

## A Study to Assess the Quality Of Life among Covid - 19 People in a Selected Community Area, Puducherry.

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### ABSTRACT:

The COVID-19 pandemic may have brought many changes to how you live your life, and with it, at times, uncertainty, altered daily routines, financial pressures and social isolation. You may worry about getting sick, how long the pandemic will last, whether your job will be affected and what the future will bring. The COVID-19 pandemic brought a complex array of challenges which had mental health repercussions for everyone, including children and adolescents. Grief, fear, uncertainty, social isolation, increased screen time, and parental fatigue have negatively affected the mental health of children. In this paper, we discuss the quality of life among covid-19 people in a selected community area, puducherry. The period of data collection was 1 week, and the data were collected from 60 covid patients by using questionnaires. Purposive sampling technique was used. majority of covid 19 people where in the age group between 20-24years (31.67).majority of covid 19 people where in the gender-Male(58.3), In the gender- Female (41.7).majority of covid 19 people where in the educational status graduate(45).majority of covid 19 people where in the marital status of married (63.3),majority of covid 19 people where in the place of living in rural(63.3).majority of covid 19 people where in the occupation of private(45),majority of covid 19 people where in the family type of is nuclear (58.3).majority of covid 19 people where in the renal disease, heart disease or disbetes so far is No( 78.3).majority of covid 19 people where in get vaccinated of yes (78.3),majority of covid 19 people where in ever been tested for covid is yes (51.7). The findings shows that majority of the level of quality of life is average 46(76.7%) had good 14(23.3%) and the poor is 0. The mean and standard deviation of the quality of life among the covid 19 patient is (61.63 ±7.41) respectively.

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### I. INTRODUCTION:

Covid-19 disease 2019 (COVID-19) is a highly contagious viral illness caused by severe acute respiratory syndrome SARS-CoV-2. It has had a devastating effect on the world's demographics resulting in more than 5.3 million deaths worldwide. It has emerged as the most consequential global health crisis since the era of the influenza pandemic of 1918. The persistence of disabling symptoms long after the acute illness has resolved has become known as long COVID 19. COVID-19 (coronavirus disease 2019) is a disease caused by a virus named SARS-CoV-2 and was discovered in December 2019 in Wuhan, China. It is very contagious and has quickly spread around the world.

The symptoms of COVID-19 are variable but often include fever, cough, headache, fatigue, breathing difficulties, loss of smell, and loss of taste. Symptoms may begin one to fourteen days after exposure to the virus. At least a third of people who are infected do not develop noticeable symptoms. Of those who develop symptoms noticeable enough to be classified as patients, most (81%) develop mild to moderate symptoms (up to mild pneumonia), while 14% develop severe symptoms (dyspnea, hypoxia, or more than 50% lung involvement on imaging), and 5% develop critical symptoms (respiratory failure, shock, or multiorgan dysfunction). Older people are at a higher risk of developing severe symptoms.

COVID-19 most often causes respiratory symptoms that can feel much like a cold, a flu, or pneumonia. COVID-19 may attack more than your lungs and respiratory system. Other parts of your body may also be affected by the disease. Most people with COVID-19 have mild symptoms, but some people become severely ill. Some people including those with minor or no symptoms may suffer from post-COVID conditions or "long COVID". Older adults and people who have certain underlying medical conditions are at increased risk of severe illness from COVID-19. Hundreds of thousands of people have died from COVID-19 in the United States. Vaccines against COVID-19 are safe and effective. Vaccines teach our immune system to fight the virus that causes COVID-19

**AIM OF THE STUDY:-**

The aim of the study was to assess the quality of life among covid 19 people in a selected community area, Puducherry.

**OBJECTIVES OF STUDY:**

- To assess the quality of life of the covid 19 people
- To assess the quality of life of the covid 19 people with their demographic variables.

**II. METHODOLOGY:**

The resource approach used for this study was quantitative research approach. A descriptive research design was used to assess the quality of life of covid 19 people in the community area. By using purposive sampling technique, 60 sample was selected for the present study. The period of data collection was 2 weeks. The tool consists of demographic data, questionnaire. The outcome of study was evaluated by using descriptive and inferential statistics.

**RESEARCH DESIGN:**

A Purposive sampling technique was adapted to this study.

**RESEARCH SETTING:**

The study will be conducted at silukaripalayam , Puducherry. The population of this study is all post covid patients in silukaripalayam. Sample size is the number of subjects involved in the study . sample size consist of 50 post covid patients. Sampling refers to the process of selecting a portion of the population to represent the entire population. Sampling technique chosen was purposive Sampling.

**DESCRIPTION OF THE TOOLS:**

**Section A:**

Demographic variables such as age,sex, educational status,place of living,occupation, family type, lifestyle diseases, vaccination,tested for covid.

**Section B:**

Likert scale is used to assess the quality of life among covid 19 people in a selected community area, puducherry. It consists of totally 20 questions.

**DATA COLLECTION PROCEDURE:**

The data collection done with the permission to conduct the study was obtained from authorities of the concerned person Sri manakula Vinayagar medical College and hospital, puducherryquestionnaire .60 covid patients were selected by using purposive sampling technique and according to the inclusion and exclusion criteria and after introducing and explain the purpose of the study . The tool consist of demographic variables and knowledge questions were administered to respondents and data was collected.

**III. RESULT:**

- Majority of covid 19 people where in the age group between 20-24years (31.67).
- Majority of covid 19 people where in the gender-Male(58.3) .
- Majority of covid 19 people where in the educational status graduate(45).
- Majority of covid 19 people where in the marital status of married (63.3).
- Majority of covid 19 people where in the place of living in rural(63.3).
- Majority of covid 19 people where in the occupation of private(45).
- Majority of covid 19 people where in the family type of is nuclear (58.3).
- Majority of covid 19 people where in the renal disease, heart disease or disbetes so far is No( 78.3).
- Majority of covid 19 people where in get vaccinated of yes (78.3).
- Majority of covid 19 people where in ever been tested for covid is yes (51.7) .
- The findings shows that majority of the level of quality of life is average 46(76.7%) had good 14(23.3%) and the poor is 0.The mean and standard deviation of the quality of life among the covid 19 patient is (61.63 ±7.41) respectively.

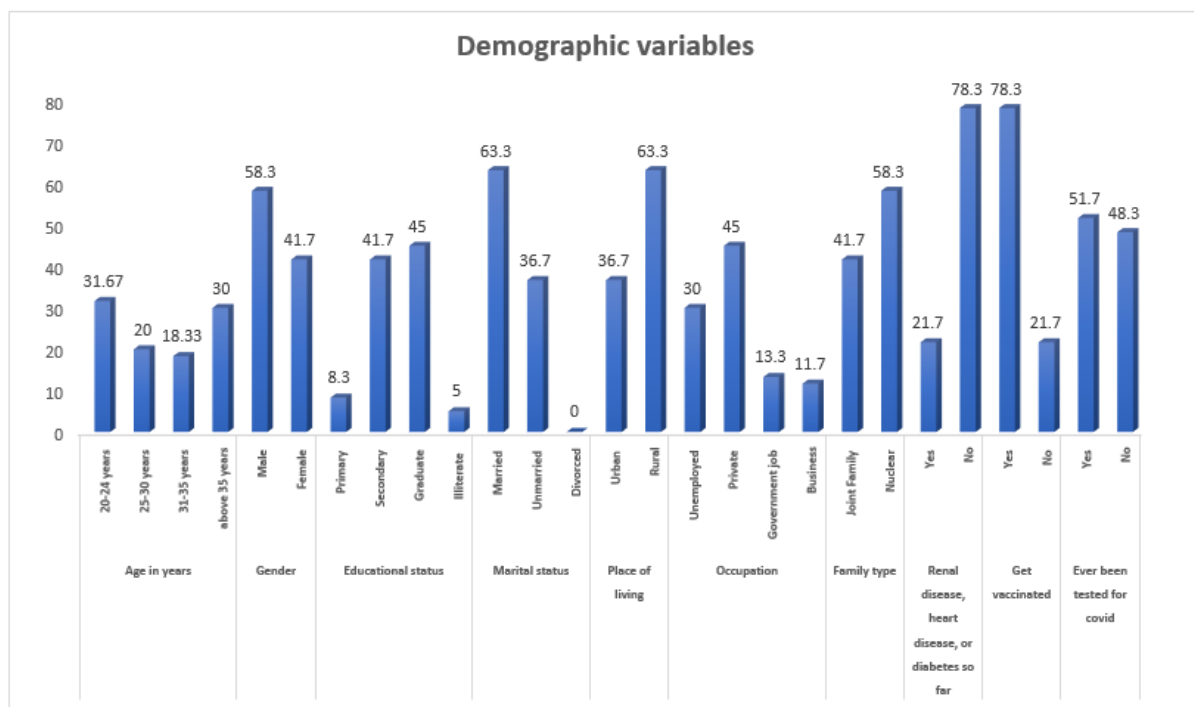
**ASSESSMENT OF THE QUALITY OF LIFE AMONG POST COVID PATIENTS.**

**Table 1: Frequency and percentage wise distribution to assess the quality of life among covid-19 people in a selected community area kalitheerthalkuppam according to their demographic data.**

(n=60)

Demographic variables	Frequency	Percentage
<b>1. Age in years:</b>		
20-24 years	19	31.67
25-30 years	12	20
31-35 years	11	18.33
above 35 years	18	30
<b>2. Gender:</b>		
Male	35	58.3
Female	25	41.7
<b>3. Educational status:</b>		
Primary	5	8.3
Secondary	25	41.7
Graduate	27	45
Illiterate	3	5
<b>4. Marital status:</b>		
Married	38	63.3
Unmarried	22	36.7
Divorced	0	0
<b>5. Place of living:</b>		
Urban	22	36.7
Rural	38	63.3
<b>6. Occupation:</b>		
Unemployed	18	30
Private	27	45
Government job	8	13.3
Business	7	11.7
<b>7. Family type:</b>		
Joint Family	25	41.7
Nuclear	35	58.3
<b>8. Renal disease, heart disease, or diabetes so far</b>		
Yes	13	21.7
No	47	78.3
<b>9. Get vaccinated</b>		
Yes	47	78.3
No	13	21.7
<b>10. Ever been tested for covid</b>		
Yes	31	51.7
No	29	48.3

Majority of covid 19 people were in the age group between 20-24 years (31.67), in the age group of 25-30 years (20), in the age group of 31-35 years (18.33), in the age group of 30 years (30). majority of covid 19 people were in the gender-Male (58.3), in the gender-Female (41.7). majority of covid 19 people were in the educational status primary (8.3), secondary (41.7), graduate (45), illiterate (5). majority of covid 19 people were in the marital status of married (63.3), unmarried (36.7) and divorced (0). majority of covid 19 people were in the place of living in urban (36.7) and rural (63.3). majority of covid 19 people were in the occupation of unemployed (30), private (45), government job (13.3) and business (11.7). majority of covid 19 people were in the family type of joint family (41.7) and nuclear (58.3). majority of covid 19 people were in the renal disease, heart disease or diabetes so far of yes (21.7) and No (78.3). majority of covid 19 people were in get vaccinated of yes (78.3) and no (21.7). majority of covid 19 people were in ever been tested for covid is yes (51.7) and no (48.3).

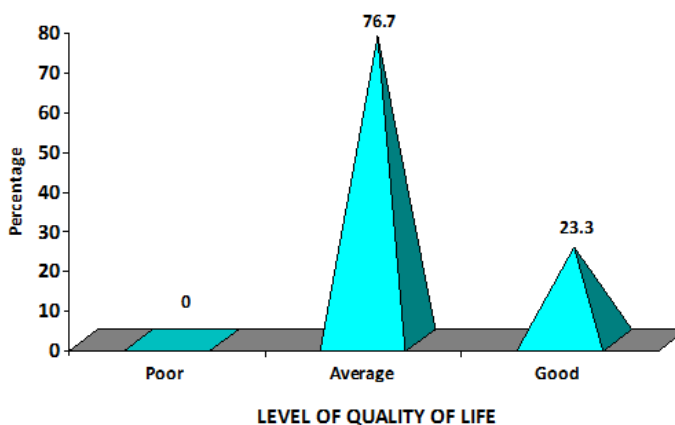


Section B: Distribution a descriptive study to assess the quality of life among covid-19 people in a selected community area kalitheerthalkuppam.

Table-2: Overall Mean, SD and MEAN% to assess the quality of life among covid-19 people in a selected community area kalitheerthalkuppam.

QUALITY OF LIFE	Range	Mean	SD	Mean%
Physical factor	25	16.37	3.21	65
Psychological factor	25	12.7	2.65	51
Social factor	25	16.56	2.83	66
Spiritual factor	25	16	2.38	64
Total	100	61.63	7.41	62

The findings shows that majority of the level of quality of life is average 46(76.7%) had good 14(23.3%) and the poor is 0. The mean and standard deviation of the quality of life among the covid 19 patient is (61.63 ±7.41) respectively.



#### **IV. CONCLUSION AND RECOMMENDATION :**

The present study was conducted to a study to assess the knowledge regarding modifiable and non modifiable risk factors of lifestyle diseases among rural people residing at selected rural area at Puducherry . A descriptive Research Design was adopted this study. The nature and purpose of the study was explained to selected clients and get informed consent obtained from the participants. Each clients was selected through purposive sampling method and assess the knowledge regarding modifiable and non modifiable risk factors of lifestyle diseases. The collected data were computerized and analyzed. The analysis was done using both descriptive and inferential statistics.

#### **NURSING IMPLICATIONS:**

The study had implications for nursing practice, nursing education, nursing administration and nursing research.

#### **NURSING PRACTICE:**

The community area nurses must have some knowledge about covid 19 infection and take a care about high risk populations.

#### **NURSING EDUCATION:**

The nurse educated the general people about the covid 19 infection in the community settings and handling of high risk clients. Provide a necessary health education to the people.

#### **NURSING RESEARCH:**

Numbers of studies are being conducted to assess the quality of life among the covid 19 people residing at selected community area at Puducherry. .Nursing studies are comparatively less in this community field. Different studies have to be conducted further prevalence of infection.

#### **NURSING ADMINISTRATION:**

Nurse's administrators can make necessary steps to spread awareness about covid infections. Nurse's administration can organize awareness program or some participation events about covid infection.

#### **RECOMMENDATIONS:**

- A similar study can be conducted by large number of sample in future.
- The study was conducted to particular group of people at particular age.
- A prospective study can also be conducted
- Study based on daily life of clients to do their daily task.

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