio/FM	Insignificant	4	14	0.44	2	1.62
	Somewhat significant	6	34			
	Significant	6	15			
	Insignificant	1	06		2	4.9
News paper	Somewhat significant	7	22	0.77		
	Significant	8	35			
Cont	Insignificant	1	07	0.14		
Govt - agencies -	Somewhat significant	7	29		2	3.7
agencies	Significant	8	27			
	Insignificant	4	15	0.96	2	0.07
NGO	Somewhat significant	7	30			
	Significant	5	18			
Social media	Insignificant	3	05	0.39	2	1.84
	Somewhat significant	7	27			
	Significant	6	31			
Discussion	Insignificant	3	04	0.26 2		2.66
with family	Somewhat significant	6	32		2	
member	Significant	7	27			
Disaussian	Insignificant	3	03	0.14 2		
Discussion with friends	Somewhat significant	6	33		2	3.86
	Significant	7	27			
Doctor	Insignificant	3	10			
	Somewhat significant	5	27	0.65	2	0.8
	Significant	8	25			
Nurses and	Insignificant	3	07			
other health	Somewhat significant	5	28	0.54	2	1.23
care worker	Significant Significant	8	28			

TV was a major source of information for people residing in rural area. The difference between rural and urban area was found to be statistically significant. Other sources of information in rural and urban areas are shown in Table 3.

Tale 4:- Place of residence and use of face mask.

Place of residence	Yes (%)	No (%)	Don't know (%)	Total
Urban	9 (56.2)	04 (25.0)	03 (18.8)	16(100)
Rural	33 (53.2)	10 (16.1)	19 (30.6)	62(100)
Slum	1(100)	0	0	1(100)

Most of them from rural and urban area had knowledge on use of face mask is protective in preventing infection. Details are show in Table 4.

Discussion:-

Our findings demonstrated that the participants had adequate knowledge about COVID-19 appropriate behaviour including the modes of spread of the virus. Several findings on the associations among perception factors provided valuable insights into how public health initiatives through mass media can better protect the population's health during public health emergencies.

Socio demographic characteristics of our study participants were similar to study done in Italy among nursing students (4). As majority of females join to nursing profession, we can see female participants more in our study.

In the present study an attempt to explore the information on perception regarding mode spread of infection was showed that wearing face mask is helpful In controlling infection spread, similar findings were seen In a study done among general public also perceived that face is protective In preventing spread of infection(5). As government also made it mandatory use of face mask to control spread of infection awareness has improved among people. Repeated touching of mouth and nose was considered as a mode of spreading infection, similar findings were observed in a study done among university students (87%) also perceived it as a mode of infection spread(6).

In the present study newspaper and social media were perceived to good source for dissemination of information, similar findings were also see I study which showed internet fallowed by mass media were the major source of information on covid(6).

Limitations:

The results of this study should be used with caution for generalization as it describes the situation of nursing students in an area of Southern India, Further, self-reporting practices of questionnaire may not be effective; therefore further studies are warranted. The other limitation is that participants could give socially acceptable responses.

Conclusion:-

In the present study most of the nursing student's perceived COVID appropriate behaviour are significant in controlling spread of infection. Regarding source of information TV, newspaper and social media plays a major role in dissemination of information on COVID.

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