

POST COVID PROBLEMS FACED BY POLICE IN SECOND WAVE OF COVID-19

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ABSTRACT

Corona virus disease (COVID-19) is caused by SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2) virus which is a new corona virus that emerged in Wuhan, China in December 2020. The purpose of the study was to assess problems faced by COVID-19 positive patients after illness of COVID-19 in second wave & to assess the attitude of police towards the COVID illness. An Exploratory Descriptive study, Non-experimental descriptive design was used. Total of 100 police officers selected by Non-probability purposive sampling technique. Tools were Standard Operating Protocols. A structured questionnaire with socio demographic data, Likert scale and check lists. Technique used was Self-reporting. Data was analyzed using inferential statistics. The result of study showed. There was no association between post COVID problems and gender at df 1, the calculated value was 0.11 and the table value was 5.99, With the reference to association between post COVID problems and age at df 4, the calculated value is 0.96 and table value is 9.49, hence there is no association between post COVID problems and age at 0.05 level of significance because calculated value is less than table value. Association between post COVID problems and comorbidity at df 6, the calculated value is 0.45 and table value is 12.59, hence there is no association between post COVID problems and comorbidity.

Keywords: COVID-19, Problems, Police, Second wave, Lockdown, Infection, Work, Virus

INTRODUCTION

Corona virus disease (COVID-19) is caused by SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2) virus which is a new corona virus that emerged in Wuhan, China in December 2020. On January 30, 2020, the World Health Organization (WHO) declared it as a Public Health. Emergency of International Concern, and on March 11, a global pandemic was declared. India reported its first case on 30 January 2020 in Thrissur, Kerala having its origin from Wuhan City, China. ^[1]

Second wave of COVID 19 which was caused due to Delta variant of SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2) virus, began around Feb 11, 2021 had strike India very hard with daily cases reaching nearly triple of the cases in first week. The first peak of COVID-19 second wave on April 19, 2021 and also another peak on mid-May, 2021 with daily count exceeding 0.4 million. Social distancing and lockdown were important measures for prevention of COVID-19 infection. ^[2]

Due to this lockdown, people were forced to stay at home except for only emergency services. Police forces emerged as a major Frontline in these crucial situations to enforce lockdown. Police works untiringly working for community patrolling as well as escorting suspected or positive COVID-19 police officers from their home to hospital. ^[3]

Maharashtra was a hotspot that accounted for nearly one third of total case in India during second wave of COVID-19. Pune was also almost affected city after Mumbai. With this lockdown situation, amendment of epidemic disease act, police played major role in enforcement of lockdown. The COVID-19 pandemic created range of unforeseen and unpredicted challenges for police department. However, they were at high risk of getting Corona infections due to their job work profile. As of sep.2021 there were 19,756 cases of COVID-19 Maharashtra police out of which 15,830 police recovered. ^[3]

Since the outbreak of COVID-19, the frontline personnel especially doctors, paramedical Staff & law enforcement individuals a last but not least police officers. To implement lockdown measures they were on duty 24/7 and thus they became commonly & frequently affected group. Most of them got recovered & some lost their lives. Recovered ones are still experiencing post COVID Problems in various aspects like physical, Mental (psycho), social etc. This study explores the assessment of Post COVID problems faced by police, during second wave. ^[4]

Police force in the frontline: Social distancing the key to contain pandemic by interrupting the transmission of the virus has several dimensions which include refraining from non-essential

use of public transport and avoiding large and small gatherings namely dining out, socializing and visiting other places where infections can spread easily. ^[5] For this cause, the police force was in the front to fight against this pandemic. They have to manage the movement of labourers in train and buses and crowd control during a lockdown. Since the police force risked their lives on the streets to ensure the safety of citizens, it is found that 10 out of 1000 police officials tested positive from COVID-19, around 60 per cent are active cases and recovery rate is 39

Ashwani Chand (20 February 2021.), conducted “a study on impact on police personnel during COVID-19 pandemic”. While we are mentally trained to deal with any emergency, the pandemic was a different ball game for the police. Primarily a low enforcement agency. The police leadership was studying how the police in other countries were functioning during lockdown. The police had to ensure that there were no vehicular movements on roads except for essential services. The police found itself in many difficult and unexpected situations. The migrant crisis, daily wage workers, tourists, student desperate to somehow be with their near and teen ones. Everyone was treated with outmost sensitivity. There were families who didn't have food; elderly people who needed medicine. The police had to ensure that everyone got what they needed. The study finding is the pandemic showed not only the police's tact and tolerance but also its human side (MARCH 2022). ^[5]

Emma Ladd's, Alex Rush forth. BMC Health service research conducted on (20 December 2020). “A study on Persistent symptoms after COVID-19: qualitative study of 114 “long COVID” patients and draft quality principles for services. The study revealed that of 114 participants aged 27–73 years, 80 were female. Eighty-four were White British, 13 Asian, 8 White Other, 5 Black, and 4 mixed Ethnicity. Thirty-two were doctors and 19 other health professionals. Thirty-one had attended hospital, of whom 8 had been admitted. Analysis revealed a confusing illness with many, varied and often relapsing-remitting symptoms and uncertain prognosis; a heavy sense of loss and stigma; difficulty accessing and navigating services; difficulty being taken seriously and achieving a diagnosis; disjointed and siloed care (including inability to access specialist services); variation in standards (e.g. inconsistent criteria for seeing, investigating and referring patients); variable quality of the therapeutic relationship (some participants felt well supported while others felt “fobbed off”); and possible critical events (e.g. deterioration after being unable to access services). This study concluded that suggested quality principles for a long COVID service include ensuring access to care, reducing burden of illness, taking clinical responsibility and providing continuity of care, multi-disciplinary rehabilitation, evidence-based investigation and management, and further

development of the knowledge base and clinical services. [6]

Aaliya khanam, Shabir Ahmad [et.al], (14 July 2020) conducted “a study on healthcare providers on the frontline”: A Quantitative investigation of the stress and recent onset psychological impact of delivering health care services during COVID-19 in Kashmir. This was an exploratory hospital-based study. A semi structured e-questionnaire was developed. The study instrument used were stress questionnaire and impact of event scale revised. The study finding: They received 133 valid responses. A total of 81 [61.4%] of respondents were single, 74[55.6] were male,70 [52.6%] were between 20 and 29 years of age and 91 [68.4%] were from urban background. A total of 36 [27.1%] were posted in emergency and 34[25.6%] were in the inpatient department. Stress due to burden in an increase in the quantity of work was seen more in FHCWs working in swab collection center as compared to those working in in-patient department, emergency or theaters. Severe psychological impact was seen in 81[60.9%] of FHCWs. Psychological impact was significantly more in males and in those who were married. Nurses had significantly higher stress as compared to doctors. [7]

RESEARCH STATEMENT

“An exploratory study to assess post COVID problems faced by police in second wave of COVID -19 from Metropolitan city.”

OBJECTIVES

- 1) To assess problems faced by COVID-19 positive patients after illness of COVID-19 in second wave.
- 2) To assess the attitude of police towards the COVID illness.
- 3) To find the association between post COVID-19 problems faced by police with demographic data.

RESEARCH METHODOLOGY

Research Approach: Exploratory Descriptive study.

Research design: The design selected is a non-experimental descriptive design.

Variables: Variables under this study are as follows:

Demographic variables: Gender, Age, Ranks, Marital status, Co-morbidity, Complications after COVID-19 illness, Days of hospitalizations, Vaccinated, Name of vaccine, Vaccination doses.

Setting of the study:

The study was conducted in the selected police station in Metropolitan city.

Population:

The population selected for the study considered of police affected by second wave COVID-19 in Metropolitan city.

Sample and Sampling Technique:

Sample selected for present study is police affected by COVID-19 second wave in Metropolitan city.

Sample Size: 100

Sampling Method: Non-probability purposive sampling technique.’

Inclusion Criteria: This study includes the police who were affected by COVID-19 second wave.

Exclusion Criteria: This study excludes all the police who are retired.

Tool and Technique: Keeping the objectives of the study in mind of researchers, related the following as the tool for data collection.

- 1) Likert scale.
- 2) Checklist. Overall Findings were arbitrary graded Mild score- 0-6, moderate 7-13, Severe 14- 20

Table 3.1: Likert scale score

Grades	Score
Strongly disagree	01
Disagree	02
Neutral	03
Agree	04
Strongly agree	05

Table 3.3: Findings of Physical domain will be Arbitrary graded as:

Arbitrary Grading	Socre
Mild	0-2
Moderate	3-6
Severe	7-9

Table 3.4: Findings of Economical domain will be Arbitrary graded as:

Arbitrary Grading	Score
Mild	Below 1
Moderate	1-2
Severe	3-4

Table 3.5: Findings of social domain will be Arbitrary graded as:

Arbitrary Grading	Score
Mild	0-2
Moderate	3-5
Severe	Above 5

Validity and reliability: The reliability of the tool was found to be **0.93 which was highly reliable**. Ethical approval obtained from the ethical committee.

DATA GATHERING PROCESS

The study was conducted among post COVID-19 Police officers in second wave. Randomize method is used for selecting the participants in the study. (Likert scale and Checklist) were marked by participants. Scoring done Total 100 samples were completed within one week of data collection.

Result : Findings of the study was analyzed and presented as follows

Table 1 shows that distribution of police according to their gender, age and co-morbidity. Majority 61% of police were in the age group 26-40 and majority 71% were males.

Table 1: Distribution of samples as per Demographic Variables

Demographic Variables	Frequency	Percentages
Age group		
18-25	6	6%
26-40	61	61%
41-60	33	33%
Gender		
Male	71	71%

Female	29	29%
Co-morbidity		
Asthma	03	3%
Hypertension	11	11%
Diabetes mellitus	12	12%
Other	74	74%

Section II: LIKERT SCALE (psychological)

This section deals with post COVID-19 problems (Psychological) faced by Police under study. The data was analyzed as per their problems. The Psychological problems faced by police was presented in terms of frequency and percentage.

TABLE 2: Overall distribution of sample according to the psychological problems faced by police personnel

Questions	Strongly disagree		Disagree		Neutral		Agree		Strongly agree	
	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>
“Realization of covid -19 positive status making samples depresses even after recovery.”	24	24%	45	45%	12	12%	19	19%	0	0%
“Perception of post covid-19 period as stressful.”	13	13%	32	32%	16	16%	36	36%	3	3%
“Inability to concentrate on work as before.”	9	9%	46	46%	13	13%	29	29%	3	3
“Fear of spread of covid-19 infection to their family and colleagues.”	2	2%	18	18%	4	4%	49	49%	27	27%

“Worry about their health status in future.”	2	2%	37	37%	8	8%	35	35%	18	18%
“Reduction in concentration power after recovery.”	18	18%	42	42%	17	17%	23	23%	0	0%

In psychological problems faced by police personnel, 49% had fear of spread of infection, 46% were not able to concentrate on work as before. 36% agreed that post covid 19 period was stressful, 42% disagreed that there is no reduction in concentration power after recovery. 35% agreed that they are worried about health status in future. There was no association found between post COVID problems and selected demographic variables.

Physical, economical and social problems faced by police, Majority of police 49(49%) problems were moderate, 47(47%) police problems were mild, and Minority of police 4(4%) problems were severe.

PROBLEMS FACED BY POLICE PERSONNEL

49% people has fear of spread of infection of covid to their family and colleagues .36% people were agreed that post covid 19 period was stressful .35% peoples agreed that they are worried about health status in future .29% police personnel agreed that they were not able to concentrate on their work as before while 46% were agreed that they were able to concentrate on work as before. 42% peoples disagreed that there is no reduction in concentration power after recovery.

To conclude it is found that post COVID19 period was stressful and police personnel were worried about there health status in future. It is also seen that due to exposure and experience in first wave most of them have cope with situation. Association between the post COVID problems and selected demographic variables is analysed and no significant association found.

DISCUSSION

The present study shows that majority 61% of post covid problems faced by police man having age group between 26-40 years and majority 71% were males. While considering about

co-morbidity of policemen in percentage like 3% asthma, 11% hypertension, 12% diabetes mellitus and 74% for other co-morbidity like depression ,arthritis ,osteoporosis etc. The study results revealed that overall interpretation using 4 domains (physical, psychological, social, economical) are after covid-19. The mostly affected domain on severity of problems faced was physical (10%) and the least affected was economical (3%).

An exploratory study conducted to assess the post covid problems in second waves of covid- 19 from metropolitan city. questionnaires were used for the collection of data by providing a survey of policemen. Questionnaire consist of 2 parts demographic and post covid-19 problems.100 policemen were surveyed and their mean age of 26-40 years. There is no association between post covid-19 problems and age ,gender and co-morbidity.

CONCLUSION

The focus of this study was to assess the post COVID problems faced by police in second wave of COVID-19 from Metropolitan city. In the present study, 100 samples were selected using purposive sampling method procedures. The research approach adapted to the present study is an exploratory survey design with a view to assess the post COVID problems. The data were collected from post COVID-19 problems faced by police in second wave of COVID-19 from Metropolitan city through Likert scale & Checklist. The data was interpreted with suitable application of statistical method. The study results revealed that overall interpretation using 4 domains (physical, psychological, social, economical) are after covid-19. The mostly affected domain on severity of problems faced was physical (10%) and the least affected was economical (3%).

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