"A Study to Assess The Problem Faced and Its Coping Strategies Adopted by Recovered Covid-19 Patients of Selected Urban Areas of Sangli, Miraj, Kupwad Corporation Area."

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# "A Study to Assess The Problem Faced and Its Coping Strategies Adopted by Recovered Covid-19 Patients of Selected Urban Areas of Sangli, Miraj, Kupwad Corporation Area."

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# **Abstract:**

**Introduction:** - Assessment of COVID -19 related problems and coping strategies are a paramount at several levels. Globally the battle against physiological and psychological impact of COVID-19 is still continuing. The outbreak of corona virus disease may be stressful for people but coping with stress will make stronger. Different people are reacting differently to stressful situations. These situations mainly depend on the background of the person the things that make the people different from other peoples and the community they live in. A severe covied-19 infection may lead to total consequence such as respiratory failure and even death in absence of timely diagnosis and treatment. Predicting the risk of death for severe covied-19 patient and insuring that they receive timely and appropriate management represent difficult challenge for health care providers. Identifying the risk factor for severe patient is of great importance as it may reduce the mortality rate and facilitate efficient utilization of the medical resources, that might be insufficient. The corona virus outbreak is leading to health problem like stress, anxiety, depressive symptoms insomnia, denial, anger and fear globally.

The pandemic and containment measures like quarantine, social distancing ,self-isolation can also have a detrimental impact on mental health .The collective concerns influence daily behaviors, economic, prevention and decision make in form health organization, policy makers and medical centers, which can weaken strategies of corona virus disease control and leads to more morbidity and mental health needs at global level.

### Aims:

1. To assess the problems faced by COVID-19 patients.2) to assess the coping strategies adopted by COVID-19 patients.3) to find out the association of problems and coping strategies with selected demographic variables.

# **Methodology:**

The Quantitative research approach used for the study. Non-experimental descriptive was used as research design. The research setting is the location where the research takes place. The setting of the study was selected urban areas of Sangli-Miraj and Kupwad corporation area. 200 COVID-19 recovered patients were selected for the study. Data collection tool refers to the devices or instruments used to collect data. Data collection tool were prepared after taking personal interviews with COVID-19 recovered patients to know the problems and the way they adopted together with review of literature. Based on study objectives questionnaires were prepared to collect the data. The tool was divided into three sections. First section contains demographic variables of sample and second section contains 5 point scale for assessing problems faced by COVID-19 patients with 13 statements and third section were 5 point scale for assessing coping strategies adopted by COVID-19 patient with 21 statements. Data were collected by using structured attitude scale which is prepared by the researcher. Scale were 9 point with 34 statement. Domains were age, gender, education, type of family. Maximum score were 96. Reliability of tool done by using split half method. 13 experts did the validity of the tool. Sample was selected as per the criteria withPurposive sampling technique.

**Results and conclusion:** Maximum of samples belongs to age group of 33-37 in yrsand50.5% were females. In education 49% were having secondary education and 54% were from joint family.in this study, 44% of sample had mental problems, 50% had physical problem, 43% had social problems and 47% were having financial problem. 45% were suffered with all problems. And 11.5% of sample having mild problems .87% had moderate problems; whereas 1.5% of sample adopted sever problems. 34% of the samples had adopted mental coping strategies,48% of the sample adopted physical coping strategies , 38% of them adopted social coping strategies, 50% of them adopted financial coping strategies ,41% adopted spiritual coping strategies all together 43% adopted coping strategies. There was no association established between any of the demographic variables and coping strategies adopted by COVID-19 recovered patients.

The study concludes that COVID-19 recovered patients suffer from mental and physical problems as well as social and financial problems. Mental coping is most crucial in managing the problems adopted. The researchers insist to support and council those covid-19 patients adopted by these individual with the help of stakeholders of society to minimize the problems and strengthen the coping strategies faced by the COVID-19 recovered patients.

**Keywords:**Coping strategies, Corona, Covid patients, Virus, SARS COV-2

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# **Introduction:**

In late December 2019, a new corona virus was identified in china causing severe respiratory disease including pneumonia. The disease caused as a result of infection named corona virus disease .The virus causing the infection has been named - severe acute respiratory syndrome corona virus 2.(SARS-COV-2)It was originally named novel corona virus and the world health organization advised the following language associated with the virus SARS-COV-2 is spreading between people globally and can be seen on the WHO situation reports dashboard which is updated daily. As a newly identified virus there is currently no human immunity to it and appropriate vaccine is not available to prevent infection. Most patient with covied-19 has mild symptoms will severe and critical cases were reported in 19% of the infected patient .A severe covied-19 infection may lead to total consequence such as respiratory failure and even death in absence of timely diagnosis and treatment. The mental health and physiological consequence of the COVID-19 may be more serious among those who have been in contact with the virus those who are vulnerable to biological or including people affected by mental health problems. The corona virus outbreak is leading to health problem like stress, anxiety, depressive symptoms insomnia, denial, anger and fear globally. The pandemic and containment measures like quarantine, social distancing ,self-isolation can also have a detrimental impact on mental health .The collective concerns influence daily behaviors, economic, prevention and decision make in form health organization, policy makers and medical centers, which can weaken strategies of corona virus disease control and leads to more morbidity and mental health needs at global level.

# Material and methods:

The Quantitative research approach used for the study. Non-experimental descriptive was used as research design. Data were collected by using structured attitude scale which is prepared by the researcher. Scale were 9 point with 34 statement.. Domains were age, gender, education, type of family. Maximum score were 96. Reliability of tool done by using split half method. 13 experts did the validity of the tool. Sample was selected as per the criteria withPurposive sampling technique.

# **Result/ Findings:**

The collected data of the present study was classified, organized and analyzed under the following sections.

Section I:

Table No:I Frequency and percentage distribution of demographic variables

N = 200

Sr. No.	Variable	Groups	Frequency	Percentage
1	Age	23-35	55	27.5
		36-45	79	39.5
		46-55	44	22
		56-65	22	11
2	Gender	Male	99	49.5
		Female	101	50.5
3	Education	primary	35	17.5
		secondary	98	49
		Higher secondary	60	30
		Graduation	7	3.5
4	Family type	Nuclear	92	46
		Joint	108	54

Above table shows that maximum of samples belongs to age group of 33-37 and 50.5% were females. In education 49% were having secondary education and 54% were from joint family

Table No: 2
Problems faced by Covid 19 Patients as per domains

N=200

S.No	Domain	Percentage (%)
1	Mental	44
2	Physical	50
3	Social	43
4	Financial	47
5	Overall	45

Above table shows that 44% of sample faced mental problems, 50% had physical problem, 43% had social problems and 47% were having financial problem. 45% were suffered with all problems.

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Table No:3

Problem faced by Covid 19 patients according to category

N = 200

S.No	Category	Percentage (%)	
1	Mild (0-17)	11.5	
2	Moderate (18-34)	87	
3	Severe (35-52)	1.5	

Above shows that 11.5 % of sample faced mild problems .87% had moderate problems where as 1.5% of sample faced severe problems.

Table No: 4

Coping strategies adopted by covid 19 patients as per domains

N = 200

S.No	Catagarory	Percentage (%)	
1	Mental	34	
2	Physical	48	
3	Social	38	
4	Financial	50	
5	Spiritual	41	
6	Overall	43	

Above table shows that 34% of the samples had adopted mental coping strategies, 48% of the sample adopted physical coping strategies , 38% of them adopted social coping strategies, 50% of them adopted financial coping strategies , 41% adopted spiritual coping strategies all together 43% adopted coping strategies

S.No	Variables	Chi square	P value	Remark
1	Age	5.25	0.51	Not significant
2	Gender	4.27	0.12	Not significant
3	education	6.63	0.35	Not significant
4	Type of family	5.83	0.053	Not significant

Table No: 6
Association demographic variables with coping strategies adopted by recovered covid 19 patients

N=200

S.No	Variables	Chi square	P value	Remark
1	Age	8.28	0.22	Not significant
2	Gender	4.64	0.09	Not significant
3	education	1.2	0.97	Not significant
4	Type of family	0.22	0.87	Not significant

### **Discussion:**

Analysis and interpretation of the data is most important step in research process. The data collected for the study to assess the problems faced and its coping strategies adopted by recovered patients was analyzed data were presented in tables and graphs. Analyses were done on the basis of study objectives. Maximum of samples belongs to age group of 33-37 and 50.5% were females. In education 49% were having secondary education and 54% were from joint family 44% of sample faced mental problems, 50% had physical problem, 43% had social problems and 47% were having financial problem. 45% were suffered with all problems. 11.5% of sample faced mild problems .87% had moderate problems where as 1.5% of sample faced severe problems. 34% of the samples had adopted mental coping strategies, 48% of the sample adopted physical coping strategies , 38% of them adopted social coping strategies, 50% of them adopted financial coping strategies , 41% adopted spiritual coping strategies all together 43% adopted coping strategies.

### **Conclusion:**

The study concludes that COVID-19 recovered patients suffer from mental and physical problems as well as social and financial problems. Mental coping is most crucial in managing the problems faced. The researchers insist to support and council those covid-19 patientsadopted by these individual with the help of stakeholders of society to minimize the problems and strengthen the coping strategies faced by the COVID-19 recovered patients.

## **Reference:**

1. Johansson MA, Reich NG, Meyers LA, Lipsitch M. Preprints: An underutilized mechanism to accelerate outbreak science. PLoS

- "A Study to Assess The Problem Faced and Its Coping Strategies Adopted by Recovered Covid-19 Patients of Selected Urban Areas of Sangli, Miraj, Kupwad Corporation Area."
  - Med. 2018;15(4):e1002549. https://doi.org/10.1371/journal.pmed.1002549 PMID: 29614073
- 2. Munn Z, Peters MDJ, Stern C, Tufanaru C, McArthur A, Aromataris E. Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping review approach. BMC Med Res Methodol. 2018;18(1):143. https://doi.org/10.1186/s12874-018-0611-x PMID: 30453902
- 3. Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. Ann Intern Med. 2018;169(7):467-73. https://doi.org/10.7326/M18-0850 PMID: 30178033
- 4. Jiang H, Deng HF, Wang Y, Liu Z, Sun MW, Zhou P, et al. [The possibility of using Lopinave/Litonawe (LPV/r) as treatment for novel coronavirus 2019-nCov pneumonia: a quick systematic review based on earlier coronavirus clinical studies]. Chin J Emerg Med.2020;29(2):182-6. Chinese. Available from: http://rs.yiigle.com/yufabiao/1179572.htm
- 5. Ji W, Wang W, Zhao X, Zai J, Li X. Cross-species transmission of the newly identified coronavirus 2019-nCoV. J Med Virol. 2020;92(4):433-439
- 6. Wan Y, Shang J, Graham R, Baric RS, Li F. Receptor recognition by the novel coronavirus from Wuhan: an analysis based on decade-long structural studies of SARS coronavirus. J Virol. 2020;94(7):e00127-20.
- 7. Wu JT, Leung K, Leung GM. Nowcasting and forecasting the potential domestic and international spread of the 2019-nCoV outbreak originating in Wuhan, China: a modelling study. Lancet. 2020;395(10225):689-97. https://doi.org/10.1016/S0140-6736(20)30260-9 PMID: 32014114
- 8. Shen MW, Peng ZH, Xiao YN, Zhang L. Modelling the epidemic trend of the 2019 novel coronavirus outbreak in China. bioRxiv. 2020;916726: (Preprint). Available from: http://dx.doi.org/10.1101/2020.01.23.916726
- 9. Read J M, Bridgen J R, Cummings D A, Ho A, Jewell C P. Novel coronavirus 2019-nCoV: early estimation of epidemiological parameters and epidemic predictions. medRxiv. 2020;20018549: (Preprint). Available from: http://dx.doi.org/10.1101/2020.01.23.20018549
- 10. Majumder MS, Mandl KD. Early Transmissibility Assessment of a Novel Coronavirus in Wuhan, China. SSRN. 2020;3524675: (Preprint). Available from: http://dx.doi.org/10.2139/ssrn.3524675
- 11. Liu T, Hu JX, Kang M, Li LF, Zhong HJ, Xiao JP, et al. Transmission Dynamics of 2019 Novel Coronavirus (2019-nCoV). SSRN. 2020;3526307: (Preprint). Available from: http://dx.doi.org/10.2139/ssrn.3526307
- 12. Li Q, Guan X, Wu P, Wang X, Zhou L, Tong Y, et al. Early Transmission Dynamics in Wuhan, China, of Novel Coronavirus-Infected Pneumonia. N Engl J Med. 2020;382(13):1199-207. https://doi.org/10.1056/NEJMoa2001316 PMID: 31995857

- 13. Zhang C, Wang M. Origin time and epidemic dynamics of the 2019 novel coronavirus. bioRxiv. 2020;919688: (Preprint). Available from: http://dx.doi.org/10.1101/2020.01.25.919688v3
- 14. Zhang X, Wu K, Yue X, Zhu Y, Wu J. Inhibition of SARS-CoV gene expression by adenovirus-delivered small hairpin RNA. Intervirology. 2007;50(2):63-70. https://doi.org/10.1159/000097391 PMID: 1713918
- 15. Habibzadeh P, Stoneman EK. The novel coronavirus: a bird's eye view. Int J Occup Environ Med. 2020;11(2):65-71. https://doi.org/10.15171/ijoem.2020.1921 PMID: 32020915
- 16. Shi HS, Han XY, Fan YQ, Liang B, Yang F, Han P, et al. [Radiologic Features of Patients with 2019-nCoV Infection]. Journal of Clinical Radiology. 2020;02(06):1-8. Chinese. Available from: https://doi.org/10.13437/j.cnki.jcr.20200206.002
- 17. Fang F, Luo XP. [Facing the pandemic of 2019 novel coronavirus infections: the pediatric perspectives]. ZhonghuaErKe Za Zhi. 2020;58(2):81-5. PMID: 32102140
- 18. Li L, Liu JJ, Jin RH, Li HJ. [The legal class B infectious disease the 2019 novel coronavirus (2019-nCoV) infected pneumonia in Wuhan, China: a review]. New Medicine. 2020;30(1):14-21.
- 19. Wen YM. [Pathogenicity, prevention and control of coronaviruses]. Journal of Microbes And Infections. 2020;15(1):5-12.
- 20. Ralph R, Lew J, Zeng T, Francis M, Xue B, Roux M, et al. 2019-nCoV (Wuhan virus), a novel Coronavirus: human-to-human transmission, travel-related cases, and vaccine readiness. J Infect Dev Ctries. 2020;14(1):3-17. https://doi.org/10.3855/jidc.12425 PMID: 32088679
- 21. Zhang WF, He JM, Tie JF, Su YX, Ren Z. [Resistance and disinfection of Coronavirus]. Chinese Journal of Disinfection. 2020;37(1):63-67
- 22. Liao X, Wang B, Kang Y. Novel coronavirus infection during the 2019-2020 epidemic: preparing intensive care units-the experience in Sichuan Province, China. Intensive Care Med. 2020;46(2):357-60. https://doi.org/10.1007/s00134-020-05954-2 PMID: 32025779
- 23. Li D. [Community Pevention Guidance for Noval Coronavirus Pneumonia]. Herald of Medicine. 2020;39(03):315-318.
- 24. Shen Y, Lu H. [Improving the understanding of diagnosis and treatment of novel coronavirus infection]. Chin J Infect Dis. 2020;38(01):6-8.
- **25.** Backer JA, Klinkenberg D, Wallinga J. Incubation period of 2019 novel coronavirus (2019-nCoV) infections among travellers from Wuhan, China, 20-28 January 2020. Euro Surveill. 2020;25(5). https://doi.org/10.2807/1560-7917.ES.2020.25.5.2000062 PMID: 32046819