



## PUBLIC KNOWLEDGE, ATTITUDE AND BEHAVIORAL CHANGES DURING H1N1 OUTBREAK AMONG URBAN AND RURAL POPULATION

### Nursing

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### ABSTRACT

**Background:** Swine flu: another pandemic knocking at the door? Swine flu is an infection by any one of several types of swine influenza virus. India had 8,648 cases and 345 swine flu deaths till May 7 this year, compared to 1,786 cases and 265 deaths in 2016, reveals data from the ministry of health and family welfare. Maharashtra has the highest death toll, with 181 people succumbing to H1N1 complications till May 7, 2016. **Objectives:** To assess & compare the knowledge, attitude and behavioral changes of H1N1 among urban and rural population. **Methods:** Investigator adopted non experimental survey for respective study. Sample size comprised 200 adults, 100 from urban and remaining 100 from rural community. Random sampling method was used. Data was collected using semi structured questionnaire and attitude scale. **Result:** The computed t value (knowledge=3.8, attitude=3.35) was more than the table value at 0.05 level of significance. Hence H<sub>1</sub> hypothesis is accepted. This proves that there is significant difference in level of knowledge and positive attitude about H1N1 in rural and urban population. **Conclusion:** Findings suggest that provision of education and clear information are essential to correct the misconceptions.

### KEYWORDS

H1N1, Public Knowledge, Attitude, Behavioral Changes

*"The ultimate measure of a man is not where he stands in moment of comfort and convenience but where he stands at time of challenges and controversy."*

- Martin Luther King (Jr)

#### Introduction:

H1N1 influenza (Swine influenza or Swine flu) is a respiratory disease of pigs caused by type A influenza virus that regularly causes outbreaks of influenza in pigs. Worldwide, as of October 17, 2009, there have been more than 414,000 laboratory confirmed cases of pandemic influenza H1N1 2009 and nearly 5000 deaths. The 2009 flu pandemic is a global outbreak of a new strain of influenza A virus subtype H1N1 and was first identified April 2009 in Mexico. On June 11, 2009, WHO declared the H1N1 outbreak as a pandemic. Worldwide, as of April 11, 2010, more than 214 countries and overseas territories or communities have reported laboratory confirmed cases of pandemic influenza H1N1 2009, including over 17798 deaths. If people have knowledge about the disease, they can protect themselves from infection, avoid unnecessary contacts and stop the disease from spreading further.

#### Objectives

- To assess the knowledge and attitude of H1N1 infection among urban and rural population.
- To assess the behavioral changes during H1N1 infection among urban and rural population
- To compare knowledge and attitude about H1N1 infection between urban and rural population

#### Hypotheses

Ho: There is no significant difference in the knowledge and attitude related to H1N1 infection in urban and rural population

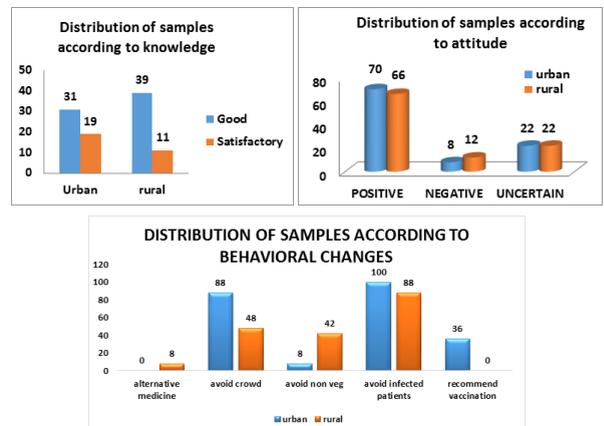
H: There is significant difference in the knowledge and attitude related to H1N1 infection in urban and rural population

#### Materials & Methods:

Investigator adopted non experimental survey for respective study. Sample size comprised 200 adults, 100 from urban and remaining 100 from rural community. Random sampling method was used. Data was collected using semi structured questionnaire and attitude scale.

#### Results:

With regard to subjects' gender, majority i.e. (57) & (48) subjects were females from rural and urban community respectively. Highest number of subjects both from rural and urban area (50) and (44) belonged to age group between 18 – 39 yrs. In rural area, majority (57) of subjects completed primary schooling, whereas in urban area (74) of subjects in urban completed secondary schooling. Most of the subjects in urban (65) and rural (52) were skilled workers.



The computed t value (knowledge=3.8, attitude=3.35) was more than the table value at 0.05 level of significance. Hence H<sub>1</sub> hypothesis is accepted. This proves that there is significant difference in level of knowledge and positive attitude about H1N1 in rural and urban population.

#### Discussion:

Present study is supported by systemic review conducted by Tooher et.al (2013) on "Community knowledge, behaviours and attitudes about the 2009 H1N1 Influenza pandemic" at Australia wherein Nineteen unique studies were included. Fourteen reported pandemic knowledge, 14 reported levels of concern and risk perception and 18 reported pandemic behaviours. Awareness of the pandemic was high, and knowledge was moderate. Levels of concern and risk were low moderate and precautionary behavioural actions lower than intentions. The most commonly reported factors influencing adopting recommended behaviours were increased risk perception and older age, increased pandemic knowledge and being female.

#### Conclusion

The perceived susceptibility of infection needs to be increased so that public will take precaution against H1N1 infection and adopt health protective behaviours.

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