

Research Article

A Descriptive Study to Assess the Social Challenges faced by COVID-19 Warriors Posted at a COVID Care Unit in a Selected Hospital

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A B S T R A C T

Introduction: Health care workers act as front-line heroes during the pandemic, but during this period, they are facing problems from the society and families as everyone is thinking they are carriers of the disease. Such an unfavourable situation can develop bad social behaviour, social loneliness, social isolation, anxiety, fear, sadness, anger, frustration, and low esteem towards work, because of the fear of infection.

Objectives: The study was conducted to assess the social challenges faced by COVID-19 warriors posted at a COVID-19 care unit and to seek the association between social life challenges faced by them and selected demographic variables.

Methodology: The quantitative approach using a descriptive research design was incorporated to conduct the study. 60 COVID-19 warriors posted at a COVID care unit were selected using purposive sampling. The tool used for conducting the study was a rating scale to assess the social challenges faced by them. Online Google survey forms were distributed to samples using their e-mail ids.

Result: For data analysis, descriptive and inferential statistics were used. The study shows that 58.3% experienced bad behaviour from society (Figure 1 and Table 2), 55.0% experienced severe social loneliness (Figure 2 and Table 2) and 25% experienced moderate social loneliness (Figure 2 and Table 2). 61.67% of study subjects were severely anxious (Figure 4 and Table 2) and 76.7% were in severe fear (Figure 5 and Table 2). There exists a statistically significant association between social challenges and selected demographic variables (Table 3).

Conclusion: The study concluded that COVID-19 warriors posted at a COVID care unit experienced social challenges associated with their demographic variables.

Keywords: COVID-19 Warriors, Social Challenges, COVID Care Unit

Introduction

In this world, we have different microorganisms. They include viruses, bacteria, fungi etc., out of which some are useful to us, and some are harmful. This study is about the Coronavirus. Virus, a word from Latin neuter virus has been an integral part of almost every ecosystem on the Earth. Viruses are found everywhere. Viruses have properties to cause diseases, but a variety of diseases totally depend on their species.¹

During the previous pandemic in 2003, many studies were conducted, and their results showed that healthcare workers were affected psychologically and socially as they were treated badly by family, friends, and society. The common problem faced by healthcare workers are social stigma, high turnover, stress, anxiety, fear etc.²

Today, the world is facing the impact of another serious disease that is COVID-19. The spread of COVID-19 is very fast that's why World Health Organization (WHO) had to declare this a global health emergency and a pandemic.³

Health institutions across the globe and state agencies have been fighting to overcome and limit the spread of COVID-19 under the guidance of the World Health Organization. Countries including India are engaged in nationwide contact tracing measures, social distancing measures, and awareness programmes.³

Healthcare workers are directly involved in the assessment, diagnosis, and treatment of patients. In spite of all the work, healthcare workers do not get support from society and family which leads to psychological distress.⁴

Methodology

A quantitative research approach was used for the study and the design for the study was descriptive research design. The study was conducted in January-February 2021. The study was conducted in Madhukar Rainbow Children Hospital and Research Centre, Malviya Nagar, New Delhi. The population

comprised of COVID-19 warriors includes doctors, nurses, and technicians posted at a COVID care unit. The sample size included 60 COVID-19 warriors. Purposive sampling technique was used. Ethical permission was taken from the Institutional Ethics Committee of Jamia Hamdard, New Delhi to conduct the research. Consent was obtained from study subjects. A self-structured rating scale was used to assess the social challenges. Instructions were developed for the responder and formulation of the item was done with their scoring.

The tool was divided into 2 sections; Section A and Section B. Section A contained demographic data and Section B contained a structured rating scale to assess social challenges faced by COVID-19 warriors posted in a COVID care unit at a selected hospital in New Delhi.

Section A: Demographic data

It consisted of the demographic profile of the subjects that included age, gender, designation, qualification, marital status, family type, and number of children.

Section B: Structured Rating Scale to Assess Social Challenges Faced by COVID-19 Warriors Posted at a COVID Care Unit

This section had 2 parts: Part 1 included social factors and Part 2 included psychological factors.

The questionnaire was given to 7 experts to ensure its validity. Among them, 2 experts were selected from the field of psychology, 3 experts from community health nursing, and 2 experts from mental health nursing. Necessary modifications were incorporated based on their suggestions. Reliability of the tool was checked using Cronbach alfa and was found to be 0.982. After obtaining formal permission from the concerned authority, a pilot study was conducted on 6 samples. The result of the pilot study showed the study to be feasible. The final study was conducted on 60 samples. Descriptive and inferential statistics were used for data analysis.

Results

Section I: Description of Demographic Characteristics of the Study Subjects

Table I. Frequency and Percentage Distribution to describe the Demographic Characteristics of COVID-19 Warriors

S. No.	Sample Characteristics	f	%
1.	Occupation		
	Doctor	20	33.3
	Nurse	24	40
	Technician	16	26.7
2.	Professional qualification		
	Diploma	22	36.7
	Graduate	22	36.7

	Postgraduate	16	26.7
3.	Age (in years)		
	20-30	29	48.3
	31-40	25	41.7
	41-50	6	10
4.	Gender		
	Male	26	43.3
	Female	34	56.7
5.	Marital status		
	Married	30	50
	Unmarried	30	50
6.	Type of family		
	Nuclear	29	48.3
	Joint	31	51.7
7.	Do you have children?		
	Yes	26	43.3
	No	34	56.7
8.	No. of children		
	One	10	16.7
	Two	8	13.3
	Three	4	6.7
	Four	4	6.7
	N/A	34	56.7

Section II: Findings on the Assessment of the Social Challenges faced by COVID-19 Warriors

Table 2. Mean, Median and Standard Deviation of Social Challenges faced by COVID-19 Warriors

Social Challenges	Possible Range of Score			Possible Range of Score		Median	Mean	Std. Deviation
	Good behaviour (10-30)	Bad behaviour (31-50)	-	Min	Max			
Society behaviour	Good behaviour (10-30)	Bad behaviour (31-50)	-	13	45	35.5	32.38	9.576
Social loneliness	Mild (10-24)	Moderate (25-37)	Severe (38-50)	19	48	39	36.47	9.315
Social isolation	Mild (10-20)	Moderate (21-30)	Severe (31-40)	10	35	27	25.13	7.282
Social anxiety	Mild (10-22)	Moderate (23-33)	Severe (34-45)	21	44	36.5	34.17	6.129
Social fear	Mild (10-20)	Moderate (21-30)	Severe (31-40)	20	40	36	34.63	5.517

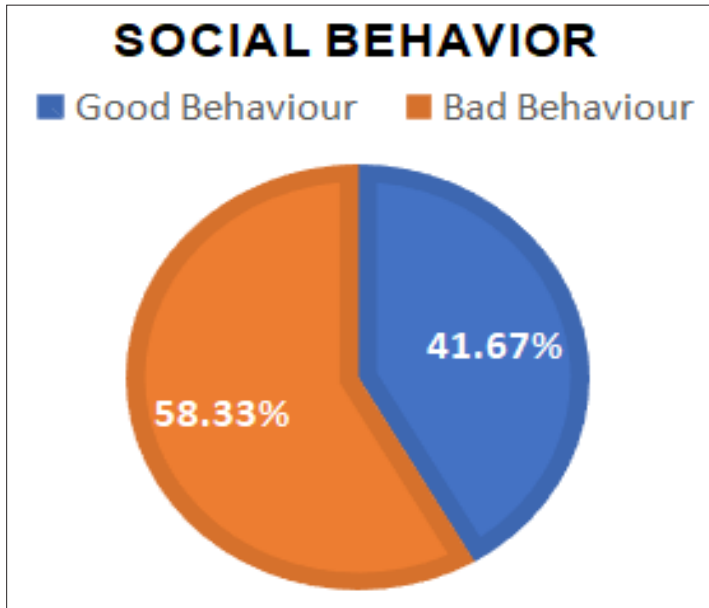


Figure 1. Percentage Distribution of Study Subjects as per their Social Behaviour

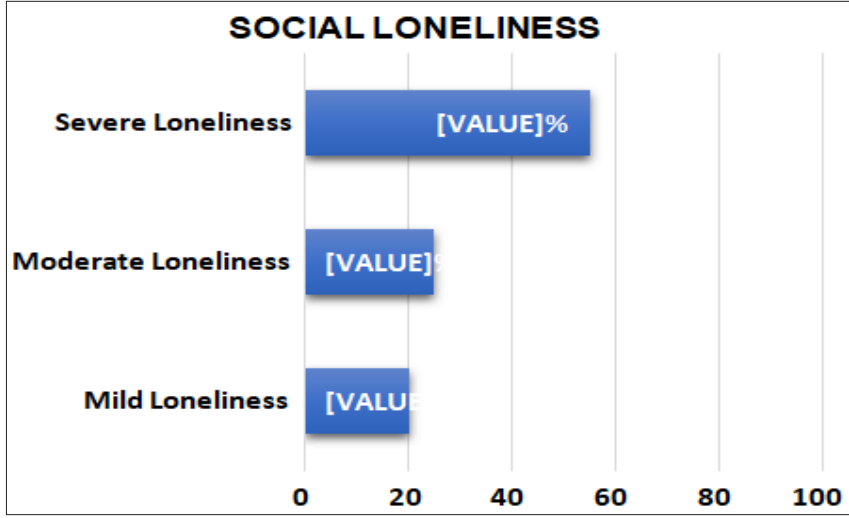


Figure 2. Percentage Distribution of Study Subjects as per their Social Loneliness

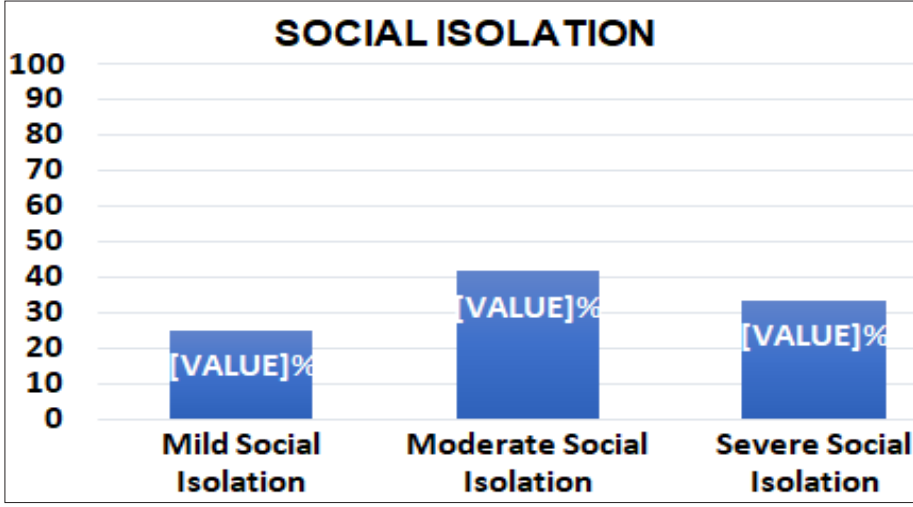


Figure 3. Percentage Distribution of Study Subjects as per their Social Isolation

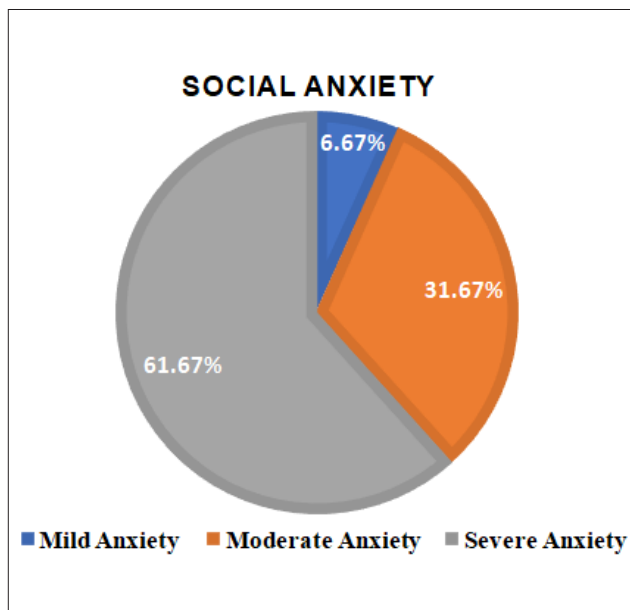


Figure 4. Percentage Distribution of the Study Subjects as per their Social Anxiety

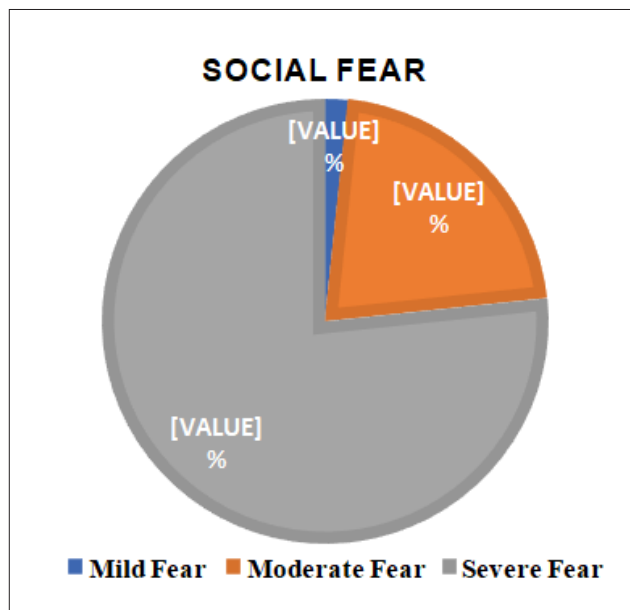


Figure 5. Percentage Distribution of the Study Subjects as per their Social Fear

Section III: Findings related to Association between Social Challenges and Demographic Variables

Table 3. Association of Occupation with Social Challenges

Social Challenges		Occupation			Chi-square Value	df	P Value	Interpretation at 95% CI
		Doctor	Nurse	Technician				
Social behaviour	Good behaviour		1	17	19.491	2	≤ 0.0001	Significant
	Bad behaviour		19	7				
Social loneliness	Mild loneliness		1	9	31.875	4	≤ 0.0001	Significant
	Moderate loneliness		0	12				
	Severe loneliness		19	3				
Social isolation	Mild social isolation		1	14	29.209	4	≤ 0.0001	Significant
	Moderate social isolation		7	7				
	Severe social isolation		12	3				
Social anxiety	Mild anxiety		0	4	18.703	4	≤ 0.001	Significant
	Moderate anxiety		1	11				
	Severe anxiety		19	9				
Social fear	Mild fear		0	1	21.412	4	≤ 0.0001	Significant
	Moderate fear		1	12				
	Severe fear		19	11				

n = 60

Table 4. Association of Professional Qualification with Social Challenges

n = 60

Social Challenges		Professional Qualification			Chi-square Value	df	P Value	Interpretation at 95% CI
		Diploma	Graduate	Postgraduate				
Social behaviour	Good behaviour	13	9	3	6.21	2	0.045	Significant
	Bad behaviour	9	13	13				
Social loneliness	Mild loneliness	5	4	3	5.521	4	0.238	Non-significant
	Moderate loneliness	8	6	1				
	Severe loneliness	9	12	12				
Social isolation	Mild social isolation	9	3	3	4.895	4	0.298	Non-significant
	Moderate social isolation	7	11	7				
	Severe social isolation	6	8	6				
Social anxiety	Mild anxiety	1	1	2	5.251	4	0.262	Non-significant
	Moderate anxiety	10	7	2				
	Severe anxiety	11	14	12				
Social fear	Mild fear	1	0	0	6.597	4	0.159	Non-significant
	Moderate fear	8	3	2				
	Severe fear	13	19	14				

Table 5. Association of Age with Social Challenges

n = 60

Social Challenge		Age (Years)			Chi-square Value	df	P Value	Interpretation at 95% CI
		20-30	31-40	41-50				
Social behaviour	Good behaviour	16	8	1	4.68*	2	0.096	Non-significant
	Bad behaviour	13	17	5				
Social loneliness	Mild loneliness	6	5	1	6.512*	4	0.164	Non-significant
	Moderate loneliness	11	4	0				
	Severe loneliness	12	16	5				

Social isolation	Mild social isolation	10	4	1	10.43	4	0.34	Non-significant
	Moderate social isolation	12	8	5				
	Severe social isolation	7	13	0				
Social anxiety	Mild anxiety	3	1	0	4.742*	4	0.315	Non-significant
	Moderate anxiety	12	6	1				
	Severe anxiety	14	18	5				
Social fear	Mild fear	1	0	0	2.412*	4	0.66	Non-significant
	Moderate fear	8	4	1				
	Severe fear	20	21	5				

*Fisher value

Table 6. Association of Type of Family with Social challenges

n = 60

Social Challenges		Type of Family		Chi-square Value	df	P Value	Interpretation at 95% CI
		Nuclear	Joint				
Social behaviour	Good behaviour	11	14	0.317	1	0.609	Non-significant
	Bad behaviour	18	17				
Social loneliness	Mild loneliness	7	5	0.898	2	0.638	Non-significant
	Moderate loneliness	6	9				
	Severe loneliness	16	17				
Social isolation	Mild social isolation	9	6	2.696	2	0.26	Non-significant
	Moderate social isolation	9	16				
	Severe social isolation	11	9				
Social anxiety	Mild anxiety	3	1	1.436*	2	0.488	Non-significant
	Moderate anxiety	8	11				
	Severe anxiety	18	19				

Social fear	Mild fear	1	0	2.947*	2	0.229	Non-significant
	Moderate fear	4	9				
	Severe fear	24	22				

*Fisher value

Discussion

COVID-19 warriors are facing social challenges which is a serious concern for them. It is assumed that COVID-19 warriors experience challenges from the public and family after performing duty at the COVID care unit and the public thinks that COVID-19 warriors are potential carriers of COVID-19. Due to this belief, our society treats COVID-19 warriors badly and they face bad social behaviour, social isolation, social loneliness, anxiety, and fear.

A cross-sectional study was done by Xiao H et al. on the medical staff. In this study, the levels of anxiety, self-efficacy, stress, sleep quality and social support were measured. The results showed that anxiety, stress, and self-efficacy depend on sleep quality and social support. In the present study on COVID-19 warriors posted at a COVID care unit. It was observed that due to the lack of social support received by COVID-19 warriors, they were suffering from anxiety, isolation, loneliness, and fear⁵.

In the present study, out of 60 subjects, 25 (41.7%) experienced good social behaviour (Figure-1 and Table-2) and 35 (58.3%) reported that they experienced bad social behaviour (Figure 1 and Table 2). Out of 60 subjects, 12 (20.0%) experienced mild social loneliness (Figure 2 and Table 2), 15 (25.0%) experienced moderate social loneliness (Figure 1 and Table 2) and 33 (55.0%) experienced severe social loneliness (Figure 1 and Table 2). Out of 60 subjects, 15 (25.0%) experienced mild social isolation (Figure 3 and Table 2), 25 (41.7%) experienced moderate social isolation (Figure 3 and Table 2) and 20 (33.3%) experienced Severe Social Isolation (Figure 3 and Table 2). Out of 60 subjects, 4 (6.7%) experienced mild social anxiety (Figure 4 and Table 2), 19 (31.7%) experienced moderate social anxiety (Figure 4 and Table 2) and 37 (61.7%) experienced severe social anxiety (Figure 4 and Table 2). Out of 60 subjects, 1 (1.7%) experienced mild social fear (Figure 5 and Table 2), 13 (21.7%) experienced moderate social fear (Figure 5 and Table 2) and 46 (76.7%) experienced severe social fear (Figure 5 and Table 2).

Limitations

The study was conducted on a small sample and was limited to a selected hospital in New Delhi. Therefore, generalisation cannot be made. The findings of the study were purely based on the written responses of the study participants and were subject to response set bias from the respondents.

Conclusion

The study concluded that COVID-19 warriors faced social challenges while serving as front-line warrior and there exists a statistically significant association between social challenges and selected demographic variables

Conflict of Interest: None

Source of Funding: None

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