AWARENESS AND ATTITUDE TO CORONAVIRUS INFECTION IN URBAN AND RURAL AREAS DURING THE PANDEMIC PERIOD

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ANNOTATION

This study aims to assess the level of awareness and attitude of the population towards coronavirus infection. It was conducted through an online questionnaire using a unique combination that included questions regarding both the knowledge assessment about COVID-19 and people's attitudes towards the disease itself. During the analysis of survey results, all respondents were divided into two groups depending on the region of residence: rural or urban areas. In general, if the effects of the whole sample are examined, it becomes clear that the participants had a sufficiently high level of awareness of the spread and symptoms of coronavirus infection and decent insight about the initiatives to prevent it.

At the same time, the results of respondents living in the conditions of urban and rural areas are noticeably different, which contribute to the fact that the impact of the pandemic on the attitude to the pandemic is a stream of information and management.

Key words: COVID-19, Coronavirus infection, awareness (cognizance), online survey.

I. INTRODUCTION

The worldwide rampancy of COVID-19 has had catastrophic consequences on a global scale. The emergence of this contagious disease has brought about perplexity, apprehension and dread in society [1, 2, 3, 4]. At the same time, as new studies of COVID-19 appear, the collected facts about the virus itself are constantly undergoing alterations over time, leading to the fact that various myths about prevention and treatment continue to disseminate among the population [5, 6]. The current pandemic emerged in an era of the widespread availability of social media and countless opportunities for information exchange, causing biases about the virus, along with "fake" news, are also spreading rapidly [7, 8, 9].

There is no exaggeration in saying that in human history, people have never been given such options that allow them to monitor perpetually and independently the course of the pandemic in its various aspects as well as find out almost all the data available about the disease and keep abreast of the latest news on treatment and prevention measures. In this regard, the consciousness and lore of people begin to come to light if there is a sufficient level to analyze all information and make appropriate verdicts adequately. Given the relevance of all the above factors, the
need to assess cognizance of the disease and attitudes is of particular interest among the population living in urban and rural areas during the coronavirus pandemic.

**Article Purpose** is to scrutinize the level of awareness and stance towards coronavirus infection in the population living in urban and rural places.

**II. MATERIAL AND METHODS**

The work was carried out as a cross-sectional observational study. In terms of an online survey, which was accomplished via Telegram messenger, a special questionnaire was developed, consisting of 2 parts and including 30 questions totally. The initial part of the questionnaire enclosed 22 questions characterizing general background about a respondent (gender, age, marital status, type of work and residence place- rural or urban area) and questions assessing the degree of the respondent's insight of the pathogen, ways of transmission, diagnosis, treatment and prevention COVID-19 (correct answers marked with 1 point and incorrect one with 0). In the second part, eight questions reflecting patients' stance towards coronavirus infection, infection threat and adherence to precautionary measures were answered.

The online survey was conducted from August to September 2020. Concluding the results, answers of respondents from 18 to 60 years were scrutinized. The analysis included only fully completed questionnaires, and totally there were 680 questionnaires. Depending on their permanent place of residence, the respondents were separated into two groups: the main group (n = 390), enclosed respondents who lived in urban areas and a comparative group (n = 290), involved respondents who resided in rural areas. Methods of descriptive statistics were used to examine the obtained research results.

**III. RESULTS**

All participants were indigenous inhabitants of the Republic of Uzbekistan and over 18 years old (average age was 32.54 ± 9.43 years). The age range of respondents by default included individuals with a relatively higher level of education. Among the study attendants, 65% were female, while 35% were male. The origin of people involved indicated six regions, among which the majority dwelled in Tashkent city and the Kashkadarya region. The survey has revealed that a significant number of attendants living in urban areas were afflicted with the main symptoms of the disease. Totally, 35.9% have answered that the virus is spread in several ways: tactile contact, kiss, sneeze, and food products. Alternatively, 54, 3% of attendants have claimed that the animal kingdom does not play a role in virus propagation. It is worth noting that only 40% of them regarded COVID-19 to be a highly contagious disease. Furthermore, the preponderance of participants (95.1%) hold a firm belief that frequent hand wash could stop the spread of infection, and only 17.2% claimed that fever was a symptom of COVID-19. A survey of respondents in the comparative group has shown that a high number of people settled in rural areas have relatively less awareness of the primary symptoms of the disease. It was found that only 31.3% of respondents considered COVID-19 an excessively infectious disease. Only 25.8% was able to name the means of virus transmission. 53.8% of respondents believed that the only carrier of the virus is human. Besides, 89.6% believed that frequent hand washing could stop the spread of infection. Other 80% of the main group have preferred isolation provided that an individual shows the symptoms of fever and cough, whereas this proportion for the second group depicted 67.2%. Over nine in ten (96%) of those surveyed in the main group has reported that social distance is of extreme importance so as to prevent the dissemination of the virus. The figure for the comparative group demonstrates 90%. At the same time, among the respondents of the comparative group, 13.4% of people were identified that domestic travel is safe during a pandemic. Among the respondents of the main group, the supporters of this standpoint are not identified. In the meantime, 3% of those surveyed in the main group and 6.2% of those in the control group have informed that patients who recovered from COVID-19 should not be returned to society. More than 80% of participants in the main group experienced strong anxiety resulted from the COVID-19 pandemic, while in the comparison group, the proportion of respondents was 58%. Approximately 35% of participants from each group had obsessive thoughts about infecting a new virus infection.

About 70% of people in the main group and 50% in the comparative group have sensed vital concern for themselves and their immediate family during the lockdown. About 15% of main group attendants and 9.6% of the comparative group witnessed several problems with snoring in prior weeks due to the unrest on the grounds of the pandemic. In addition to these, it turned out that 77% of the participants of the main group of Socrates experienced social contacts, and about 50% of them failed to meet the requirements of public events. In comparison, this group showed equal levels of 56% and 30%, respectively. 50.7% of participants from the main and 31% of the
comparative group, according to the survey, confirmed that they begin to feel fear when someone from their social circle gets sick. About a third of participants from each group believed that their usual behaviour in society had transformed significantly due to their fear of virus infection. Almost 30% of those surveyed in this group reported that they need to buy and store necessities at home.

In the main group, 71.8% of the participants observed the effectiveness of wearing medical masks, and more than 65% also noted the use of disinfectants and medical gloves. Almost 90% acknowledged that they developed a constant habit of hand wash. In the comparative group, the share of respondents comprised 58%, 45% and 75%, respectively, according to indicated factors.

IV. DISCUSSION
Massive outbreaks of infectious diseases in the form of epidemics and pandemics enable their unique characteristics in terms of cause, spread and response measures [10, 11, 12]. The outcomes of our study delineated that place of residence is a requisite factor influencing cognizance and stance towards coronavirus infection. The obtained discrepancies in the results are explained by the peculiarities of life and the exchange of information among people living in urban and pastoral places. An important factor is the population density which directly determines people's suspicion degree concerning the infection. The relatively decent lore among the respondents of the main group determined the higher level of knowledge regarding various aspects of COVID-19. In general, if the results of the whole sample are analyzed, it becomes clear that the participants had a sufficiently high level of awareness of the spread and symptoms of the virus and adequate knowledge about prevention measures. An obvious clarification for this is that the government and the media have paid more attention to public education. As a consequence, the educated layer is more receptive to such information. Respondents' large fraction was found to report the frequent use of disinfectants and medical masks, indicating a growing interest in preventing COVID-19.

The presented sociological study demonstrates that the sensitivity to information and the awareness of COVID-19 significantly impact the population's behaviour and its attitude to the disease since most of the participants accept the need for social distancing, refusal to travel abroad self-isolation and appropriate hygiene measures.

V. CONCLUSION
To summarize, the results of the sociological study has reported that the current pandemic is characterized by a relatively high level of public awareness towards infection. At the same time, respondents' answers living in urban and rural areas varied markedly. This indicates that data stream and lifestyle have a significant impact on the population's attitude to the pandemic. In this regard, it seems advisable to increase the level of mass educational strategy and propaganda of the fight against coronavirus in suburban regions.

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