

# PREVENTING COVID: HARNESSING THE POWER OF COMMUNITIES

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## Abstract

India, home to the world's second-largest population, is devastated by the COVID-19 disease. Indian investigators had looked into 100,000 (0.10 million) COVID-19 infection cases by May 18th; by July 11th, that number had risen to 80,000. India's use of social distancing and lockdown rules increased economic, human, and environmental costs. The environment benefited when the economy and people's lives were negatively impacted. With regard to COVID-19, we discussed how India dealt with and might deal with these issues. Media attention has been paid to a large number of COVID-19 cases in India, but no specific studies have examined the COVID-19 causative factors to a large extent. National health care services are needed because COVID-19 has had such a profound effect on many people's physical and mental health.

**Keywords:** COVID19, Social distancing, Lockdown rules, Economic, human, and environmental costs

## Introduction

Coronavirus disease (COVID-19) is a virus-related illness (COVID-19). The first known instance was detected this year in Wuhan, China. The disease has since spread around the world, resulting in a pandemic. Signs and symptoms are the visual signals and symptoms of a sickness, injury, or disease. A person may be experiencing various symptoms, including fever, headaches, and other sorts of pain. A higher or lower than usual temperature elevated or lowered blood pressure, or an anomaly on a medical scan could all be symptoms.

Covid-19 has transformed our world. The overall risk of contagion has put our way of life to the test, radically altered service delivery, and demonstrated how deeply health security is woven into every area of our lives. As the pandemic has demonstrated, human-centered innovations in global health are urgently needed, and such solutions must be created by the people they serve. The virus exploited existing social and racial imbalances, leaving many communities without access to health care and prone to disease. These problems exist before Covid-19, but they amplify its effects. The necessity of creating robust health systems to respond to challenges and deliver essential health services has been highlighted by Covid-19. People require primary care even in the event of a pandemic. They continue to have babies, struggle with high blood pressure and get cancer—addressing these quotidian health issues cannot be put on hold because of a pandemic.

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Novel Coronavirus is a coronavirus strain that has never been detected before. Coronaviruses are spread from person to person and animal to animal. Several coronaviruses have been found in animals but have not yet infected humans. The most typical signs of this virus are breathing difficulty, cough, and fever. On January 30, the first incidence of Covid-19 was confirmed in India. Until August 16, 2020, one million eight hundred sixty-two thousand nine hundred thirty-seven recoveries have been registered. India has the world's second-largest population and is presently the virus's third-most affected country as of August 16, 2020. To combat the spread of the virus, the Indian government implemented severe lockdowns and suspended all tourist permits.

Educate yourself on the facts and take precautions to keep you and others safe. Heed the advice of your local health officials.

To prevent the spread of COVID-19:

- Clean your hands often. Use soap and water or an alcohol-based hand rub.
- Maintain a safe distance from anyone who is coughing or sneezing.
- Wear a mask when physical distancing is not possible.
- Don't touch your eyes, nose, or mouth.
- Cover your nose and mouth with your bent elbow or a tissue when you cough or sneeze.
- Stay home if you feel unwell.
- If you have a fever, cough, and difficulty breathing, seek medical attention.

A second wave, which began in March 2021, was far more severe than the first, with shortages of vaccines, hospital beds, oxygen cylinders, and other medications in various parts of the country. India had surpassed the United States in the number of new and active cases by late April. On April 30, 2021, it became the first country to report over 400,000 recent issues in under 24 hours. India began their immunization program on January 16, 2021, and by April, it had provided 3–4 million shots per day. As of May 25, 2021, the country had administered around 200 million vaccine doses. India has licensed the British Oxford–AstraZeneca vaccine (COVISHIELD), the Indian BBV152 vaccine (COVAXIN), and the Russian Sputnik V vaccine for emergency use.

### **Prevention and treatment**

Several vaccines against the human coronavirus SARS-CoV-2 have been created using various approaches. Viral proteases, polymerases, and entrance proteins have all been identified as potential antiviral targets against human coronaviruses. Drugs targeting these proteins and the several phases of viral replication are being developed.

Vaccines for the animal coronaviruses IBV, TGEV, and Canine COV are available, although their efficacy is limited. When highly contagious animal coronaviruses, such as PEDV, emerge, destroying entire herds of pigs may be necessary to avoid transmission to other packs.

### **Types of Corona Virus**

It turned out that the coronaviruses found in humans were not all the same. There were two types, which the researchers called "L" and "S." They are very similar, with slight differences in the two places. It looks like the S type came first. However, the scientists say the L type was more common early in the outbreak.

### **AIM OF THE STUDY**

- The study will look at the power of communities to prevent COVID-19
- The people of the society have an understanding and knowledge of COVID-19
- To analyze the mental and physical health of people during this pandemic
- To understand the impact of covid on the daily routines of people

### **Review of the Literature**

Summary of selected research articles on the COVID-19 pandemic is mentioned below.

- Glenn Laverack, September 2020. Harnessing the potential of communities can be enhanced by building trust, including through the use of reliable sources of evidence-based information and by providing opportunities for people to engage in a dialogue about the risks of infection. Harnessing the potential of communities will depend on government recognition of their importance and more substantial funding streams.
- Lev-On, 2012. Yates and Partridge, 2015. Boyd and Martin, 2020. Explains that the collective effect of a sense of community is a determinant of solidarity, social cohesion, the ability to meet local needs, and collective action among crowds during emergencies and long-term crises.
- Baruch et al. (2016); Dissanayake et al. (2019) report that increasing public participation through social media and mobilizing the crowd's wisdom helps maximize the value of crowdsourcing and online community engagement.
- Heath et al. (2009) suggest that a sense of being part of a community is a critical component of strategic emergency and crisis management, bringing together the collective wisdom that makes the public more fully functioning.
- Gui et al., 2017; Abdulhamid et al., 2020, These platforms have created renewable opportunities to bring individuals and groups together, building crowdsourcing communities that go beyond people's sense of the self. In the COVID-19 crisis, social media has played an unprecedented role.
- Boyd and Martin (2020) confirmed that COVID-19 exposes people to novel thinking about a sense of community responsibility in the crisis. Social media tools are novel and offer the preferred platforms to communicate.
- Howell & Taylor, 2011, what has become apparent during past problems is that although there is a range of reasons people become involved in social media crowdsourcing, the overwhelming driver is a sense of community.

A few observations from the eminent scholars during the pandemic are below mentioned.

"During the pandemic, the government has advocated large-scale behavior modification measures like maintaining physical distancing, hand washing, cough etiquette, and following the lockdown rules to curb infection transmission. But such measures might not be effective unless the community actively accepts these interventions." Ms. Rakhil Gaitonde, Professor of Public Health, Sree Chitra Tirunal Institute for Medical Sciences & Technology, Trivandrum.

"Community engagement could be the missing link in enabling the adoption of and adherence to the government's public health guidelines." Ms. Ritu Priya, Professor of public health at the Centre of Social Medicine and Community Health, Jawaharlal Nehru University.

"Community engagement will finally depend on the government." Ms. Sulakshana Nandi of Public Health Resource Network, New Delhi.

"The local agencies can check with the resident's welfare associations about what they were doing to ensure their workers' wellbeing, whether they were giving them wages and so on." Ms. Ritu Priya.

The protocol should encourage the development of new ideas by the communities themselves, despite administrative leadership. Ms. Ritu Priya added that "the best practices of such community efforts could become part of containment protocols at the state or national level."

### **Preparation**

- Early discussions and negotiation with communities is critical for understanding socio-cultural contexts and developing culturally appropriate prevention and control strategies;
- CE can help the health workforce, as it allows a multi-sectoral approach, drawing on local resources and expertise to carry out critical health system functions and create an innovative solution;

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- During emergencies, the resilience and capacity of CE actors can be supported by ensuring clarity regarding roles and compensation, by providing pieces of training and equipment, and by creating a space for dialogue between health workers and CE actors.

### **Implementation**

- There is a need for frequent and open dialogue within CE activities; communities should be treated as active participants in, as opposed to passive recipients of, health response efforts;
- CE process usually involves identifying groups and individuals at the local level (pre-existing or new); building capacity and sustained leadership through training, technical support like planning, developing interventions, inter-sectoral action, monitoring, and evaluation;
- SBCC and risk communication messaging at a household level should use local leaders, influential community persons, or people who have experienced COVID-19, combined with mass media messages tailored to communities' socio-cultural norms, realities, and experiences.

### **Method**

A variety of methodological approaches exist for individuals interested in conducting research. When choosing a research strategy, many factors must be considered, such as the study's objectives, the research questions to be answered, and the funding.

Survey research can use quantitative research strategies. Survey research may be termed "the collection of information from a sample of individuals through their responses to questions." This type of research allows various methods to recruit participants, collect data, and use multiple instrumentation methods.

Primary survey based on following: -

- Questionnaire-based data analysis
- Interview based analysis

### **Research Design**

Descriptive research, also known as statistical research, describes data and characteristics about the population or phenomenon being studied—explanatory analysis answers who, what, where, when, and how.

Descriptive research can be said to have a low requirement for internal validity. Although the data description is factual and systematic, the research cannot describe what caused a situation. Thus, the descriptive study cannot create a causal relationship where one variable affects another.

Sample Size: - 120 people

Survey Medium: - Online Survey Forms Period of Survey: - 2 months

### **Analysis**

Vaccination has been shown to reduce deaths and severe illness from COVID-19 and reduce the transmission of COVID-19. Vaccinating as many people as possible and reducing the spread of disease is essential.

Side effects of COVID-19 vaccines have mostly been mild to moderate and short-lasting. They include fever, fatigue, headache, muscle pain, chills, diarrhea, and pain at the injection site. Following vaccination, the chances of these side effects differ according to the specific COVID-19 vaccine.

Fully vaccinated people have a reduced risk of transmitting SARS-CoV-2 to unvaccinated people.

It is recommended that both doses of vaccine be taken to realize the full benefit of vaccination.

Both doses must be of the same vaccine type.

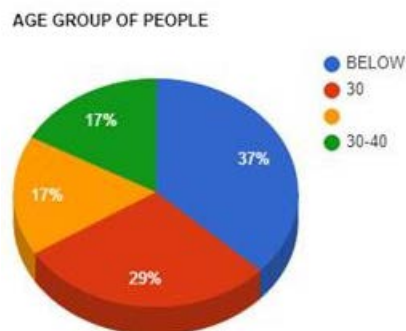
### **Findings**

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The demographic profile of the sample is mentioned in the table below.

**Table:01 Age Group of respondents**

Age Bracket	No. of People	Percentage
BELOW 30	44	37
30-40	35	29
40-50	20	17
55 - ABOVE	20	17
<b>TOTAL</b>	<b>120</b>	<b>100</b>

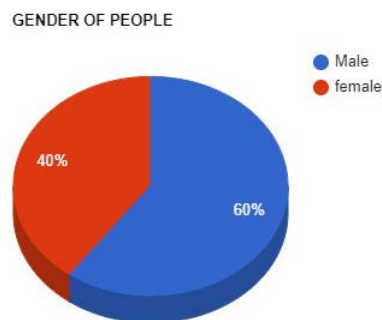


As clearly in the above table the age group of the people, 37% of respondents were less than 30 years, 29% of them were between 30-40 years, 17 of them were between the age group of 40-50 & similarly 17% of them belongs to 55 and above age.

Most of the respondents belong to the age group of less than 30 (37%)

**Table:02 Gender of the respondents**

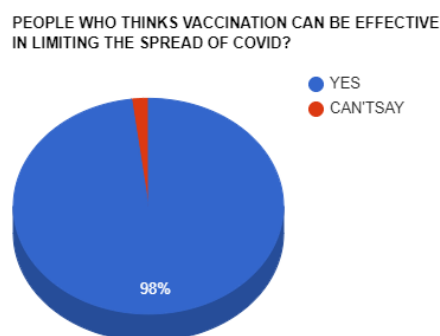
Gender of people	No. of People	Percentage
Male	72	60
Female	48	40
<b>Total</b>	<b>120</b>	<b>100</b>



The above table refers to the gender of the respondent, 60% of them are male, and 40% are female. Most of the respondents are male.

**Table: 03 Respondents, Who believe vaccination can effectively limit the spread of COVID?**

Opinion	No. of People	Percentages
Yes, Absolutely	116	98
Partially	0	0
Not At All	0	0
Can't Say	4	2
<b>TOTAL</b>	<b>120</b>	<b>100</b>

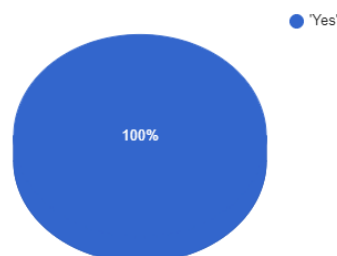


Here, most of the respondents think that vaccination effectively decreases COVID-19.

**Table: 04** Have you heard about the latest government campaign for spreading awareness about COVID called "Safai Bhi, Dawai Bhi, Kadai Bhi"?

Opinion	No. of People	Percentages
YES	120	100
NO	0	0
<b>TOTAL</b>	<b>120</b>	<b>100</b>

HAVE YOU HEARD ABOUT THE LATEST GOVERNMENT CAMPAIGN FOR SPREADING AWARENESS ABOUT COVID CALLED "SAFAI BHI, DAWAI BI, KADAI BHI?"

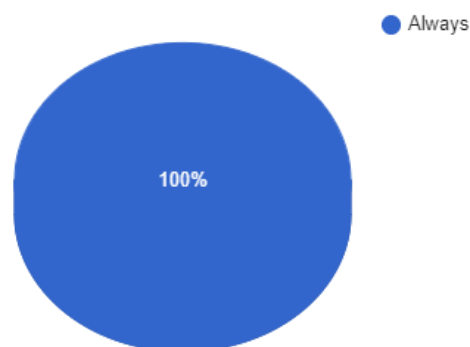


Here, every respondent knows the government campaign to spread awareness about COVID-19.

**Table: 05** Respondents who always wear masks at public places

Wear Mask	No. People	Percentages
Always	120	100
Sometimes	0	0
Rarely	0	0
Never	0	0
<b>TOTAL</b>	<b>120</b>	<b>100</b>

People who always wear masks at public places

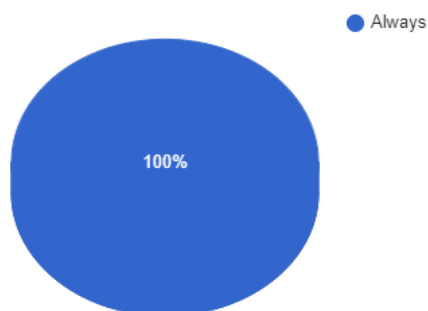


In this poll, all respondents agreed they wore masks in a public place.

**Table: 06** Respondents who wash hands 6-8 times in a day or whenever coming from outside or touching any surface

6-8 Times Hand Wash	No. of People	Percentages
Always	120	100
Sometimes	0	0
Rarely	0	0
Never	0	0
<b>TOTAL</b>	<b>120</b>	<b>100</b>

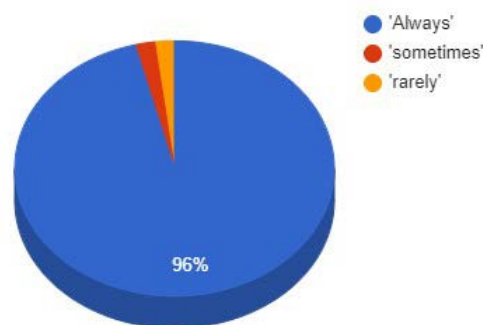
People who washes hands 6-8 times in a day or whenever coming from outside or touching any surface



Each respondent reported they wash their hands 6-8 times each day.

**Table: 07 Respondents who avoid going to crowded places**

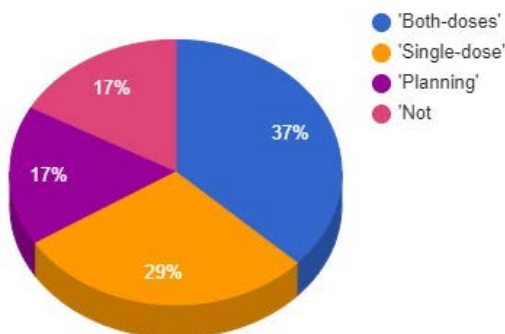
Go to Crowded Place	No. of People	Percentages
Always	115	96
Sometimes	2	2
Rarely	3	2
Never	0	0
<b>TOTAL</b>	<b>120</b>	<b>100</b>



According to the survey, 96% of respondents said they always avoid going to crowded locations, 2% said they occasionally go to crowded areas, and 2% said they rarely or usually go to crowded places.

**Table: 08 Respondents who got vaccinated**

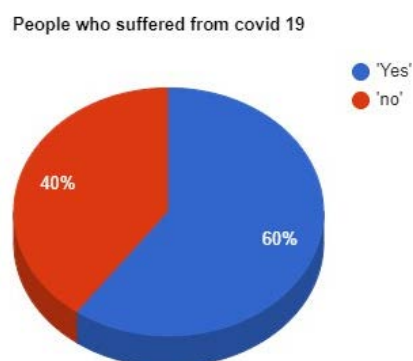
Vaccination Status	No. of People	Percentages
Both	44	37
Single Dose	35	29
Planning	20	17
Not Interested	20	17
<b>TOTAL</b>	<b>120</b>	<b>100</b>



37% of respondents have received both doses of the vaccination, while 29% have just received the single dosage. The remaining 17% and 17% of respondents will take or have not taken.

**Table:09 People who suffered from COVID-19**

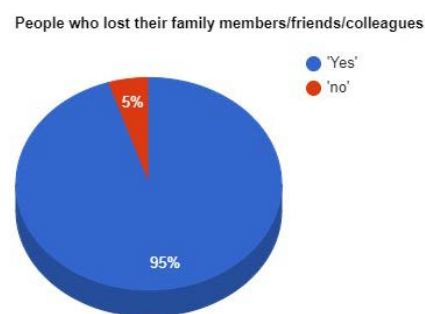
Status	No. of People	Percentages
YES	72	60
NO	48	40
<b>TOTAL</b>	<b>120</b>	<b>100</b>



Because the second wave of COVID-19 was extraordinarily severe and widespread, 60 percent of those polled were infected with the virus, while just 40 percent were unaffected.

**Table:10 lost their family members/friends/colleagues**

Lost someone Known	No. of People	Percentages
YES	114	95
NO	5	5
<b>TOTAL</b>	<b>120</b>	<b>100</b>



This survey is scary since it shows that 95% of respondents lost relatives, friends, or colleagues because of COVID-19.

Anxieties respondents experienced due to the COVID-19 pandemic have been discussed in the section.

Following a survey of around 120 people, we discovered people's concerns during a pandemic.

- People's businesses and occupations were affected by the pandemic.
- People were worried about the economic catastrophe they were experiencing.
- Students and parents were concerned about the loss of educational opportunities.
- Teachers and students are confronted with difficulties in online teaching and learning.
- Many individuals have lost loved ones, including relatives, friends, and family members.

**Discussion**

The study was carried out based on a sample of people polled. COVID-19 is thought to be reduced by vaccination by the majority of people. The government's anti-COVID-19 program is well-known to them all. The vast majority of people follow all measures and standards, such as hand washing, using hand sanitizers, avoiding crowded areas, wearing masks, and preventing sickness. Around 37% of persons have received both doses of the vaccine, whereas 29% have only received the first dose. Following immunization against the original strain of COVID-19, the body's ability to harness several immune system components still leads to significant resistance against many variants.

Around 60% of people were infected by the second wave of COVID-19, which was dangerous and pervasive. We discovered that 95% of people had lost relatives and friends after completing a study, which was shocking to learn.

**Conclusion**

This study analyses the role of the sense of community in harnessing the power of community, collaborative knowledge generation, and the perceived value of social media and society by leveraging the power of community in reacting to the COVID-19 issue. Furthermore, the research looks into the impact of societal wisdom and collective knowledge development on the perceived value of social media in averting Covid-19 by harnessing community strength during a crisis.

The findings of this study reveal that a sense of community plays a significant role in harnessing the wisdom of the society during pandemics, facilitating the combination of individual perceptions into a collective perception that provides a community that, together, is wiser than its taking part individuals. A sense of community inspires and enriches the ability to reach a better solution than any solution achieved by its members individually.

Results show that a sense of community during pandemics plays a vital role in evoking the dimensions of collaborative knowledge creation, namely socializing and externalizing, combining and internalizing. The purpose of being part of a community is a central intrinsic motivator for acquiring new knowledge from diverse sources or creating, discussing, and evaluating novel ideas and opinions collectively to gain a new understanding. It is a powerful catalyst for transmitting newly created knowledge, experience, solutions, and best practices and sharing new values, impressions, and thoughts with other members of society.



This study confirms that the perceived value of social media during pandemics can be gained from the collaborative efforts and understanding of how to employ prevention of covid-19 by harnessing the power of communities to harness the wisdom of the society and collaboratively create new knowledge that benefits society. The research model presents a paradigm for understanding the relationships between the sense of community and the perceived value of social media prevention of covid-19 by harnessing the power of communities in pandemics. This study also explores the role of perceived value as a performance evaluation measure of sense of community, the wisdom of the society, and collaborative knowledge creation in responding to the coronavirus pandemic. It shows how the power of a sense of community contributes to building and harnessing the wisdom of the society and collaborative knowledge creation as predictors of the perceived value of social media prevention of covid-19 by harnessing the power of communities in such crises.

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