

# People Centric Survey on Mask Users And Non-Mask Users During Unlock-1 Phase At Midnapore Town In West Bengal

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**Abstract-** Novel corona virus disease is a serious pandemic disease that occurs predominantly during the month of February, 2020 in India. It is so infectious that can spread rapidly as it transmitted through men. To prevent the pathogens or causative agents, WHO recommended some precautionary measures as there is no medicine to cure the disease caused by novel corona virus. Some medicines are used by physicians to treat various associated diseases in connection with Covid-19. It is urged that to stay safe, many measures may be adopted even self quarantine is utmost recommended. Though the best way to mitigate the problem is 'stay at home' but during movement at outside, people may be affected by the pathogens which is now a fear to all. Therefore, WHO recommended, one can use masks when he or she is outside the home during emergency. Mask can protect one from various kinds of pathogenic transmissions through fomites and droplets released by infected persons. So, to protect one from transmission of Covid-19, use of masks is essential along with other recommended suggestions. Most of the people are unaware about the use of masks. In this paper mask users and non-mask user's attitude have been documented after a case study in Midnapore town. Present study revealed that mask user males are less than in number against non-mask users in the 1<sup>st</sup> phase of Unlock period in connection with Covid-19. This is more or less similar to the result found in 3<sup>rd</sup> phase to 4<sup>th</sup> phase lock down period's observations in the same area. In this article, we are trying to reveal the health consciousness and seriousness about the pandemic disease novel corona virus disease-19. Local study was conducted at Midnapore town on mask users and non mask users during Unclock-1 phase in connection with Covid-19.

**Keywords-** Coronavirus disease-19, Unlock-1 phase period, mask users, awareness.

## I. INTRODUCTION

In February 2020, WHO designated as COVID-19, which stands for corona virus disease 2019. The 2019 novel

corona virus infection (COVID-19) is an ongoing public health emergency of International significance (Wasim et al. 2020)<sup>1</sup>. There are significant knowledge gaps in the epidemiology, transmission dynamics, investigation tools and management. Evidence indicated that Covid-19 virus is transmitted during close contact through respiratory droplets (such as coughing) and by fomites (Liu et al. 2020; Ong et al. 2020)<sup>2,3</sup>. The virus can spread directly from person to person when a Covid-19 case coughs or exhales producing droplets that reach the nose, mouth or eyes of another person (Anonymous1)<sup>4</sup>. According to current evidence transmission through small droplets nuclei (airborne transmission) that propagate through air at distances longer than 1m is limited to aerosol generating procedures during clinical care of Covid-19 patient. Study revealed that age related group assessment showed that have been affected till April, 2020 in Indian scenario regarding recovery rate and decreased rate in various regions within the limited days (Talasila and Papaptila)<sup>5</sup>. The causative agent is a virus. It belongs to the sub-genus Sarbecovirus of the genus Betacoronavirus of the family Coronaviridae (Zhu et al. 2020)<sup>6</sup>. It possesses a single – stranded positive sense RNA genome with molecular weight ranged between 26 to 32 kb lengths. Phylogenetic analyses revealed that the genome sequence of Covid-19 was closely related to (88%) bat-derived SARS like corona viruses and more distant from SARS-CoV (79%) and MERS-CoV (50%) agent (Lu et al. 2020)<sup>7</sup>. Structural analysis revealed that 2019-n CoV might be able to bind to the angiotensin-converting genome 2 receptors in humans similar to SARS-CoV which was confirmed by Zhou et al. 2020<sup>8</sup>. In literature there are many families of viruses as per the nature of nucleic acids and envelope, their size, shape and orientation. By and large many strains are recognised which are described by the scientists till date. COVID-19 causing strains are divided into 7 broad categories<sup>9</sup>. Alpha corona virus (229E), Alpha corona virus (NL 63), Beta corona virus (HKU1), Beta corona virus (OC43), Beta corona virus causes Middle East Respiratory Syndrome (MERS CoV), Beta corona virus causes severe acute respiratory syndrome or SARS (SARS-CoV) and novel corona virus causes corona disease in 2019 or COVID-19

(SARS-CoV-2)<sup>9</sup>. Symptoms of novel coronavirus disease are versatile. It is evident that the report in many cases generated from various countries time to time which includes dry cough, fever, dyspnoea, myalgias, fatigue, decreased appetite, sore throat, rhinorrhoea, gastrointestinal symptoms<sup>10</sup>. Incubation period of virus particle vary from place to place even from site to site. In case of Covid-19 infection, it ranged between 3-24 days while average 14 days are regarded as incubation period. In this condition (symptomatic) infected people are thought to be most contagious. WHO recommends airborne and contact precautions of Covid-2019. The use of medical masks, eye protection, gloves and gown are required for direct patient care. Respirator masks are specially required for aerosol generating procedures<sup>10,11</sup>. WHO also recommended that everyone performs hand hygiene frequently, follows respiratory etiquette recommendations and regular cleans and disinfect surface. It is also recommended that importance must be made to maintain physical distance and avoiding people with fever or respiratory symptoms<sup>11,12,13</sup>. These preventive measures will limit viral transmission if any need consultation with doctors at Covid-19 hospital.

## II. AREA UNDER STUDY

Study area fall under Midnapore municipality in West Bengal. It is situated in ward number 2 at Barisal Pally, near Sitala Mandir of Paschim Medinipur district. Nearest station or point is Sepoy Bazar Girja Goran while it is 2 km apart from Midnapore Railway station under South Eastern Railway in Paschim Medinipur district. A particular point is demarcated and study was taken during Unlock-1 phase period covering 30 days. Here, during this phase of Unlock-1 period room temperature was 27.9 to 31.4<sup>0</sup>C and 28.8<sup>0</sup> C to 32.3<sup>0</sup>C during day and evening respectively. Relative humidity % was recorded and varied from 74-86 and number of rainy days was 14 days in the month of June (Table 1).

## III. MATERIALS AND METHODS

A point at Barisal Pally was demarcated in Paschim Medinipur district in West Bengal. At a particular point of station, movement of people was recorded for 30 days i.e. 1<sup>st</sup> June, 2020 to 30<sup>th</sup> June, 2020 during Unlock-1 phase. Recorded number was taken from field for 30 minutes study in each day. Masked (male and female) and non masked (male and female) peoples' data was collected day wise and after that mask wearing and non masked peoples' data was prepared. Percentage of masked and un-masked male and female persons from raw data (masked and non masked) was calculated. Photographs from top of the building were taken to know the masked, non-masked (gender wise) and status of mask users was recorded. As we bound to stay at home, so we

studied from home during Unlock-1 period at Midnapore town.

## IV. RESULT AND DISCUSSION

In the present study, it is found that mask using male persons was highest i.e. 165 among 198 mask users and female mask users number was recorded as 33 among 198 passers (Table 2, 3 and 4). Lowest mask using male persons was 22 among 30 passers while 1 female mask users was recorded during the Unlok-1 period (Table 4). Highest % of mask users was 63.05% and lowest it was 27.8 during Unlock-1. Similarly, lowest number of mask using female passersby was recorded day by date from lockdown 4<sup>th</sup> to Unlock-1, where people have no interest (Table 2, 3). Highest non-mask users % was 15.82 during Unlock-1 phase period (Table 4). Masks used by people were various types including locally available kind, handkerchief, towel, piece of cloth, scarf (dopatta) and sari. Percentage (%) of mask user and mask non user male and female was recorded heterogeneously because of poor knowledge on Covid-19 (Table 2, 3, and Fig. 1, 2, 3, 4, 5, and 6). Highest % of mask users was male (63.05%) followed by (61.79%). Day wise data revealed that female mask user's % was lesser than male persons in every day's observation. Data represents that male mask user's % became decreasing towards the end of the 4<sup>th</sup> lock down phase but in case of female users such type of conclusion cannot be concluded (Table 2, 3, 4, 5 and 6). Result also showed that percentage of mask users was recorded from 25.88 to 63.05% (Table 4, Fig. 7 and Fig. 8)). Unmasked male and female % was recorded in 30 days study varied from 1.1 to 15.8%. It is argued that within 30 days study, highest mask users were observed in case of male in compare to female. It is evident that males are more aware than female to use masks during their movement at Midnapore town (Fig. 7, 8). At the end of the Unlock-1, non mask users are gradually increasing though there is no parity in case of women (Fig. 7, 8).

### Discussion:

Corona virus can spread through droplets generated by the activities like sneezing, coughing, kissing, hand shaking and smooching. Corona virus may transmit through pet animals such as dog, cat, pig, cow, turkeys (Kumar et al. 2020)<sup>14</sup>. So, people must avoid these activities and be aware of pets to check the spreading of corona virus and even to lead a smooth life without corona virus attack. Our result revealed that people at Midnapore, West Bengal, are not so serious and conscious about the spread and mode of transmission of such severe and pandemic disease causing virus. So, mask using persons are less than non-masked during unlock1 phase in Covid-19 outbreak though Govt. continuously providing

messages about Covid-19 through electronic media and direct advertisements in several wards of the Midnapore municipality. Proper education and awareness among people is the basic need to combat with this Covid-19 viruses. Corona viruses are not new. During 1960s the report of some common corona viruses were come to notice like 229E, NL63, OC43, HKU1 etc. without casualty. Then come SARS and MERS CoV strain with respiratory tract infection and casualty during 2002 to 2013. this disease transmitted through air, droplets and direct contact with infected persons. So, social distancing, proper mask wearing and cleanliness are the major and primary preventive method to remain safe. As per record, mortality rate and number of infection is increasing day by day. The graph is gradually increasing and there is no sign of linear graph through available data. Till date no medicines and vaccines comes to our hand. Recommended practice by WHO to cope up with Covid-19 must be continued. So, we must follow the rules and regulations prescribed by Govt. time to time to make a complete community free from Covid-19 like disease.

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#### Conflicts of interest

Conflicts of interest are none here by the authors.

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**Figures (1-7):** Covid-19- a sociological study on the basis of scientific way



Fig. 1 : MM-Masked male



Fig. 2 : UMM-Unmasked male



Fig. 3 : MF-Masked female



Fig. 4: MF-Masked female



Fig. 5: UMF-Unmasked female

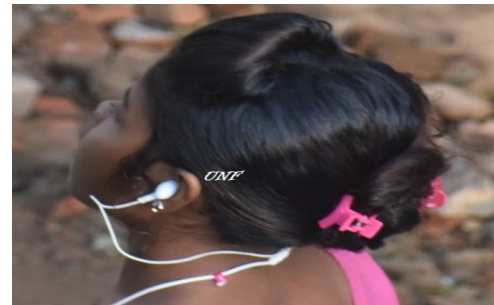


Fig. 6 : UMF-Unmasked female

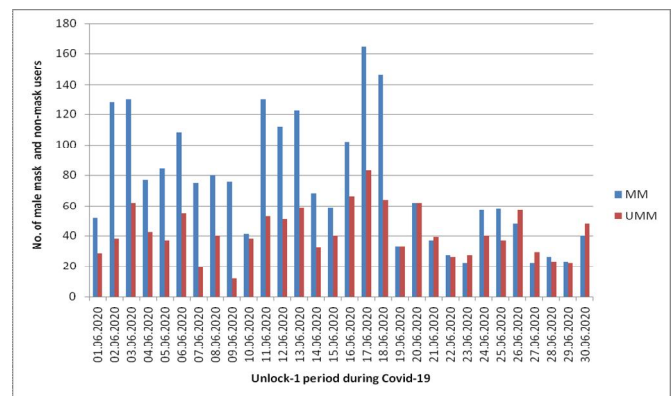


Fig. 7 Mask wearing male (MM) and unmasked male (UMM) people movement during unlock-1 phase at Midnapore town during Covid-19.

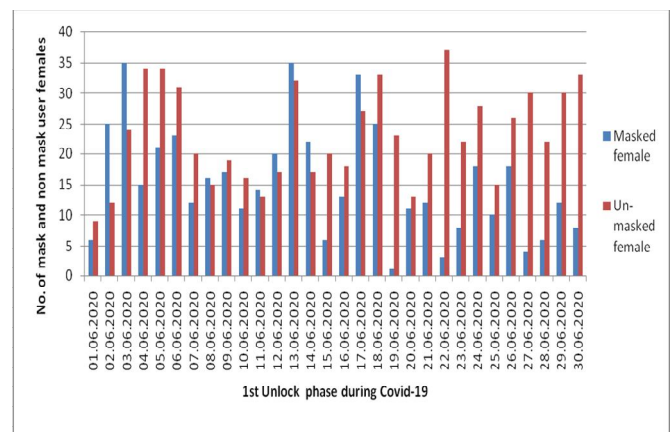


Fig. 8 Mask wearing female (MF) and unmasked female (UMF) people movement during unlock-1 phase at Midnapore town during Covid-19.