COVID 19 : Preparedness & Life Learning Lesson from Novel Corona Disease - A Prospective from India (Delhi- NCR)

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Abstract

In a short span, novel corona infection (SARS-CoV-2) has caught worldwide awareness by significantly influencing the everyday existence of people and developed as a general wellbeing crisis. Without a doubt, it demonstrates that exercises gained from the past plagues had insufficient and in this manner left us poorly arranged to manage the difficulties that COVID-19 pandemic is right now presenting. At present, as an overall pandemic, COVID-19 postures critical challenges and likewise driving the entire world to lockdown. Regardless, the disease has arranged humanity in standing up to such flare-ups at present similarly as later on. Individuals’ devotion to measuring is influenced by their comprehension, outlook & practices (COP) towards COVID 19. Right now researched Indian inhabitants toward COVID 19 during the time of 21 Days lockdown, which further extended till 03 May 2020 (total 40 Days lockdown) to control the spread of coronavirus. The author finished a self-created survey. A complete survey comprises of 10 Questions concerning the attributes and avoidance of COVID 19. Outlook and practice of residents towards COVID19 remember a question for sure about winning the fight against COVID 19. Among the study completed, the general paces of the cognizance poll were 90 %. Most of the respondents had a certainty that India can win the fight against Corona Virus. In different calculated regression analysis, the data score (OR: 0.73-0.92, P<0.002) was primarily associated with a lower probability of negative perspectives and preventive towards Corona Virus. Wellbeing training programs planned for getting better COVID-19 information are useful for Indian occupants to embrace hopeful viewpoint and keep up suitable practices. We have done a sound show (thali Banging), light show (lighting diyas), and now hotspots will be thoroughly checked and monitored in the wake of the coronavirus outbreak.

INTRODUCTION

World Health Organization (2020) undertook a study that the Coronavirus sickness 2019 is a developing respiratory disease that is brought about by a novel coronavirus. The illness is exceptionally irresistible, and its primary clinical side effects incorporate fever, dry cough, exhaustion, and myalgia. The BBC (2020) pronounced it a general wellbeing crisis of worldwide and called for community-oriented endeavours of all nations to forestall the quick spread of COVID-19. Anderson et al. (1992) without an antibody, social separating has devel-
oped as the most broadly embraced methodology for its moderation and control. (Prem et al., 2017) The concealment of social contact in working environments, schools and other open circles is the objective of such measures. (Towers and Feng, 2012) Since social contacts have a solid assortative structure in age, the viability of these measures is subject to both the age structure of the populace and the recurrence of connections between ages bunches over the masses.

It is observed by World Health Organization (2020) that a person infected by Covid19 is recovered within 14 -16 days because the incubation period of the novel coronavirus is of fourteen days. (Wang et al., 2020) Preventive measures for Covid19 are to protect oneself by washing hands frequently, avoiding touching the mouth, nose, and face, and by maintaining social distancing (1 meter or 3 feet) with other people. Covid19 is now a pandemic as declared by the World Health Organization.

The possible Spread of COVID 19 with and without protection measure was shown in Figure 1. As per the Ferguson (2020), the chief occurrence of the 2019–20 crown infection pandemic in India was represented on 30 January 2020, beginning from China. On 22 March 2020, India saw a 14-hour intentional Public Curfew in line with the Prime Minister of India Shri Narendra Modi. Further, on 24 March, the authority arranged the nation over lockdown for 21 days, which also stretched out to 03 May 2020. The lockdown was additionally reached out for about fourteen days influencing the whole 1.3 billion masses of India. (Liu and Dai-Wen, 2020) shows the infected and susceptible graphs in Figure 2.

The fight against COVID-19 is as yet proceeding in India. (Baig et al., 2020) ensure the final achievement, individuals’ adherence to these control measures are fundamental, which is to a great extent influenced by their comprehension, outlook, and practices (COP) towards coronavirus. In this perspective, I explored the COP towards COVID-19 of Indian residents during the 21 Days Lockout periods, which further extended to 03 May 2020 in the benefit of the country. The protective measures taken by the Indian Government reduce the number of cases of Coronavirus in India.

MATERIALS AND METHODS

Participants

This cross-sectional review was led from 24 March to 03 May 2020, the week following the lockdown of all-out India. Since field-based data collection was not feasible, I chose to gather the information on the web. The cross-sectional study was shown in Figure 3 (Author Research).

Measures

The survey comprised of two sections: socioeconomics and COP. Demographic factors included age, sexual orientation, marital status, training, occupation, and spot of current living arrangement. As per rules for clinical and network the board by the National Health Commission, a COVID-19 Comprehensive poll was created by the author. The Demographic Breakdown of Participants is shown in Table 1.

Survey and Sampling Plan

The sampling Plan and design of the paper is summarized in Table 2.

Statistical Analysis

Zhong et al. (2020) Concretion of right Comprehensive, outlook & practice’s of different individuals as shown by fragment attributes diverged from the independent t-test, one – way analysis of Variance, or Chi-square test as appropriate. Multivariable linear regression analysis (Table 3) was utilized to distinguish factors related to comprehension, outlook and practices. The statistical significance level was set at p < 0.05 (two-sided).

RESULTS AND DISCUSSION

As far as I could know, this is the first study in Delhi-NCR looking at the COP towards Corona Virus among Indian inhabitants. Right now and accomplished populace, we found a general right pace of 90% on the information poll, showing that most respondents are proficient about COVID-19.

Majority of the members held a confident disposition towards the COVID-19 plague: 90.8% acknowledged that COVID-19 would finally be viably con-
controlled, and 97.1% had a conviction that India can win the battle against the contamination. Despite this, the demonstrations of Indian tenants were amazingly vigilant: kept up a vital good ways from swarmed places (96.4%) and wore covers when leaving home (98.0%) during the speedy climb time of the COVID-19 scene.

We also separated the traits of COP towards COVID-19 and recognized some portion factors related with COP; (Table 3, Table 4, Table 5) these disclosures are useful for general prosperity technique makers and prosperity workers to see target masses for COVID-19 balance and prosperity guidance. How India has to respond during Lockdown period in India was reported in Table 6.

Impact on Education system in India

In India, Technical colleges & universities have changed from classroom teaching to online-based courses from Zoom software and Microsoft Team to keep the social-separating proposals among the students.

This tale infection has likewise tossed significant challenges to the specialists and researchers everywhere throughout the world and making them brainstorm in concocting the treatment and the executive’s systems. COVID-19 is a rude awaken- ing and an incredible exercise to reassess the quality and capacities of each nation’s clinical research parts.
1. **REDZONE**: All the hot spot district with large outbreaks and cluster.
2. **ORANGE ZONE**: District which have not yet seen any new cases in last 14 days.
3. **GREEN ZONE**: All the non-infected districts are currently considered as Green Zones. A red zone district can be moved to the green zone if there is no new case seen in the last 28 days and an orange zone district can be moved to the green zone if there is no new case seen in the last 14 days.

**Figure 4**: Hot Spot in INDIA – COVID 19 Lockdown

**Figure 5**: Consumer Caring Sense advertisement by Companies

**Table 1**: Demographic Breakdown of Participants

| Particularity          | Respondent (%) | (mean ± SD) | t/F | P       |
|------------------------|----------------|-------------|-----|---------|
| Neuter                 | Male 34.3      | 10.5 ± 2.0  |     | <0.001  |
|                        | Female 65.7    | 10.9 ± 1.3  |     |         |
| Age-group (years)      | 15-30 40.8     | 10.4 ± 1.9  |     |         |
|                        | 31-50 51.7     | 11.1 ± 1.2  |     |         |
|                        | 51 + 7.5       | 10.9 ± 1.3  | 160.683 | <0.001 |
| Marital status         | Married 55.5   | 11.0 ± 1.2  |     |         |
|                        | Never-Married 39.7 | 10.4 ± 1.9 |     |         |
|                        | Others 5.0     | 11.0 ± 1.2  |     | <0.001  |
| Education              | Under Graduates 17.6 | 9.7 ± 2.4 |     |         |
|                        | Graduates 18.9 | 10.8 ± 1.5  |     |         |
|                        | Post Graduates 44.0 | 11.0 ± 1.2 |     |         |
|                        | Ph.D 19.5      | 11.2 ± 1.0  | 262.000 | <0.001 |

Source - Author Research: May 2020
Table 2: Research Design

| S.No | Items                  | Particular                                                                 |
|------|------------------------|-----------------------------------------------------------------------------|
| 1    | Questionnaire          | The survey consists of 10 Question.                                         |
| 2    | Sample Size            | 500                                                                         |
| 3    | Sample Unit            | INDIA, Delhi-NCR                                                           |
| 4    | Sampling Technique     | Stratified Random Sampling                                                  |
| 5    | Data collection        | Primary Data                                                                |
| 6    | Survey Report          | The Cronbach’s alpha coefficient of the data survey was 0.72 in our samples, showing acceptable internal consistency & trust in winning the battle against Covid 19. |

Source - Author Research: May 2020

Table 3: Multiple linear regressions analysis: Poor Corona Virus Comprehensive

| Variable                        | Coefficient | SE. | t     | P     |
|---------------------------------|-------------|-----|-------|-------|
| Neuter                          | -0.275      | 0.036 | 7.491 | <0.001|
| Age-group                       | -0.312      | 0.053 | 5.325 | <0.001|
| Marital status                  | -0.204      | 0.051 | 3.661 | <0.001|
| Education (Under Graduate)      | -1.312      | 0.061 | 22.0  | <0.001|
| Education (Post Graduate)       | -0.310      | 0.052 | 7.112 | <0.001|
| Education (Ph.D)                | -0.101      | 0.041 | 3.912 | <0.001|

Source - Author Research: May 2020

Table 4: Multiple regression analysis: outlook toward corona virus

| Capricious                      | OR (95%CI)  | P     |
|---------------------------------|-------------|-------|
| A1: Disagree                    |             |       |
| Marital status                  | 2.19        | 0.046 |
| Corona Virus : knowledge score  | 0.72        | <0.001|
| A1: Unknown                     |             |       |
| Gender                          | 1.50        | <0.002|
| Age (15-30 vs. 60+ yrs)         | 1.74        | 0.012 |
| Age (31-49 vs. 60+ yrs)         | 1.42        | 0.048 |
| Education (Under Graduate)      | 2.23        | <0.001|
| Education (Post Graduates)      | 2.00        | <0.001|
| Education (Ph.D)                | 1.61        | 0.008 |
| Corona Virus : knowledge score  | 0.81        | <0.001|
| A2: No Confidence               |             |       |
| Education (bachelor Degree)     | 4.98        | <0.001|
| Education (Master Degree)       | 5.04        | <0.001|
| Education (Ph.D)                | 3.13        | <0.0001|
| Corona Virus : knowledge score  | 0.75        | <0.001|

Source - Author Research: May 2020
**Table 5: Multiple regression analysis: Practices toward corona Virus**

| Capricious                                      | OR (95%CI)          | P    |
|-------------------------------------------------|---------------------|------|
| P1: Crowded Places                              |                     |      |
| Gender                                          | 1.37 (1.05, 1.75)   | 0.019|
| Occupation                                      | 1.54 (1.12, 2.11)   | 0.007|
| Corona Virus: Knowledge Source                  | 0.92 (0.84, 0.95)   | 0.001|
| P2: not wearing a mask                          |                     |      |
| Gender                                          | 1.89 (1.32, 2.63)   | 0.001|
| Marital status                                  | 2.97 (1.46, 6.08)   | 0.003|
| Corona Virus: knowledge score                   | 0.78 (0.73, 0.83)   | <0.001|

Source - Author Research: May 2020

**Table 6: How India has Respond during 70- Days Lockout Period**

| Attributes                                      | In Percentage |
|-------------------------------------------------|---------------|
| Trying to avoid Public Places & install Aarogya Setu App. | 87%           |
| Keeping a Distance in Crowds and wear Mask (N-95)     | 85%           |
| Changed Daily Life style                          | 84%           |
| Working from Home and Develop Self reliant Habit    | 87%           |
| Not going out of house, expect work                | 76%           |
| Avoiding going to Hospitals                       | 68%           |

Source - Author Research: June 2020

**Table 7: Change in customer Spending Behaviour in the next 1 Year**

| Top Winners | Top Losers |
|-------------|------------|
| Essential for Daily Life | Travel and Transport |
| Utilities | Vacation |
| Fresh Foods | Public Transport |
| Personal care Products | Business Travel |
| Household care Products | Hotel Chain |
| In Home Entertainment | Out-of-home entertainment |
| Mobile services | Theme park |
| Home Wi-Fi connection | Restaurants |
| DTH Services | Movies at cinema Hall |
| Saving and Investment | Discretionary spends |
| Saving Insurance | Luxury Brand |
| Insurance | Cosmetics |
| Saving | Tobacco & smoking |
| Discretionary spends | Apparel & fashion |
| Health and wellness | Home décor |
| Preventive diagnostics | Automobiles |
| Test | cars |
| Supplement | Scooter/ bikes |
| Medical Aids | |
| Online Education | Education |

Source - Author Research: June 2020
COVID-19 and Food Habits

In light of the examinations and research discoveries, Lee et al. (2015) was accounted for that the COVID-19 pandemic has developed in live fish and meat market in India. This has instructed the open an extraordinary exercise concerning suitable cooking and nourishment propensities, and how they can prompt such ailment emergencies like COVID-19. Researchers additionally prescribe (Pillaiyar, 2016) that eating butchered creatures may be the reason for such flare-ups as COVID-19. The changing habit in customer spending behaviour shown in Table 7.

Strategy for exit

Identify Hotspots

In India, after 70 days lockdown is over, the infection cluster can continue with restrictions while the other parts of the country are allowed to return to normalcy. This will not only contain the virus in the Hotspots but also permitted economic activity to restart.

Authorities have already started identifying such cluster across Delhi, UP, Maharashtra, Kerala etc. This is a good start and will pave the way for differentiated lockdown strategies in the future (Rusinova et al., 2012).

According to official sources, ‘hotspots’ have been identified based on areas where large COVID-19 outbreaks have been reported or in clusters with a significant spread of the disease according to the guidelines issued by the Ministry of Health and Family Welfare (MoHFW), Government of India (2020). The HOT SPOT is defined in Figure 4.

Restart the Economy after the Lockdown

Economically speaking, India is facing today with perhaps its most significant emergency since Independence. Our limited fiscal resources are certainly a worry. Manu, small and medium enterprise already weakened over the last few days. There is much to do.

The centre and state have to come together to figure out quickly some combination of public and NGO provision, private participation and direct benefit transfers that will allow the needy household to see through the next few months.

Exit Strategy

As India enters the final phase of the lockdown, but the country keeps ready itself for a long haul. The lockdown bought us time, but the battle is yet to be won. Consequently, discussion within and between start governments and centre have begun on the contours of a staggered exit from lockdown. Mcdonald (2014) explains the exit strategy will influence both the economy and public health. It is essential to get it right, through unlock 1, unlock 2, unlock 3 and unlock 4.

Learning Lesson for Business Delivery in time of crises

1. The shift towards localization.
2. Digital gets a real push.
3. Move toward variable costs models.
4. Building sensing and control tower capabilities.
5. Supply chain resilience is the key.
6. Building agility.

During COVID 19 consumer want advertising to make them feel in a caring sense

This is reflected in Figure 5 regarding consumer behaviour and Preferences.

1. Empower me
2. Guide me
3. Make me feel secure
4. Make me feel positive
5. Be active
6. Talk Relevant
7. Give me reassurance

Opportunity for India: COVID 19 Pandemic

Approximate 1000 companies engaged in discussion at various levels with Indian officials. At least 300 companies are actively pursuing plans to shift production to India. Korean companies are making the first move. Even some startups have also expressed interest. India is emerging as a bible option. Companies like Apple’s manufacture, Wistron Corporation has expressed his interest, pisco and Hyundai steel might want to come to India. Union minister Nitin Gadkari pitches joint venture. India has already reduced a corporate tax 25% last year.

New Age Brands - Being Wise: India Responsiveness

1. Salutes to Doctors
2. Fortis Hospital : A cut above the Rest
3. Air Asia: Stand apart stand together

4. Coca Cola: Stay apart-stay united

Brands can show their full empathetic support and keep their brand at top of people's minds and hearts. It's indicated in Figure 6, Figure 7, Figure 8, Figure 9, Figure 10, Figure 11. The above six Brands can show their full empathetic support and keep their brand at top of people's minds and hearts during COVID 19 lockout periods.

CONCLUSION

Public health experts warn of a health catastrophe as the burden of COVID-19 swamps the capacity of health systems around the world. Developing countries, such as India are especially vulnerable. I have struggled with making sense of the official data and the even more difficult task of reconciling it with dire predictions of hundreds of millions of infections and an unimaginable number of deaths. However, we must advance ideas for understanding all the available data so that policymaking is as well informed as possible. It is with this intention that I am writing this piece. We could have a COVID-19 vaccine this year. Clinical trials for a COVID-19 vaccine have commenced. The AIIMS, New Delhi Ethics Committee on 19 July 2020 gave its nod for starting a human clinical trial of the indigenously developed Covid-19 vaccine — Covaxin. Covaxin being developed in collaboration with Bharat Biotech. That is cause for cautious optimism. India Vaccine makers supply 60 % of the developing world's vaccines and are now involved in the development of COVID Vaccines with a timeline to make these available sometimes next year March 2021. The top makers are Serum Institute of India, Zydus Cadilla, Bharat Biotech, Biological E., Gennova Pharmaceuticals and Indian Immunological.

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Conflict of Interest

The author declares that there is no conflict of interests regarding the publication of this manuscript.

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