Assessment of COVID-19 Training for NYKS Volunteers in Rajasthan

By

Neeraj Mishra

Dissertation submitted in partial fulfillment of the requirements of the degree

MBA Hospital and Health Management

Academic year, 2018-2020

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No. F 2 (153) NHM/SPM/2020/317 Dated: 10/06/2020

This certificate is awarded to

Mr. Neeraj Mishra

Pursuing MBA-Hospital & Health Management from IIHMR University, Jaipur

In recognition of having successfully completed his

Dissertation & Internship in the department of

National Health Mission, Rajasthan

and has successfully completed his Project on

Assessment of COVID-19 training in NYKS Volunteers

Date : 11th March to 10th June, 2020

He comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning.

We wish him all the best for future endeavors.

Special Secretary
Medical, Health & Family Welfare
Mission Director, NHM
Rajasthan

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY THE SCHOLAR

This is to certify that the dissertation titled **Assessment of COVID-19 training for NYKS volunteers in Rajasthan** is and submitted by **Neeraj Mishra**, Enrollment No: **IIHMR-U/01/2018-20/0782** under the supervision of **Dr Daya Krishan Mangal, Dean Research, IIHMR University, Jaipur** for award of **MBA in Hospital and Health Management** of the IIHMR University. I conducted the study at National Health Mission (NHM), Rajasthan during the period from **March 11 2020** to **June 10, 2020.** The study is my original work and has not formed the basis for the award of any degree, diploma, associateship, fellowship, titles in this or any other institute or other similar institution of higher learning in India.

Neeraj Mishra
MBA-Hospital & Health Management

ABSTRACT

Background

In India first case of COVID 19 reported on January 30 in Kerala. The number of COVID 19 cases head to three cases by February 3 all were students who had returned from Wuhan, China.

Rajasthan is among the states of the country which have conducted the highest number of tests to detect COVID infection and have higher per capita ratio of COVID tests than the national average. The State government is proposing to further step up its testing capacity to 10,000 tests per day. This study all about the knowledge and perception assessment of COVID 19 in NYKS volunteers, because during the time of COVID 19 Nehru Yuva Kendra Sangathan is playing an important role in rural India.

Methodology

It was a descriptive cross-sectional study using an online survey method. NKYS Volunteers from two districts were invited to take part in the study. A total of (N=60) responses were received. Microsoft Excel was used to obtain descriptive statistics and graphs.

Results

Majority of the participants were male (n=49, 87.5%). Most of the participants agreed that they should maintain a social distance of 1 meter as a protective measure against COVID-19 (n=37, 66%). Sanitization was accepted only by 37% of the studied population.

Conclusion

In conclusion, our findings show that Social media is one of the main channels updating the COVID-19 information, out of total volunteers 90% of them know the common symptoms of coronavirus, which are breathing difficulties, fever, dry cough, diarrhea and in some cases muscle pain, 48% of volunteers know about available test of COVID 19 which show lack of knowledge about corona virus disease. Also during the lock down all the NYKS volunteers play an essential role while providing health care services and health facility, even during the lockdown period all the volunteers distribute mask, food pack, sanitize the village & city.

Key Words

Training, COVID-19, Infection, Arogya Setu, Isolation.

ACKNOWLEDGEMENT

The internship and dissertation opportunity I had with National Health Mission (NHM), Rajasthan and UNICEF -The **United Nations Children's Fund**, Rajasthan was an excellent chance for learning and professional development. I would like to express my sincere gratitude to all those who provided me with the opportunity to work on the study, during Internship. It acquainted me with the practical aspect of the course and implementing of the theory in the real-life situation.

I would like to express my sincere and heartfelt thanks to Shri Naresh Thakral, Mission Director, Dr. Jalaj Vijay, State Program Manager, National Health Mission, Rajasthan for permitting to work with the UNICEF team in this crucial time of pandemic of COVID 19. I am also grateful for all the facilities provided for the study. Their constant support and supervision enabled me to keep on the correct path and allowing me to carry out my project at the esteemed organization.

I am grateful to UNICEF, Rajasthan and NYKS (Nehru Yuva Kendra Sangathan) for their constant and valuable support.

A Special thanks to Mrs. Manjaree Pant, UNICEF for providing me Internship and Dissertation opportunity in the organization. I would like to acknowledge with much appreciation the crucial role of the staff, namely Dr.Riyaz Khan, Unicef and Mr. Bhuvnesh Jain, NYKS Rajasthan, for providing me relevant and required information to complete the study.

I would also like to express my thanks and regards to Dr. Daya Krishan Mangal, Professor and Dean research, IIHMR University, Jaipur for being such an excellent guide & providing unfailing support and assistance. I extend my regards to Dr. P.R. Sodani, Proctor & Dean, Academics, IIHMR University, Jaipur, for his administrative guidance.

Last but not least, I thank my family & friends for their constant support and for keeping me motivated throughout my journey.

Sincerely,
Neeraj Mishra
MBA-HM23

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LIST OF ABBREVIATIONS

ANC	Antenatal care
AIIMS	All India Institute of Medical Sciences
ANM	Augmented Nurse Midwife
ASHA	Accredited social health activist
BMI	Body mass index
CHC	Community health center
COVID-19	Corona virus disease 2019
HRP	High risk pregnancy
IA	Information Assistant
MoHFW	Ministry of Health & Family Welfare
NFHS	National Family & Health Survey
NHM	National Health Mission
NRHM	National Rural Health Mission
NUHM	National Urban Health Mission
NYKS	Nehru Yuva Kendra Sangathan
PHC	Primary health center
UNICEF	United Nations Children's Fund
WHO	World Health Organization

About NYKS

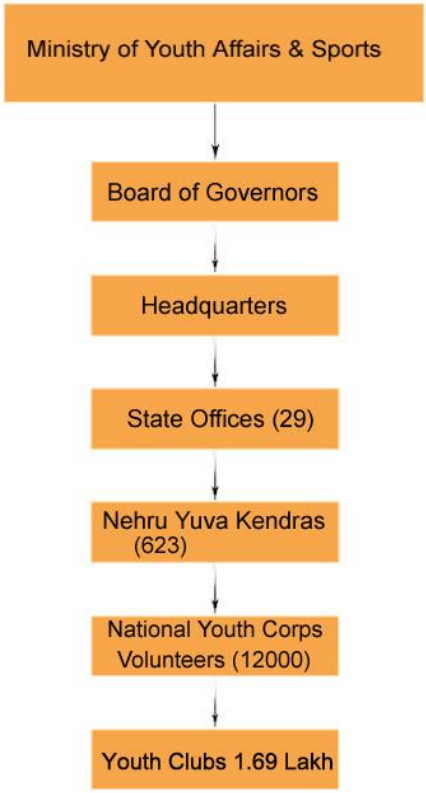
Nehru Yuva Kendras (NYKS) was established in 1972 to provide rural youth with a route to engage in the nation-building process and provide opportunities for the growth of volunteers personality and skills.

NYKS is the largest ground level youth organization in India. It guides the power of youth on the principles of voluntarism, self-help and community participation.

During the **COVID 19** pandemic, NYKS volunteers play an essential role at the community level with the guidance of UNICEF and NHM Rajasthan by giving training to villagers how to prevent safety major in the pandemic of COVID-19.

In the time period of lock down (starting March 25 till May 31 2020) volunteers of NYKS Rajasthan are playing an important role, by providing people essential item, including sanitizer and mask.

Structure of NYKS Ministry of youth affairs & sports Government of India.



INTRODUCTION

China has told the World Health Organization of cases of unknown agent pneumonia in Wuhan city, Hubie Province. A novel coronavirus was reported by the Chinese authorities to WHO as the cause of the disease on January 7, 2020 and was temporarily named 2019-nCoV'

Disease	COVID-19
Virus strain	SARS-Cov 2
Location	Rajasthan, India
Index case	Jaipur, Jodhpur
Confirmed cases	6,015 (20 May 2020)
Active cases	2,464
Recovered	3,404 (20 May 2020)
Deaths	147 (May 20, 2020)
Territories affected	32 districts

Coronavirus are a large family of viruses that has the potential of causing illnesses that differ from common cold to more severe diseases. A novel Coronavirus (nCoV) is a new strain not previously identified in humans. The new virus was later called COVID-19

On January 30, India disclose its first case of COVID-19 in Kerala. By February 3, the number of confirmed cases of COVID 19 headed to three cases, all those cases were among the students who had returned from Wuhan, China. On March 4, 22 new cases came into light along with those of an Italian tourist group with 14 members who had been infected.

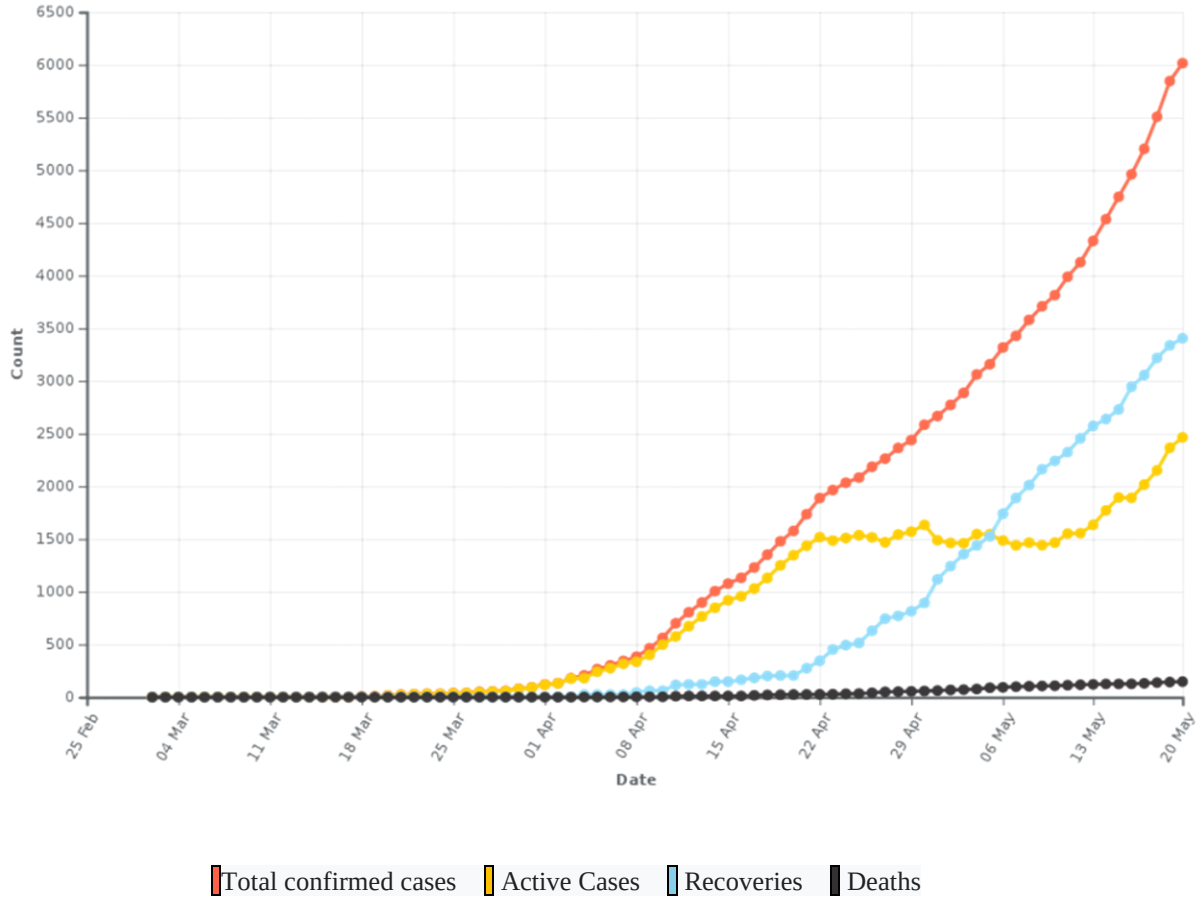
The spread of virus came into light during March 2020, after lots of cases being reported all over the country, most of which were linked with the people who have travelled through affected countries. As per reports one of the first case of Covid Disease to be reported as a 76- year old man returning from Saudi Arabia on March 12.

On March 2, 2020 Rajasthan announced its first reported case of COVID-19 pandemic. As of May 21, 2020 a total of 6,098 cases including 150 deaths and 3,421 recoveries was shared by The Rajasthan Health Department. Jaipur has been the worst of all the thirty-two affected districts in the state.

Rajasthan has managed to be among the states that have the capacity to manage te highest number of tests and have higher per capita ratio of tests o perform compared to the national average.

The State government is looking forward further to maximize its testing capacity to 10,000 tests per day. Out of 14 government medical colleges, Seven conduct RT-PCR test in the state including AIIMS Jodhpur , with the availability of an automatic nuclear extraction machine only at SMS Hospital. The government had already ordered PCR machines for all 33 districts and automatic RNA extraction machines for remaining seven government medical colleges of the state.

Total confirmed cases, active cases, recoveries and deaths of COVID-19 in Rajasthan (till May 20, 2020).



LITERATURE REVIEW

Study of Literature is a brief of the research topic of interest, often prepared to put a research problem in the context as the basis for an implementation project. A literature review play a role for the research and can also inspire new research ideas. A literature review provides a basis for future analysis, justifies the need for copying, throws light upon feasibility of the study, and indicates constraints of data collection and help to relate findings of one another.

Literature 1

(A study of john Hopkins university, Available from URL: https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus)

This research discusses COVID-19 symptoms including : Cough, Flu, Shortness of breath, Muscle aches, Sore throat, Unexplained loss of taste or odour, Diarrhoea, Headache. COVID-19 can in some case cause severe respiratory problems, Kidney failure or even death. And as we know that coronavirus is spread through droplets released into air when a person sneezes or coughs.

A specific treatment of coronavirus doesn't exist as of now. People who become ill should be treated with measures of support, those that relieve symptoms. Additional treatment options may exist for serious cases like research drugs and therapeutics. Symptoms typically occur in people within 14 days of virus exposure.

Literature 2

(Lancet: A study on Innovative strategies to support physical distancing among individuals with active addiction

Published online May 27, 2020 (https://doi.org/10.1016/S2215-0366(20)30231-5)

Populations at specific risk include many of the most marginalized segments of the society- the prisoners, long-term patients, minorities and people with drug abuse disorders considering the fact that death rates are high due to the opoid overdose, these groups are now caught under two simultaneous health crisis. This group is additionally hindered in public health measures to control the spread of virus such as Social distancing due to the social and structural issues like poverty,

unstable jobs, Marginalization and home lessness apart from the higher comorbidity that can result in worse outcomes in case they get infected.

Literature 3*:* (Age-structured impact of social distancing on the COVID-19 epidemic in India) Rajesh Singh, R. Adhikari (https://arxiv.org/abs/2003.12055)

As per the study the outbreak of the novel coronavirus, COID 19, has been declared a pandemic by WHO. The social contact structures critically determine the spread of infection and in the absence of vaccines, the control of these structures by large social distancing measures appears to be the most effective means of mitigation.

To study the progress of the COVID-19 epidemic in India they made use of an age structured SIR model with social interaction matrices obtained from surveys and Bayesian imputation. Based on case data, age distribution, and social contact structure the basic reproductive ratio and its time dependent generalization was computed. Investigation of impact and efficacy with durations of social distancing measures at workplace, closing of schools and lockdown was done. And it was found that a three-week lockdown seemed insufficient to prevent insurgence and protocols of sustained lockdown with periodic relaxation was suggested along with a forecast of reduction in age structured morbidity and mortality as a result of this lockdown.

Literature 4

(COVID 19 in INDIA: Strategies to combat from combination threat of life and livelihood) Journal of microbiology, immunology and infection.

(https://www.sciencedirect.com/science/article/pii/S1684118220300840)

Worlds pandemic threat COVID-19 mitigation is crucial to the human life and for reducing distortion of livelihood The ICTV (International Committee on Taxonomy of Viruses) labelled SARS-CoV-2 (SARS- Severe Acute Response Syndrome) virus induced corona virus disease (COVID-19) was outbreak from Wuhan, China from this January Similar kind of outbreak was happened previously with different

pathogens named SARS-CoV (2003) and Middle East Respiratory Syndrome Coronavirus-MERS-CoV (Since 2015, centered on Arabian Peninsula) However, SARS-CoV-2 virus promoting respiratory problems and ease of spreading (through air) will make severe life threats than the other, 'hence Corona virus is belonging to Corona size is 65–125 nm diameter After outbreak from china, more than 3,39,645 peoples have been affected with COVID-19, and still it continuous on Current situation, without vaccination world is urged to do some of the major mitigation steps for resolve and restrain the COVID-19. Based on the learning from international government initially announced to maintain social distancing which would not affordable by daily wages people In this condition, the gradual increase of corona cases have observed, due to that state and central government has made lot of restrictions for social gatherings.

Literature review 5: *Arogya setu application by Ministry of electronics and information* *https://en.wikipedia.org/wiki/Aarogya_Setu*

The Ministry of Electronic and information technology launched a smart phone application called Aarogya Setu to help in "contact tracing and containing the spread" of COVID-19 pandemic in the nation. The World Bank appreciated the use of such technology to control the pandemic. French cybersecurity expert going under the alias 'Elliot Alderson' tweeted that security vulnerabilities in Aarogya Setu allowed hackers to "know who is infected, unwell, [or] made a self-assessment in the area of his choice". He also gave details of how many people were unwell and infected at the Prime Minister's Office, the Indian Parliament and the Home Office. This followed IT Minister Ravi Shankar Parshad statement that the app is "absolutely robust, safe and secure". The economic time pointed out that a clause in the app's Terms and Conditions stated that the user "agrees and acknowledges that the Government of India will not be liable for any unauthorized access to your information or modification thereof". In response, several software developers called for the source code to be made public.

Literature review 6: (Google scholar) University of Birmingham, Response inquiry on the impact of coronavirus disease, and Volunteering as means of meeting skills needs in health service and improving employability

https://blog.bham.ac.uk/cityredi/wp-content/uploads/sites/15/2020/05/Inquiry-response_v4-003.pdf#page=77

The frequency of volunteering distinguishes its effects on employment outcomes. The results vary by populations too. There is less proof of work satisfaction, and volunteering tends to have negligible or even adverse effects on wage growth.

NHS Volunteer respondents who are required to perform basic but critical non-clinical tasks including serving as drivers, distributing food and medications to self-isolation and making phone calls to elderly and the one at high risk.

This can be considered as public activities that have been associated with improving employability of individuals seeking work.

Most people interested are likely to be individuals who are not inspired or ignorant of how employers can view such practices as having transferable job skills. To those who want to return to work after volunteering, it is crucial that job coaches and advisors working with them recognize concrete examples that illustrate skills gained from their NHS volunteer experience. Group of clinicians who consider returning to the National Health Survey (NHS). This is straightforward for them who have maintained their registration in order to practice with their relevant professions. England has issued new guidance regarding volunteer recruitment and management. The advice is given by NHS staff responsible for managing volunteers and includes risk. Reduction and redeployment of staff into new position that reduce their future COVID-19 exposure. Apart from that it covers way to respond new requests and on-boarding of new volunteers, guidance recommended that NHS employers took more holistic approach towards assessing risks, which includes taking checks by voluntary sector organization such as St Johns Ambulance Brigade.

There are two recommendations particularly relevant in terms of entry into work and employability. The first that is NHS employers consider offering existing volunteers who are familiar with the NHS temporary paid positions being created in response to COVID-19. The second is that managers make sure that volunteers are aware they can use the NHS e-learning platform to develop their skills contributing to future employability.

METHODOLOGY

Aims of the study

To assess the knowledge and perception about COVID-19 of the NYKS volunteers

Specific Objectives:

1. Effectiveness of training on COVID 19 of NYKS volunteers.
2. To assess the knowledge on the symptom of COVID-19
3. To check the perception about COVID-19 while using the mask and sanitizer.

Study Design

This is a descriptive cross-sectional study using an online survey.

Study Population & Setting

NKYS Volunteers were the respondents of the study. All the NYKS volunteers from Jaipur & Jodhpur were enrolled in the study. All together 60 NYKS volunteers in both the district were recruited for the study.

Study Tool

A research created a google survey with the help of experts dealing with these volunteers. The study too was translated in local language (Hindi) for the convenience of the study subjects. The first part of the questionnaire collected socio-demographic information-age, sex, etc. The other part of the questionnaire consisted of questions related to various aspects of COVID-19 such as preventive and precautionary measures.

Ethical Approval

NHM Rajasthan approved the study. The importance of the research study was explained to the participants verbally on telephone before sending them the survey links. Informed consent was secured and confidentiality was maintained during the entire course of study.

Data Collection Process

The researcher administered the questionnaire to the volunteers through a link in their WhatsApp group. A reminder was given by the researcher to fill the survey on time.

Data Analysis

Data was entered in MS Excel. Both numerical & categorical variables were summarized using frequency, percentages & presented in suitable charts.

Type of Research

This study is based on primary data collected by circulating a google form link through WhatsApp into their groups of NYKS volunteers in Jaipur and Jodhpur.

RESULTS

As the result of the study show the positive impact of the training which were held in the month of April. Where the hotspot city of Rajasthan was taken, here all the figure belongs to the questioner which were asked to all the target volunteers of NYKS. And all the figures all following.

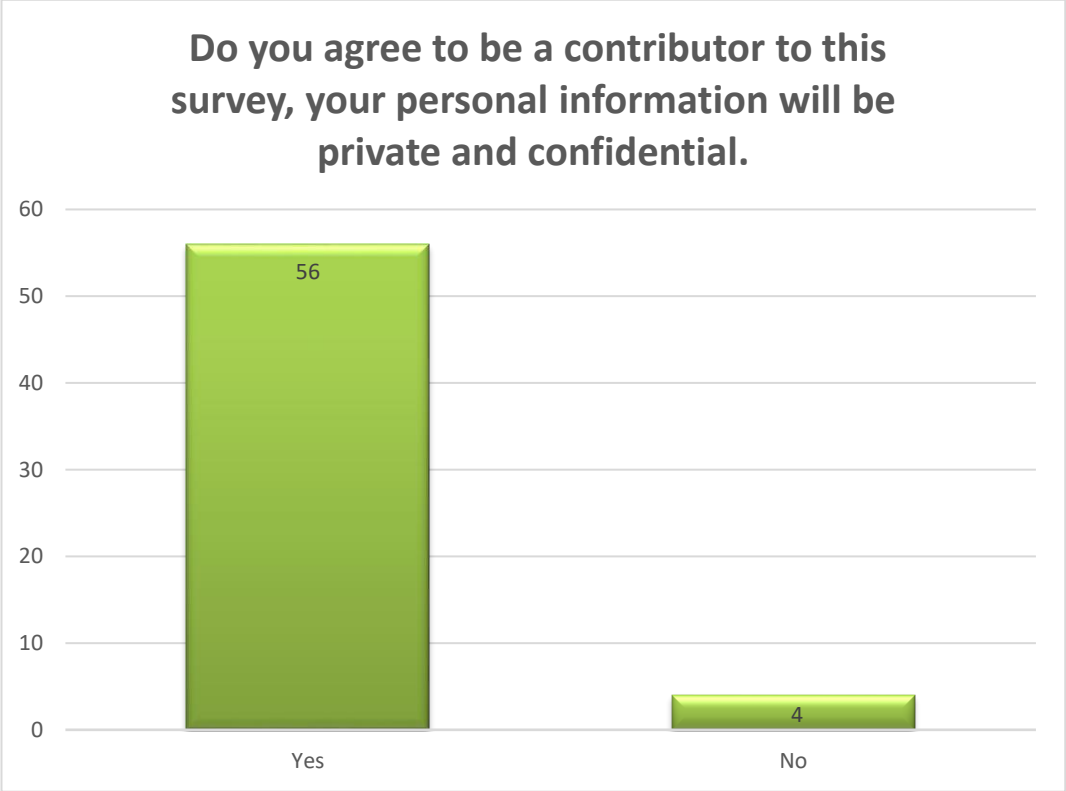


Fig 1: show the consent and the contribution of the volunteers total number of responses were 60, but 56 volunteers consented to be the part of the study and 4 NYKS volunteers refused. Thus, the final number respondents were 56.

Fig 2

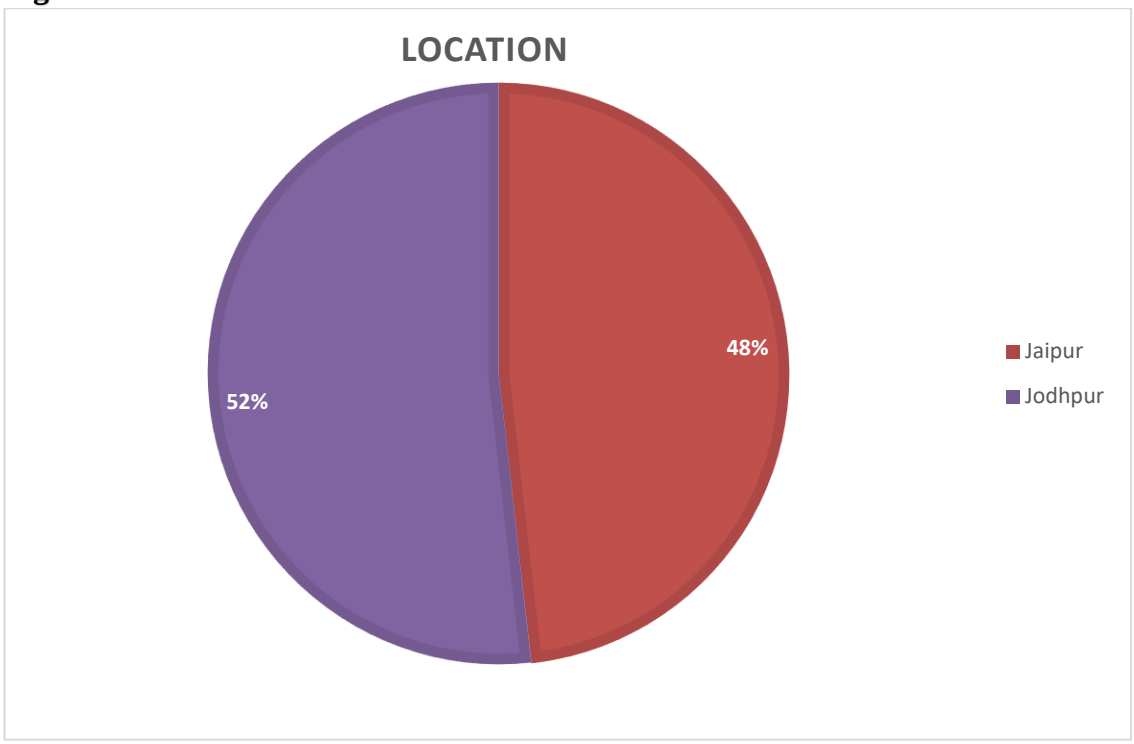
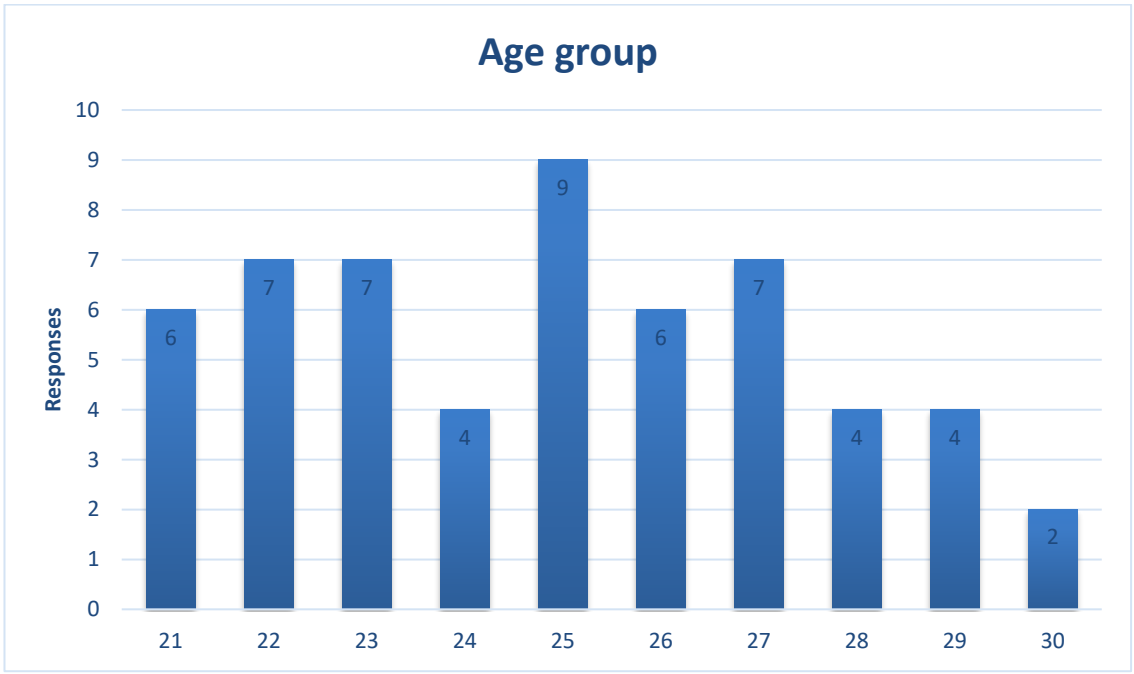


Fig 3



Both the fig. show that 52% of volunteers are from Jodhpur and 48% of them are from Jaipur and the age group of the volunteers are 21 to 30 in which maximum are of age 25.

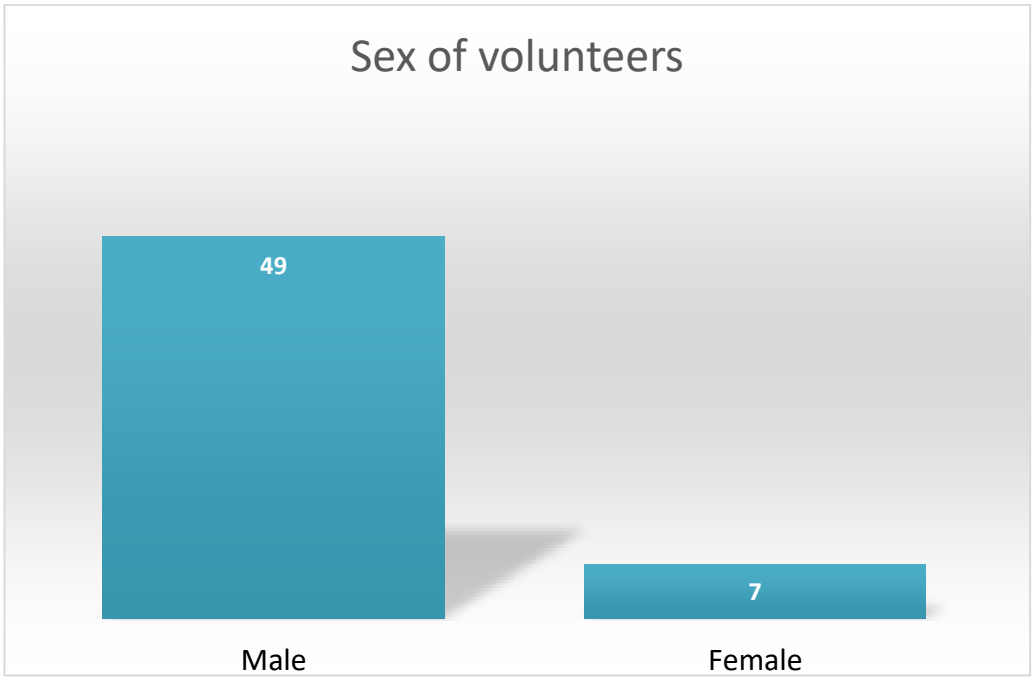


Fig show the age group of the volunteers 21-30 in which age group of 25th is highest which show that the maximum number of volunteers are youth , and Fig 2nd show the gender in which 87.5% are Male and 12.5% are Female which show that the maximum number of volunteers are male;

Fig 5 shows the source of information from where the maximum volunteers have heard about novel coronavirus. The maximum volunteers responded that they got the information from social media and second maximum got information from health care workers and their family members. This question shows that health care workers, community leaders and the religious leaders play an important role as source of information on the pandemic of novel coronavirus.

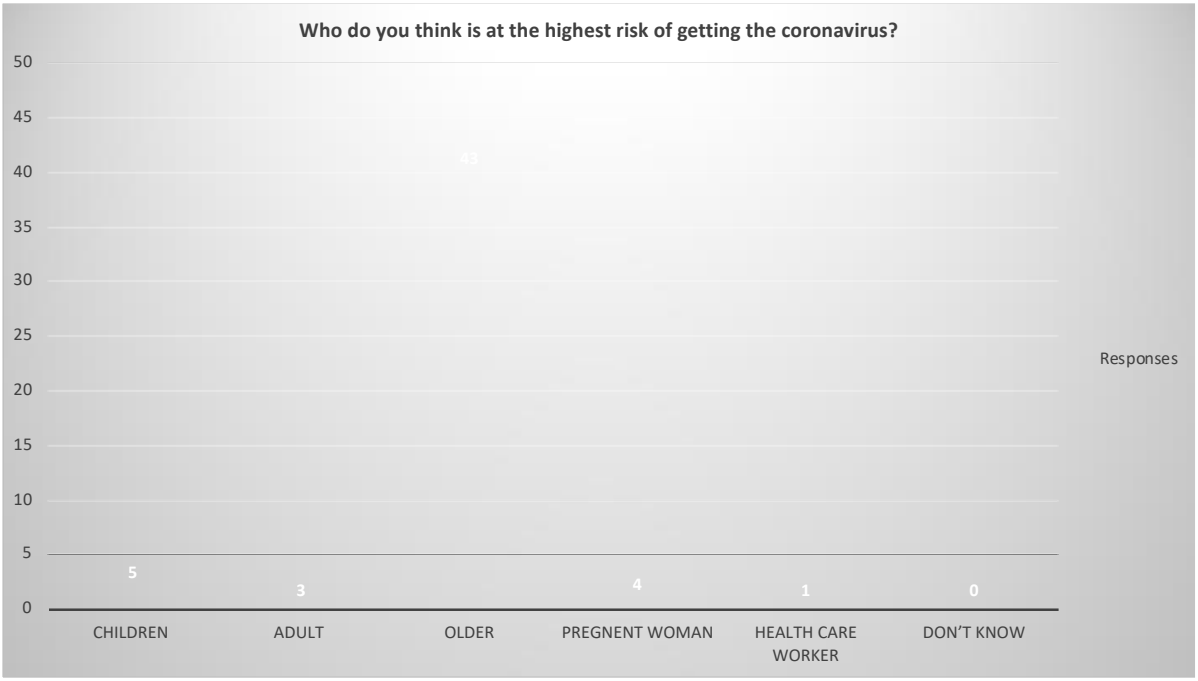


Fig 6: Shows that according to the NYKS volunteers understanding the older population is at highest risk than children and pregnant women, Responses show that adults and Health care worker are at minimum risk. But according to the study health care worker are in highest risk than the older age group.

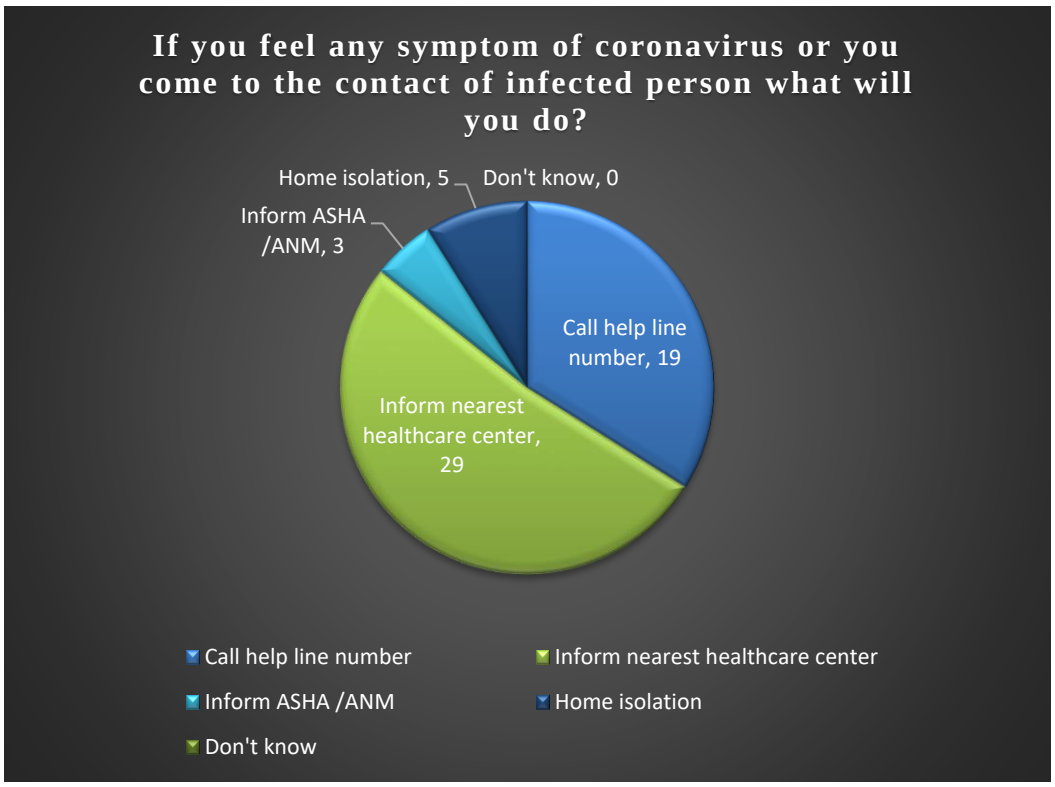


Fig 7: Show the perception of NYKS volunteers which tell if any of them, feel any symptom of coronavirus or they come in close contact of an infected person what they will. According to responses, the pie diagram above show that maximum volunteers answers that they would inform nearest healthcare center followed by 19 volunteers said that they will call the helpline number, 5 of them agreed with the home isolation without any treatment, and finally 3 of them said they will inform ASHA and ANM of their nearest health centre.

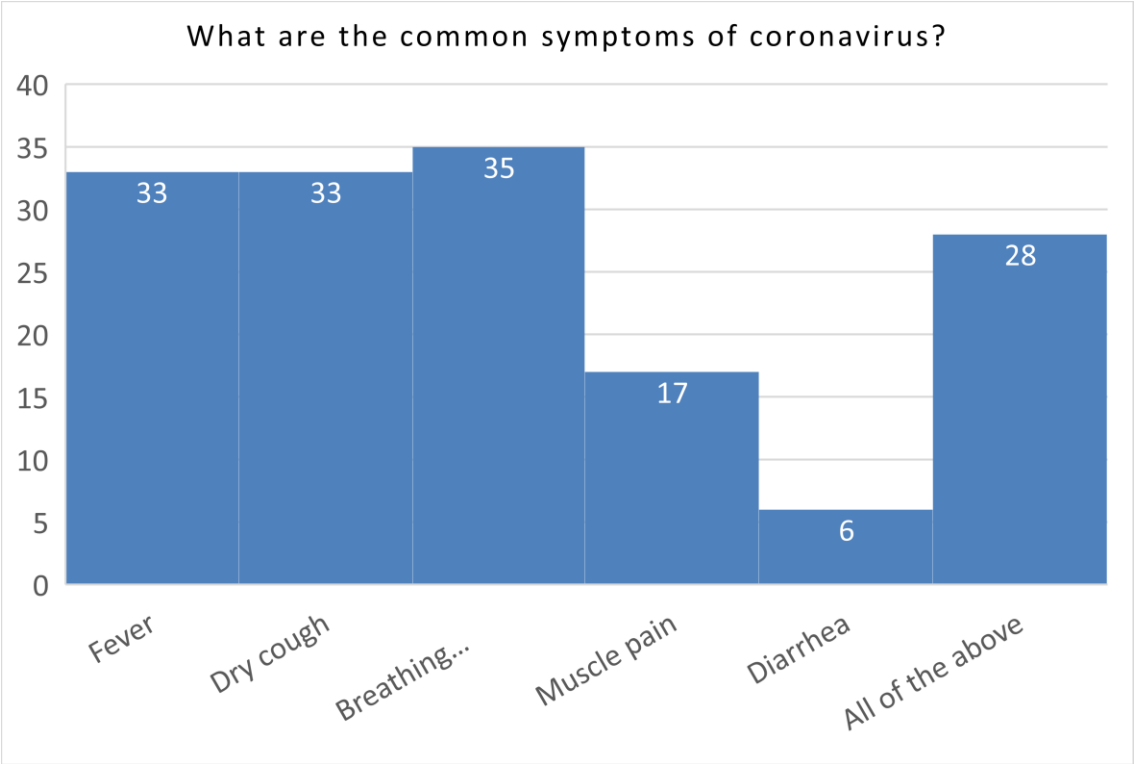


Figure 8: Shows response to question on the knowledge about coronavirus common symptoms.

Where 90% volunteers know the common symptoms of coronavirus. which are breathing difficulties, fever, dry cough, diarrhea and in some cases muscle pain.

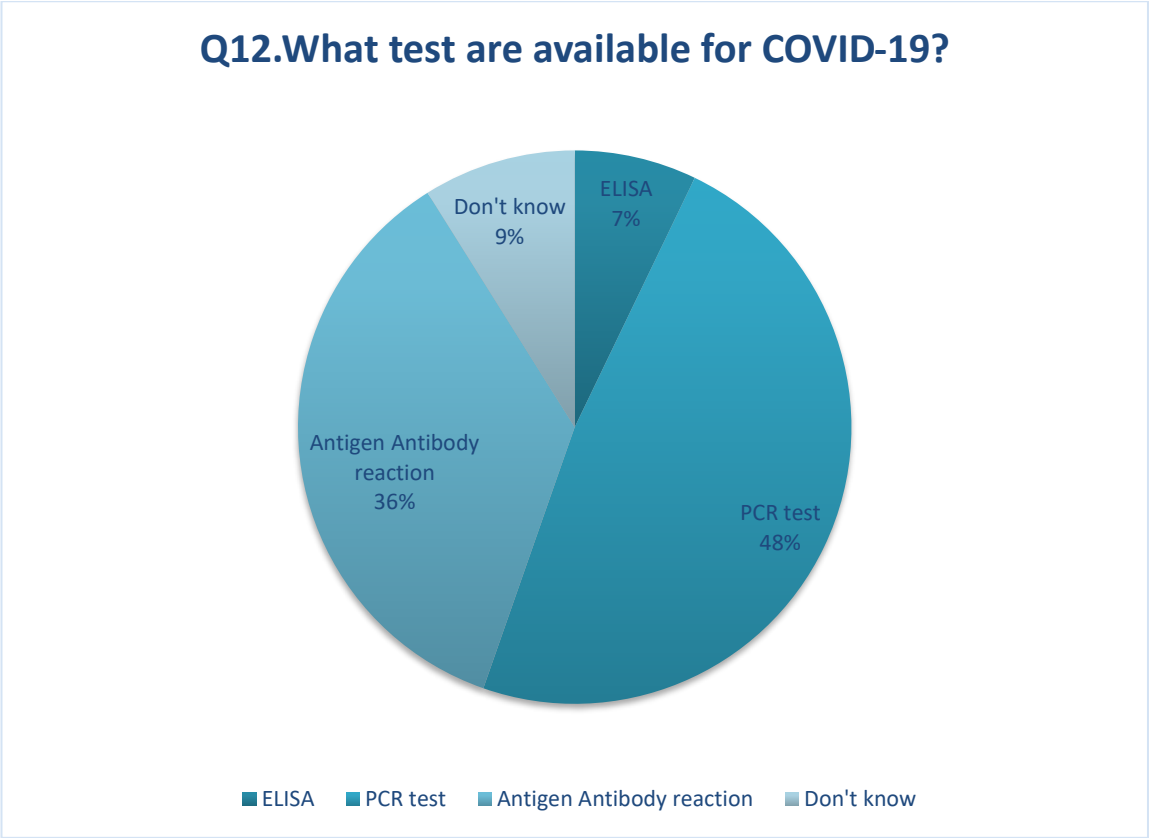


Figure 9: What test is available for covid-19?

According to the Pie diagram 48% of volunteers mark PCR test, followed by 36% volunteers tell Antigen Antibody reaction is available test for the covid-19, 7%of volunteers mark in ELISA test, and 9 % of volunteers don't know about the available test for COVID-19.

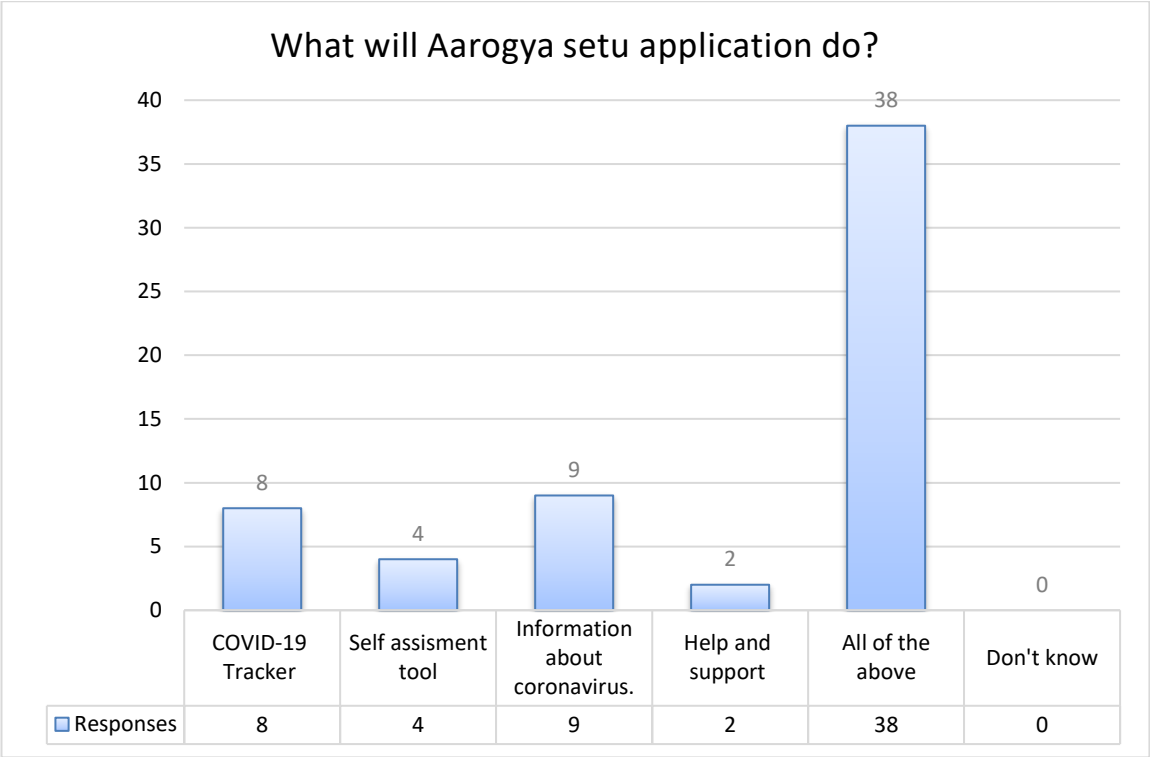


Figure 10:

All the volunteers are aware about the Arogya setu application. which show 100% of the volunteers mention the option all of the above. which shows that Arogya setu apps functional feature are it's a tracking device of covid-19, also it's a self-assessment tool of covid19. According to the volunteers Arogya setu is a help and support tool and it also provides the information about coronavirus disease.

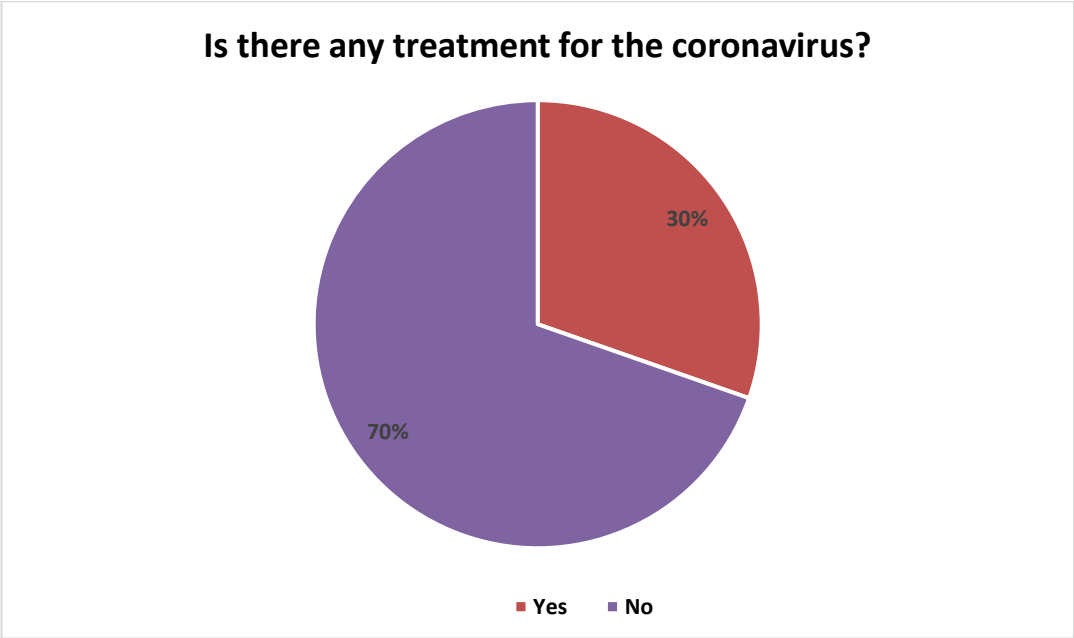


Figure 11: Depicts responses on availability of treatment for COVID-19

According to the NYKS volunteers responses, 30% of them believe that a treatment of coronavirus patients is possible while 70% of them said that there is no treatment of novel coronavirus. But fact is that there is no specific treatment and no vaccine against COVID 19.

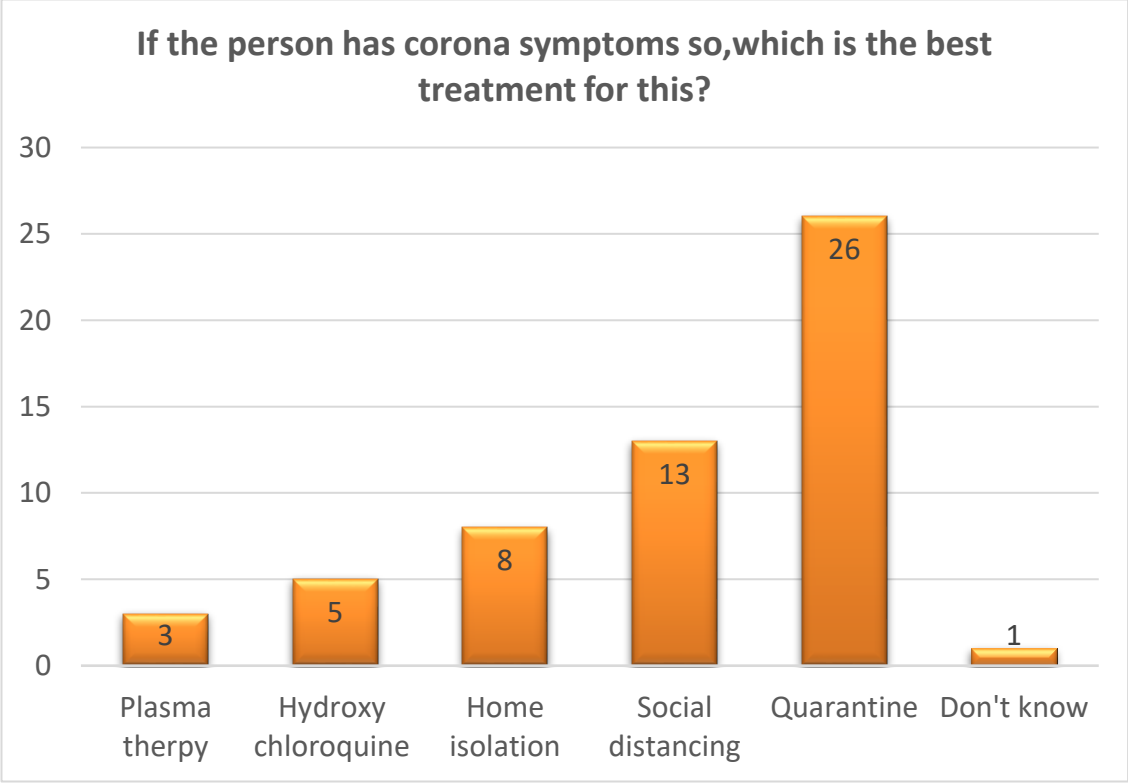


Figure 12: Shows the perception of the NYKS volunteers on the best treatment for patient of COVID 19.

This Figure is contradiction of figure 10, where 70% of volunteers told that there is no treatment of coronavirus. According to this 26 of them mention that quarantine is the best treatment, then 13 of them said social distancing, 8 told home isolation, 5 of them told Hydroxy chloroquine and 3 of them mention plasma therapy is the best treatment for corona asymptotic person.

But according to a recent study, there is no any specific treatment for COVID 19, However some drugs are used for treatment of COVID 19 patient.

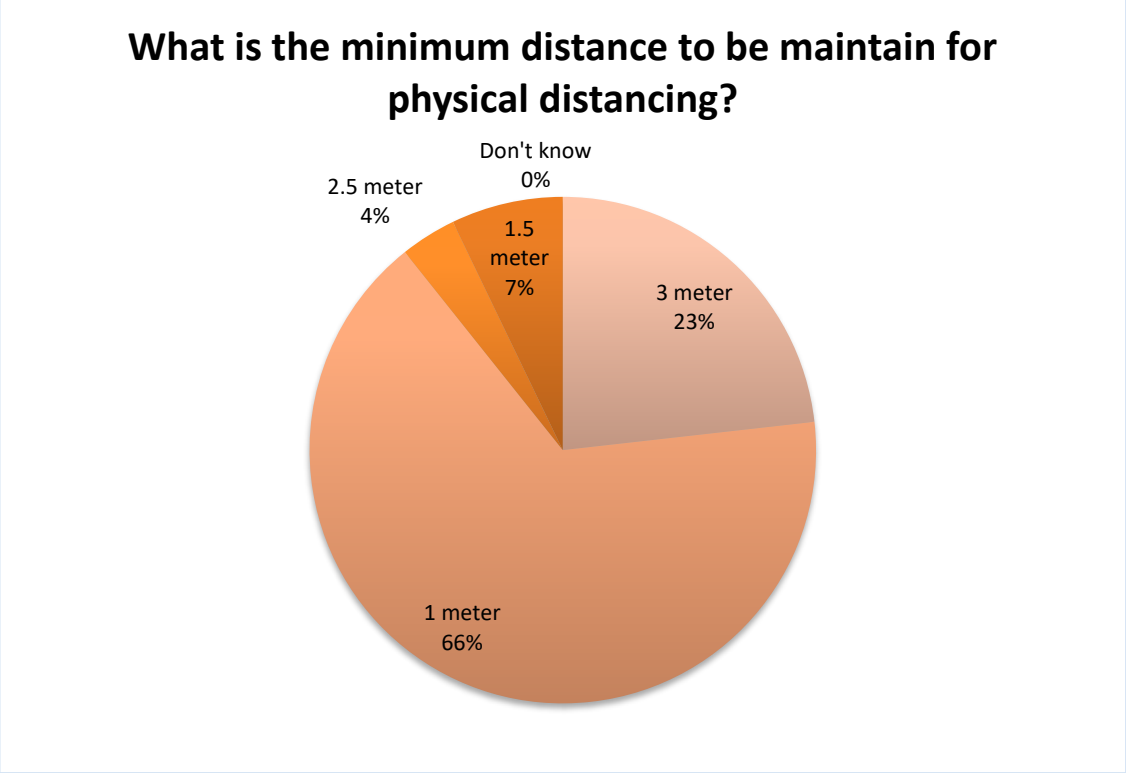


Figure 13: Minimum distance to be maintain for physical distancing

According to the responses, 66% of responses were for 1meter. Then 23% of responded that 3 meter is the minimum distance for physical distancing, followed by 4% responses stated 2.5 meters and 7% of responses were for 1.5meter. But recommendation is that there should a minimum 1meter of social distance should be maintained

During the period of COVID-19 using mask or face cover is mandatory, because coronavirus spread through the droplet of the infected person. This question is an attitude-based question which shows the correct use of mask out the following pictorial options.

Option 1 Option 2 Option 3 Option 4

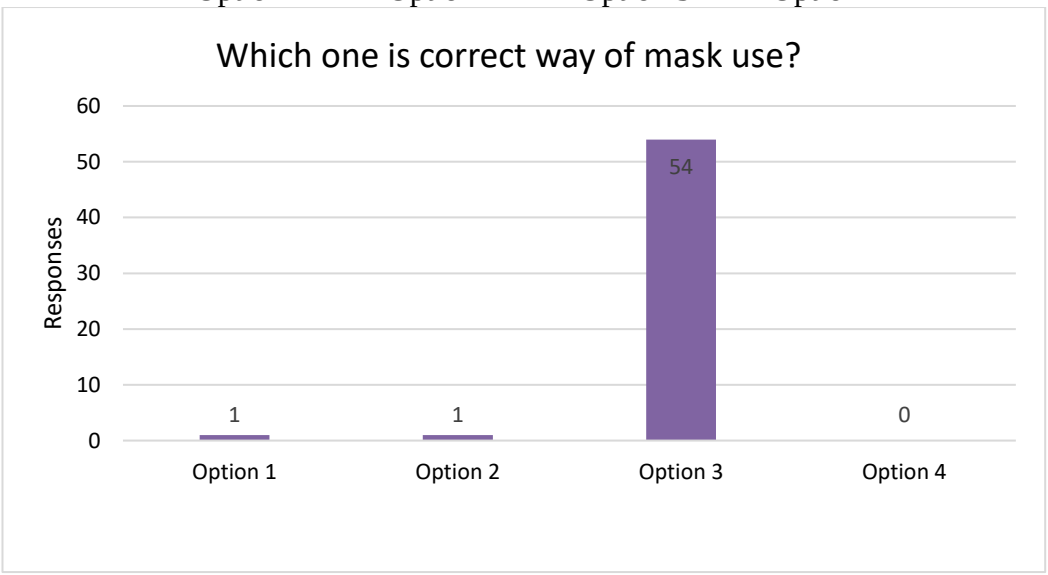


Figure 13: shows that how many volunteers know the correct use of mask

As graph shows that 96% of volunteers know the proper use of mask/ mouth cover and remaining 4% mentioned it wrong.

As all the volunteers were trained that what is the correct use of mask and how to cover and how much should be cover while using the mask. And after doing the assessment of this it's clear that maximum number of volunteers know the correct use of mask.

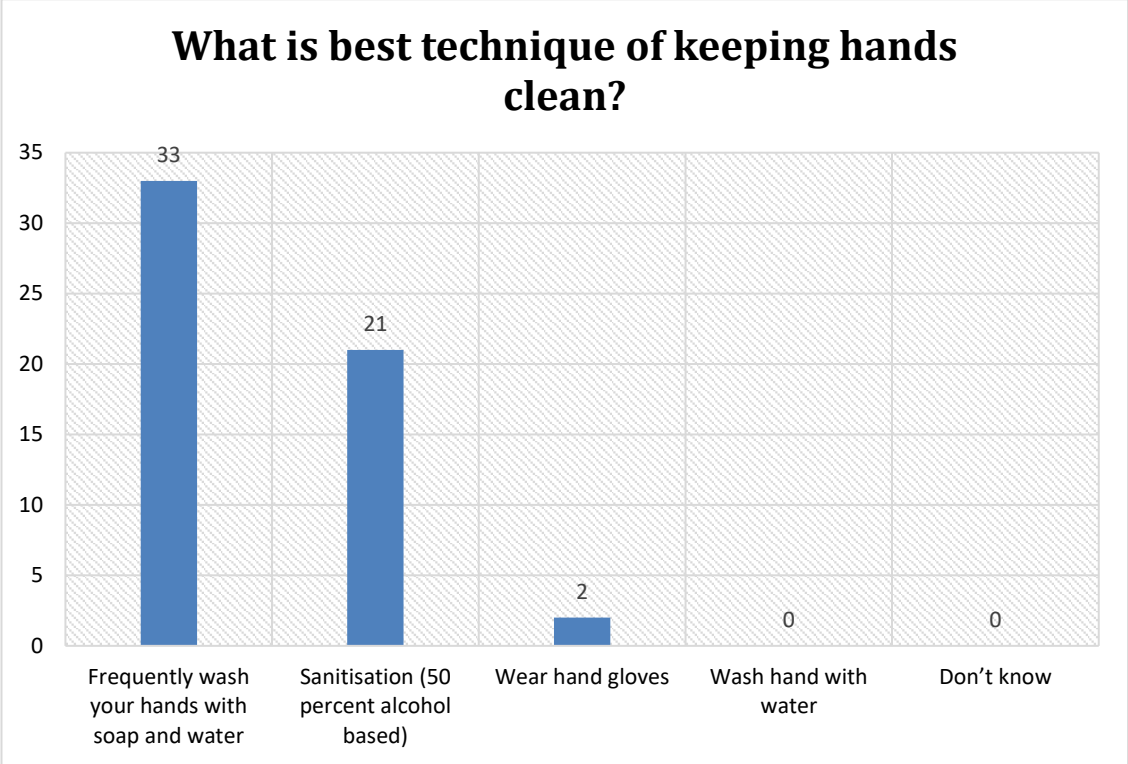


Figure 14: shows the perception and awareness of volunteers on hand washing or sanitizing.

According to the 60% of the volunteers reported frequently wash your hands with soap and water is the best technique for keeping hand clean followed by 38% of them mentioned that sanitization (50% alcohol based) is a good option. But according to the recommendation frequently washing hand with shop and water and next is the sanitization with 70% alcohol base. But study response mentioned 50% alcohol-based sanitization. It shows gap in knowledge.

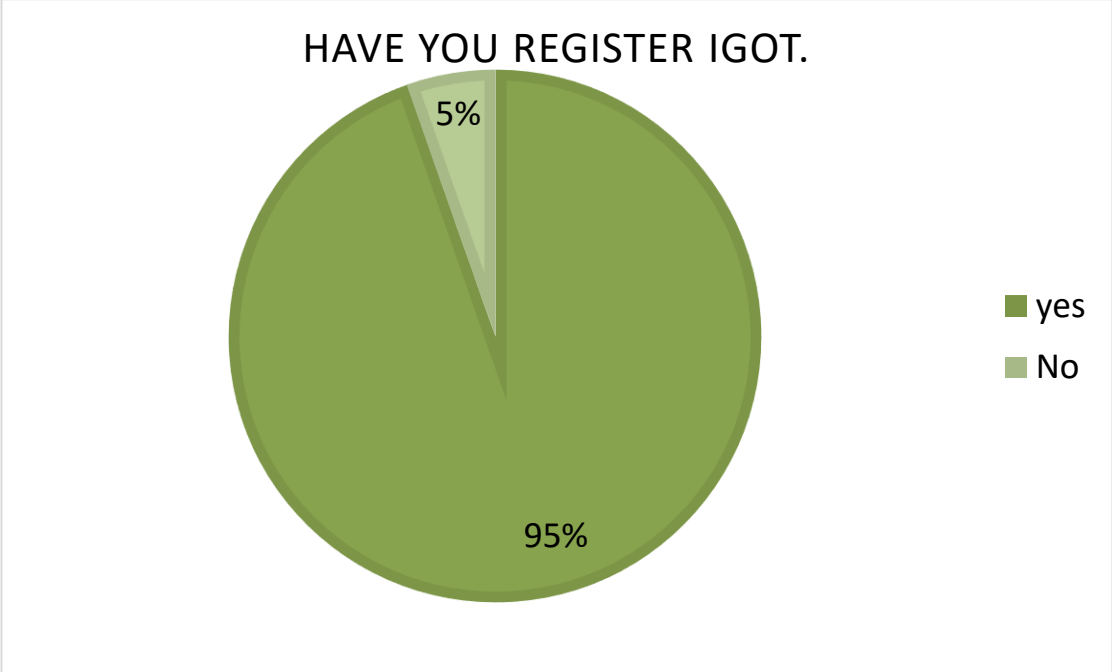


Figure 15: Shows training status of respondents.

As all the volunteers reported that they all are aware of IGOT (integrated government online training) but only 95% of them registered in IGOT. IGOT is a government online training platform and training module for management of COVID19 named Integrated Govt. Online training (iGOT) portal on Ministry of HRD's DIKSHA platform for the capacity building of frontline workers to handle the pandemic efficiently.

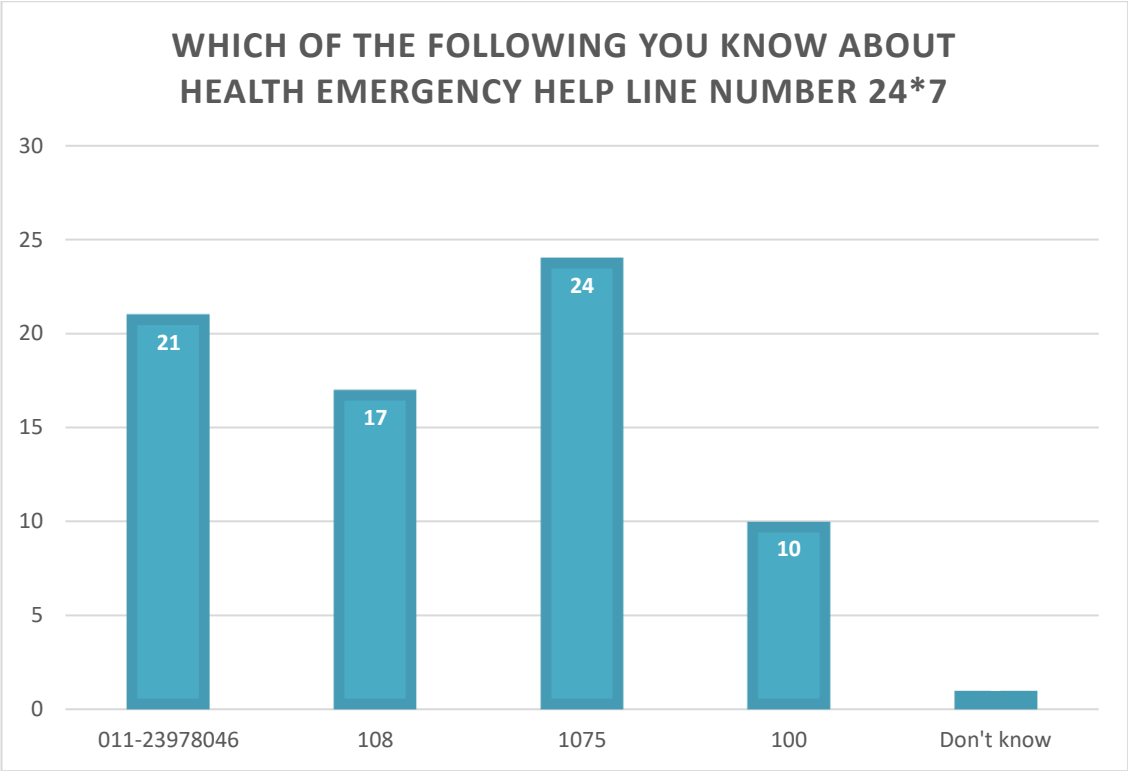


Figure 16: shows knowledge of emergency helpline number/s.

As the above bar diagram present the responses of the volunteers. 34% of volunteers said that they would call the helpline number if they have any symptom or they come in contact with an infected person.

Most of the respondents said that they would call 011-23978046, 108, 1075 helpline number and 10 of them said100 as a health emergency number.

Discussion:

As the study is about the assessment of COVID 19 on NYKS volunteers, which is about reviewing the knowledge and effectiveness of training, many review articles have their different point of view. In some point my study relating e.g. the quarantine is the best treatment for the coronavirus disease, which show lack of knowledge next 90% volunteers know the common symptoms of coronavirus which are breathing difficulties, fever, dry cough, diarrhea and in some cases muscle pain, relating to the study these are the common symptom of coronavirus disease and study also show that.

Social media is one of the main channels updating the COVID-19 information, 91.1% of participants frequently expose them to social media which is consistent with previous studies

LIMITATIONS OF THE STUDY

Despite several advantages, there are few limitations of the present study, including less participation from the areas with limited internet facilities. Demerits of an online survey are also limitations of the presented study. However, in this pandemic situation, an online survey was the only alternative to grasp the notion of the NKYS Volunteers

CONCLUSION

In conclusion, our findings show that Social media is one of the main channels updating the COVID-19 information. Out of total volunteers. 90% of them know the common symptoms of coronavirus which are breathing difficulties, fever, dry cough, diarrhoea and in some cases muscle pain, 48% of volunteers know about the available test of COVID 19. Which show lack of knowledge about coronavirus disease.

The volunteers were trained on Zoom, an online platform. NYKS volunteers play an essential role by providing health care services and health facility to public, also during the lockdown period all the volunteers distribute mask, food pack to door to door, sanitize the village & city. Provide the right information about the coronavirus.

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Annexure

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