A study to assess the self-protection behaviours of covid-19 among adults

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Abstract
Covid-19 has the extraordinary spreading properties and it caused by SARSCOV2. Most of the people are asymptomatic. The best way to prevent the spread of disease to be well informed about the Covid-19 and it causes and how it spreads. The individual are aware of the danger of disease and alter their behaviour and preventive measures. The main measures to require care of proper hand hygiene like hand washing, appropriate social distancing, wearing quality of mask properly, avoid touching eyes, nose, mouth unnecessarily, using tissue once you sneeze or cough, using gloves once you travelling outside. Therefore, personal protective behaviours are indicated for adolescents as essential to reduce the danger of transmission. The aim of the study was to assess the self-protection behaviours of Covid-19 among adults and the association between self-protection behaviours of Covid-19 among adults with their selected demographic variables. A quantitative research approach was conducted to the selected area at Thiruvallur using non-experimental descriptive research design. A convenience sampling technique was used to select 100 samples. The study aimed to assess the self-protection behaviours of Covid-19 among adults. The data was collected with the prior permission from the village Leader. A self-structured questionnaire was developed from the researcher to assess the self-protection behaviours of Covid-19 among adults with consist of 34 questions. Descriptive and inferential statistics was used to analyse the data. The sample characteristics are described by frequency and percentage. Chi-square test was used to assess the self-protection behaviours of Covid-19 with selected demographic variables. The result revealed that extent of self-protection behaviours of Covid-19 among adult shows that 98% had moderate self-protection behaviour and 2% had good self-protection behaviour. The study findings revealed that, the extent of self-protection behaviour of Covid-19 among adults were moderate and lack of awareness and practice will improve the self-protection behaviour to promote health and prevent spread of the disease in enhancing behaviour related to updated trends with regard self-protection behaviour of Covid-19.

Keywords: Self-protection behaviours, covid-19, adults

Introduction
Corona virus disease (Covid-19) is an infectious disease caused by SARS-COV-2. Most people infected with the Covid-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. The best way to prevent the spread of transmission is to be well informed about the Covid-19 virus, the disease it causes and how it spreads [1]. Protect yourself and others from infection [2]. The Covid-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it’s important that you also practice respiratory etiquette [3]. Vaccines save millions of lives each year. Vaccines are preparing the body’s natural defences the immune system to recognize and fight off the viruses and bacteria they target. After vaccination, if the body is later exposed to those disease causing germs, the body is immediately ready to destroy them, preventing illness. There are several safe and effective vaccines that prevent people from getting seriously ill or dying from Covid-19. In addition to the main preventive measures of keep a distance of at least one meter between yourself and another person, covering while cough or sneeze in your elbow, frequently cleaning your hands, wearing a mask and avoiding poorly ventilated rooms or opening a window [4]. Younger people and younger adults are seems to be less risk of affecting corona virus as they have adequate immunity [5]. Older people and those with underlying medical problems like cardiovascular diseases, diabetes, chronic respiratory disease and cancer are more likely to develop serious illness [6]. An appropriate social distancing is the only effective tools to reduce the spread of Covid-19 in the absence of effective therapeutics [7]. Social distancing or maintaining physical distancing of at least 2 meters or 6 feet is the one way to reduce the virus transmission which spreads throughout respiratory droplets [8]. Wearing face mask as means preventing and controlling the infectious disease the advantage it is simple operation [9]. Mask should Covers both-your nose, mouth and chin. When you take off a mask, store it in a clean plastic bag, and everyday either Wash it if
it’s fabric mask, or disposal of a medical mask in trash bin. Don’t use masks with valves [10]. The another important recommendations are to practice the isolation for people who are ill or infected, the quarantine for those who are the peoples are suspected as exposed, and social distance for all the people [11].

Avoid the overcrowded area and eating outside food centres [12]. Rapid respiratory transmission of the disease necessitates the practice of self-protection behaviours and strict respiratory precautions for its prevention. Physical distancing, good respiratory hygiene and hand washing are important examples of self-care actions you can take every day to protect against Covid-19, and there are many other areas in which self-care can make a difference to your health and wellbeing during the Corona virus pandemic, including for sexual and reproductive health. Self-protection behaviour is an essential individual means for resisting infection. Public health actions to prevent transmission are crucial in slowing the spread of infection. Using public transport and whenever you go outside using gloves it protect your hand from the infection. In absence of highly effective drugs and vaccines and abundant medical resources, many measures are used to manage the infections rate and avoid exhausting limited hospital resources [13].

Materials and Methods
A quantitative research approach was conducted at the Manavalanagar at Thiruvallur using non-experimental descriptive research design. A convenience sampling technique was used to select 100 samples. The purpose of the study was to assess the self-protection behaviours of Covid-19 among adults. The data was collected with the prior permission from the village Leader. A self-structured questionnaire was developed from the researcher to assess the self-protection behaviours of Covid-19 among adults with consist of 34 questions. Descriptive and inferential statistics to analyse the data. The characteristics of the sample are described by frequency and percentage. Chi-square test was used to assess the self-protection behaviours of Covid-19 with selected demographic variables.

Results and Discussion
Section A: Demographic characteristics
The most of the adults in rural area 29% were aged between 26-36 years, 55% were female, 41% had primary education, 81% were coolie and had no chronic disease. This finding was supported by Guzek. D (2020) the study was conducted to analysis of gender-dependent personal protective behaviours in a national sample among adolescent’s in Covid-19 experience. The present study aimed to assess the gender dependent hand hygiene and personal protective behaviours. The study was conducted in 2323 secondary school students were chosen based on the random quota sampling procedure. The results showed the females secondary school students exhibited a higher level of knowledge on hand hygiene and personal protection, as well as better behaviours, compared to males. However, irrespective of gender, some false beliefs and improper behaviours were observed [14].

Section B: Percentage distribution of level of self-protection behaviors among adults

![Fig 1: This above picture shows that distribution level of self-protection behavior of Covid-19 among adults in rural area at Thiruvallur.](image)

The level of self-protection behaviors among adults in rural area that 98% had moderate self-protection behavior and 2% had good self-protection behavior. These findings were supported by a similar study conducted by Kyaw S. Mya, Aye S.M (2020) Awareness, perceived risk and protective behaviours of Myanmar adults on Covid-19. The study results were out of 584 respondents, 84% had low knowledge level. Risk perception level towards Covid-19 was moderate to high. Only 22% reported good protective behaviours. Multivariable analysis revealed that knowledge score was significantly and positively influenced the protective behaviours. The study concluded that community has no enough knowledge and inadequate protective behaviours to prevent Covid-19 [15].

Section C
The level of self-protection behaviour of Covid-19 among adult were moderate self-protection behaviour. It shows that none of the demographic variables are statistically significant association with level of self-protection behaviour among adults. These findings were supported by a similar study conducted by Hamed Alzoubi (2020) the study was conducted to Covid-19 knowledge, attitude and practice among medical and non-medical university students in Jordan. The aim of the study was to assess the knowledge, attitude and practice of university students. The cross-sectional study and self-structured questionnaire involving a total number of 592 students. No significance difference was noticed between medical and non-medical colleges. Thus, there was need for
more detailed and directed measures and awareness campaigns to improve the knowledge, attitude and practice in some critical aspects to contain the virus [16].

Conclusion
The researcher interested to investigate the self-protection behaviours of Covid-19 among adults in rural area at thiruvallur. Findings of the present study revealed that, the level of self-protection behaviour of Covid-19 among adults were moderate and lack of awareness and practice on self-protection behaviour of Covid-19 and it will improve the self-protection behaviour to promote health and prevent the disease in enhancing behaviour related to updated trends in regards self-protection behaviour of Covid-19. Which can be provided through pamphlet distribution, role play, video assisted learning, conducting classes regularly in the rural area.

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Author’s contribution
All the authors actively participated in the work of study. All the authors read and approved the final manuscript.

Conflict of Intrest
The authors declare no conflict of interest.

Reference