

A Study on Knowledge, attitude and practices towards Covid-19 pandemic among health care workers in a Tertiary care hospital in a district of Assam - a cross-sectional study.

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ABSTRACT:

Background : Covid-19, the SARS-Cov2 newly emerged disease recognized as global threat to the general population as well as to the health professionals. The disease declared as pandemic by WHO in March'11, 2020. Since then millions of people got infected , recovered and died globally.. Due to rapid spread and infectivity nature of the disease , the health professionals are most vulnerable to get infected if they have no knowledge about the SARS ,CoV2 well as as preventive measures against the disease. So, the study had been initiated to find out the knowledge, attitude and practices Covid-19 pandemic towards among the health care workers working in а Tertiary care hospital.

Methodology : The aim of the study was to assess the knowledge, attitude & practices towards Covid-19 among the health workers of Tertiary care hospital and to find out the level of association between health care workers. The study had been conducted from August 21 - October 21 at a Tertiary care hospital. The data were collected by method questionnaire containing of four parts - socio-demographic information, knowledge , attitude and practice assessing. Data were analysed by SPSS version 20. The tests applied percentages, chi-square, ANOVA and Correlation..

Results: A total of 175 HCWs were participated in this study . The knowledge among 170 (96.14%) participants had good, 5 (2.86%) had average, 171 (97.71%) had good attitude & 4 (2.29%) average , 161 (92%) good practices & 13 (7.4%) average & only 1(0.5%) practice. From ANOVA (One way) poor analysis shows that there was significant participants observed difference between educational qualification and knowledge score at the p< 0.5 level [F (4,170) = 5,140, p = 0.001]. The correlation test result shows that knowledge and attitude of the participants were at 95% of Cl (p = 0.007)

Conclusion: In this study concluded that majority of the study participants had good knowledge, positive attitude, and practice towards Covid-19. Further training and interventions have to be required for the health care workers.

Key words : Covid-19, Pandemic , Health workers

I. INTRODUCTION

The Covid-19 pandemic in India is a part of the worldwide pandemic of coronavirus disease 2019 (Covid-19) caused by SARS-CoV2. As of 27th September. 2021 according to Official figures, India has the second highest number of confirmed in the world, 33,678,786 reported cases cases of Covid-19 infection and the third Covid-19 deaths highest number of at deaths². 479.133 However these figures exhibit severe under-reporting. In India, first cases of Covid-19 were reported on 30th January, 2020 in Kerala. Since then the disease had spread all over the country very rapidly. The transmission of SARS-CoV2 can occur through respiratory secretions (directly through droplets or indirectly through contaminated objects or surfaces as well as close contacts). Because high fatality and transmission of rates towards human beings, the WHO and CDC provided different guidelines for prevention and control of Covid-19. Government of had India also taken numerous steps towards prevention and control of the disease.

Government of India had also taken numerous steps to prevent and control of Covid-19 pandemic in India. Standard recommendations to prevent infection spread includes, maintaining hand hygiene, covering coughing mouth and nose when or sneezing, avoid close contact (maintaining 6



feet distance away) with anyone showing symptoms of respiratory problems. Apart from these, various measures like suspension of all inter-national & domestic flights, nationwide lockdown, restriction of gatherings in public places, closing of schools and universities, and suspension of religious places, etc also had been initiated. India.

Worldwide, the major challenges lie in delivering proper care to Covid -19 patients and to prevent the spread of infection among health care personnel and the general public.. Previous studies have reported poor knowledge, and awareness about disease results in inefficient the management and unexpected outcome in the patients as well as the care provider³. It is documented that during the SARS outbreak in 2002, one fifth of all cases were belonged to health care sector⁴. The role of health care workers in Covid-19 emergency situation, are the main backbone of playing a great role not only in the direct patient care but also in the field of at community level to prevent the transmission of disease. Hence, regular and intensive trainings for all health-care workers is necessary to promote preparedness and efficacy in crisis management³.

Knowledge of a disease can influence paramedic's attitudes and practices, and incorrect attitudes and practice directly increase the risk of infection. Understanding paramedic's KAP and possible risk factors helps to predict the outcomes of planned behaviour⁴. In addition to knowledge, attitude and practice (KAP) also serve as important components in influencing the performance of HCW⁵. Inadequate awareness, improper practice and negative attitudes can directly affect the patient's care and increase the of infection⁵⁻⁶. Previous studies have risk shown that there is need to upgrade the existing knowledge of healthcare workers to

overcome the challenges of patient and also to management address the associated stigma and fear of acquiring the infection through occupational exposure⁷. So, the present study aims to assess the knowledge, attitude and practices on Covid-19 pandemic among the health care workers in a Tertiary care hospital.

II. MATERIALS & METHODS:

A cross-sectional study was conducted at a Tertiary care hospital among the health care workers working at the hospital from August 2021 to October 2021. Before initiation of the study, the permission had been obtained from the Head of the Institution. The data were collected by self designed pretested questionnaire distributed to the health care workers working in the health facility following by proper maintaining the covid-19 protocol. After taking the full informed consent of the participants, the study had been initiated. Those who were absent on the day of survey & un-willing to take participate in the study had been excluded from the study.

A total of 175 HCWs were participated in the study .The participants were nursing staffs, laboratory, ICU & OT technicians, pharmacists, ward boys & girls, Cleaners included for the study.

The questionnaire consists of two parts : demographical data and KAP questionnaires.

Knowledge on Covid-19 pandemic was assessed using 13 questions, each correct response was marked as 1 point and 0 for incorrect response. Similarly, for positive attitude , one point is allotted, and for negative attitude, no score was given. In practice section, for each correct answer, participants score was given as one point.

Data were analysed with SPSS 20.0 version. The tests applied mean, percentages, chi square, correlation and ANOVA (One-way) for analysis.

Variables	No of respondents (%)		
	Yes	No	No
1.Covid-19 transmitted by respiratory droplets	172 (98.3%)	3 (1.7%)	-
2.SARS-COV2 transmitted by consumption of food	64(36.6%)	101(57.7%)	10 (5.7%)
3.Covid-19 is similar with seasonal flu	162(92.6%)	13 (7.4%)	-
4.Covid-19 causes serious illness and death	169 (96.6%)	5 (2.9%)	1(0.6%)

III. RESULTS : Table no (1) : Knowledge regarding Covid-19 among the study participants:



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5.Aware about WHO recommendation for Covid-19	170 (97.1%)	4(2.3%)	1(0.6%)
6. Covid-19 is a virus infection	168 (96.0%)	-	7(4.0%)
7.Covid-19 is infected by close contact with infected	172(98.3%)	2(1.1%)	1(0.6%)
person			
8.Fever, sore throat & shortness of breath are possible	171(97.7%)	1(0.6%)	3 (1.7%)
symptoms of Covid19			
9.Isolation period is 2 weeks	170 (97.1%)	4(2.3%)	1(0.6%)
10.Specific drug therapy is available for Covid-19	99(56.6%)	72(41.1%)	4(2.3%)
11.Antibiotics are first line of treatment	134(76.6%)	37(21.1%)	4(2.3%)
12.Hand wash and use of mask helps in disease	174(99.4%)	-	1(0.6%)
prevention			
13.Patients with underlying chronic diseases are at	171 (97.7%)	-	4(2.3%)
higher risk of getting infection and death			
14.Health workers are at higher risk of infection	173 (98.9%)	2(1.1%)	-
15.Covid-19 could be fatal	155(88.6%)	13(7.4%)	7(4.0%)
16.Covid-19 vaccines are available in the market	43(24.6%)	130(74.3%)	2(1.1%)
17.Recommendations by the Govt of India/ Assam is	136(77.7%)	31(17.7%)	8(4.6%)
sufficient			
18.Washing hands reduces the risk of Covid-19	167(95.5%)	6(3.4%)	2(1.1%)
19.Following the special advice received from the	173(98.9%)	2(1.1%)	-
hospital			
20.For prevention, individual should not go out &	174(99.4%)	-	1(0.6%)
remain in houses during pandemics175(100%) -			
-			
21.Isolation/ quarantine are effective ways to reduce	175(100%)		
the spread of virus			

Table no (2) : Attitudes towards Covid-19 among the participants:

Variables	No of Respondents		
	Yes	No	No Response
1.Believe that you can prevent yourself	175(100%)	-	-
from being infected by Covid-19 by			
practicing proper social distancing,			
wearing mask & hand hygiene			
2.Avoid attending crowded places or mass	163 (93.1)	11 (6.3%)	1 (0.6%)
function, even when individual by close			
acquaintances			
3.It is necessary to follow official updates	172(98.3%)	-	3(1.7%)
about the Covid-19 infection			
4.Ready to treat Covid-19 patients	171(97.7%)	3(1.7%)	1(0.6%)
5.Think that the Govt initiatives to	149(85.1%)	19 (10.9%)	7 (4.0%)
prevent Covid-19 are adequate			
6.Think that lockdown is helping in	159 (90.9%)	12 (6.9%)	4 (2.3%)
decreasing the number of cases			
7.If getting Covid-19, will you accept	173 (98.9%)	2 (1.1%)	-
isolation in health facility			
8.Are you vaccinated with Covid-19	172 (98.3%)	1(0.6%)	2 (1.1%)
available to your health facility			
9Do you believe that vaccination is	173 (98.9%)	2 (1.1%)	-
important for prevention of Covid-19			
10.Covid-19 patients should be kept in	172 (98.3%)	-	3 (1.7%)
isolation			
11. Do you believe that transmission of	170 (97.1%)	4 (2.3%)	1 (0.6%)
Covid-19 can be prevented by washing			
hands with soap & water or use of hand			



sanitizer frequently by touching objects or surfaces?	any other			
Table No: (3) Chi square	test result of G	ender and K	nowledge, Attit	ude and Practice
Variables	\mathbf{X}^2	df	p Value	Statistical result
Gender and knowledge	2.06	1	0.151	Insignificant
Gender and attitude	1.64	1	0.201	Insignificant
Gender and practice	2.49	2	0.288	Insignificant
Staff category and knowledge	0.42	1	0.515	Insignificant
Staff category and attitude	3.45	1	0.063	Insignificant
Staff category and practice	3,91	2	0.142	Insignificant
Place of residence and knowledge	1.75	1	0.186	Insignificant
Place of residence and attitude	1.10	1	0.295	Insignificant
Place of residence and practice	7.34	2	0.026	Significant

The table no 3: Shows that there was no significant difference between gender & knowledge of the participants, between gender and attitude, and

between gender and practice of the participants. But, the place of residence and practice were found statistically significant at p=0.05 level.

Table No:4 ANOVA (One way) table of Educational Qualification and KAP :

Variables	F	F-value	P-value	Statistical result
	(Between group df			
	& within group df)			
Educational	(4,170)	5.140	0.001	Significant
qualification				
and knowledge				
Educational	(4,170)	0.296	0.881	Insignificant
qualification &				
attitude				
Educational	(4,170)	1.083)	0.366	Insignificant
qualification &				
practice				

Table No 5: Shows Scoring of Knowledge, attitude and practice among Health care workers:

Staff	Total	Total	Total attitude score	Total	Total practice score	Total
category	knowledge					
	score		Good Average		Good Average	
	Good		(%) (%)		Poor	
	Average				(%) (%)	
	(%)				(%)	
	(%)					
Nursing	93(97.89)	95	91(95.79) 4(4.21)	95	90(94.74) 4(4.21)	95
staff	2(2.11)				1(1.05)	
Other	77(96.25)	80	80(100) -	80	71(88.75) 9(11.25)	80
HCWs	3(3.75)				-	
Total	170(97.14)	175	171(97.71) 4(2.29)	175	161(92) 13(7.43)	175
	5(2.86)				1(0.57)	

Table no 6: Correlation table of KAP:

Total	Total attitude	Total practice score
knowledge	score	
score		
	Total knowledge score	TotalTotal attitudeknowledgescorescore



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Total knowledge score	Pearson correlation	1	.203	.065
	Sig (2-tailed)		.007	.390
Total attitude score	Pearson correlation	.203	1	044
	Sig (2-tailed)	.007		.565
Total practice score	Pearson correlation Sig. (2-tailed)	.065 .390	044 .565	1

The correlation results shows that knowledge and attitude of the participants were significant at 95% Cl (p 0.007) but knowledge and practice were insignificant (p = 0.390) and similarly attitude and practice were insignificant (p = 0.565).

Table IIO (7): KAT status on Covid-19 among the participants:					
Scores	Knowledge (%)	Attitudes (%)	Practice (%)		
Good	170 (97.14%)	171 (97.71%)	161 (92%)		
Average	5 (2.86%)	4(2.29%)	13 (7.43%)		
Poor	-	-	1 (0.57%)		

 Table no (7) : KAP status on Covid-19 among the participants:

Table no 7. Shown that 170 (97.14%) participants had good knowledge, 171 (97.71%) had good attitudes & 161 (92%) had good practices on Covid-19. 5 (2.86%), 4(2.29%) and 13 (7.43%) had average knowledge, attitudes & practices on Covid-19. Only 1(0.57%) had poor practices on Covid-19.

IV. DISCUSSION:

In the present study, most of the participants were in the age groups 18-29 yrs which was also observed in a study done by Sabira et al⁽¹¹⁾. The number of female participants were more in comparison to male participants . Around 93 (53.14%) participants were unmarried; similar findings also observed in a study done by Amitava Acharya et.al¹². Most of the study participants were from rural areas (50.86%) . 62.29% living in nuclear families, 79 (45.14%) had education up-to HS. The level of knowledge among the study participants were found 97.14% , attitude 97.71%, & practice 92% considered as good in this study, and 5 (2.86%), 4(2.29%) & 13 (7.43%) as average and only 1 (0.57%) had poor level of practice among the HCWs. A study done by Hope Inegbenosun et al ¹³ found that only 53.80% possessed a good level of Covid-19. The present knowledge regarding study revealed that the knowledge among male participants were 50 (100%) whereas among females found to be 120 (96%). Present study found the study that all

participants had believed on all protective measures on Covid-19, 97.7% had positive attitudes for treatment of covid patients, 98.9% had believed on isolation and 97.1% had believed on hand washing as preventive measures. Similar findings also observed by Ambika Sharma et al ¹⁴.

Present study reveals that the preventive measures practiced by all the study participants > 99% which was found to be good. In a study done by Modi PD et al reported to be 75% only.²¹ In this study , 173 (98.9%) believed that vaccination is important for prevention were as in a study done by Akshaya S Bhagavathula et al¹⁵. found only 20% of study participants believed on vaccination. Practice of social distancing in this study was found to be 92% where as 95.05% considered by Ayushi Rastogi et al ¹⁶.

V. CONCLUSIONS:

The study found that majority of Health care workers having good knowledge, positive attitude, and good practice .Further study have to be initiated to find out factors associated with the knowledge gap between the participants.

Limitations:

The study had been conducted only a smaller portion of an area. The findings can not be generalised at all.



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