

## Level of Consciousness and Health Protocols at Home among Students of Polytechnic College of Botolan

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**ABSTRACT:** The primary objective of this research was to ascertain the Polytechnic College of Botolan students' level of consciousness and their at-home health care practices. The study also aimed to ascertain the respondent profile in terms of age, sex, course, year level, and monthly family income, as well as the respondents' level of awareness and health protocols regarding the COVID 19 pandemic established at home in terms of nature and mode of transmission, prevention, and control. The primary data-collection tool for this study was the survey questionnaire. The descriptive research design was employed. The researcher employed a range of techniques, such as surveys, observations, and pure research, to gather data. The frequency distribution, percentage distribution, weighted mean, and analysis of variance (ANOVA) were only a few of the statistical measures that were employed. The results showed that, of the 289 respondents, the majority are women, 22 years old, in their second year of a teacher education program, with low monthly family incomes. Fully Aware describes the respondents' level of awareness and their health precautions in relation to the domestically spread COVID19 pandemic in terms of its nature, mechanism of transmission, and methods of prevention and control. When categorized according to profile characteristics, the respondents did not perceive any significant differences in the nature or mode of transmission, but when grouped according to course and monthly family income, they did perceive significant differences in prevention and control.

**KEYWORDS :** *health protocols, level of consciousness, students, Polytechnic College of Botolan*

### I. INTRODUCTION

The COVID-19 epidemic is having a significant influence on people's lives, notably the lives of young people. Exams and activities have been postponed, schools and universities have closed, there are fewer regular health information services available, and mingling with friends and extended family is strongly discouraged and, in some locations, even illegal. For young people's social, physical, and mental welfare, living in these conditions can be challenging.

The word "pandemic" comes from the Greek words pan, which means "all," and demos, which means "the people," and is frequently used to describe an epidemic of an infectious disease that affects an entire nation or many continents at once [1]. However, over the last 20 years, the term has been defined in various modern medical texts. Even reputable books on pandemics, such the important 1992 Institute of Medicine study on emerging illnesses and comprehensive histories of medicine, do not list it in their indexes [2].

A novel coronavirus (SARS-CoV-2) pandemic with likely zoonotic origins is presently affecting the entire world. Around 75% of new diseases have a zoonotic origin, making animal pathogens a potential pandemic risk factor. Humans and animals are at risk from pandemics on a large scale, and the economic and environmental health sectors are affected. The fight against the virus is being led by medical professionals and scientists, and people all across the world are responding as best they can. However, there is currently no indication that the morbidity and death linked to the new coronavirus are on the decline. Additionally, the complexity of COVID-19 has caused chaos in the scientific community as a result of this outbreak. The COVID-19 pandemic has had a significant detrimental influence on science, causing the closure of academic institutions, research facilities, and labs. Most scientific activities, including national and international conferences, symposiums, workshops, and training programs, are canceled or postponed. Millions of people's livelihoods are also at risk, and there are numerous job losses as firms struggle to deal with the virus-control lockdown.

The 2019 coronavirus infection (COVID-19) was declared a pandemic by the World Health Organization (WHO) on March 11, 2020. The 1918 influenza pandemic, which killed 50 million people and affected close to one-third of the world's population, may be of a comparable extent to this one. The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) virus that causes COVID-19 disease has so far infected 213 countries and territories, resulting in 14 million cases and 500,000 fatalities [3]. International control measures led to travel restrictions and bans. The whole Luzon archipelago was placed under an enhanced community quarantine on March 16, 2020, according to Philippine President Rodrigo Duterte [4]. Curfews, checkpoints, and travel restrictions were implemented [5], [6]. Work and educational activities have been suspended indefinitely. There was no option but for people to stay inside their homes.

When the entire Philippine island chain of Luzon was placed under enhanced community quarantine from 28 March to 12 April 2020, it was crucial to identify the prevalence of negative concerns in a society during this pandemic and take precautions against its risks and effects.

There haven't been any research done yet that look at how the COVID-19 outbreak has affected the Philippines' general populace. Therefore, the purpose of this study is to raise knowledge of the nature and manner of transmission of Covid 19 and to determine risk and protective factors influencing the level of awareness and the health protocols established at homes of Polytechnic College of Botolan students in response to the Covid 19 pandemic.

### Statement of the Problem

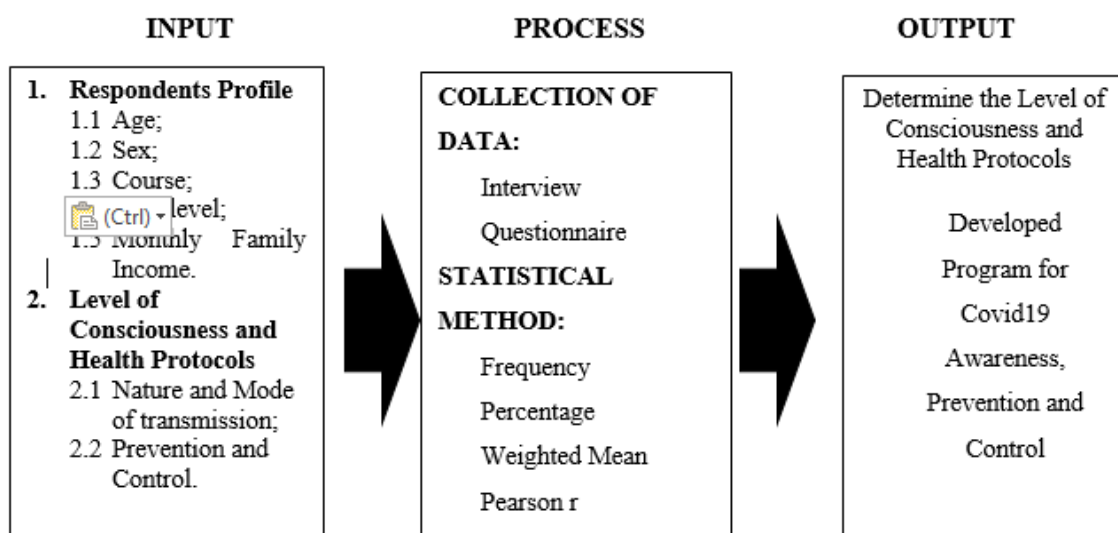
The study aims to determine The Level of Consciousness and Health Protocols Established at Home among Polytechnic College of Botolan Students and develop intervention program to response to the effect of Covid 19 pandemic among the families of student.

Specifically, the study seeks to answer the following questions.

1. What is the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents in terms of:
  - 1.1 Nature and Mode of Transmission and
  - 1.2 Prevention and Control?
2. Is there any significant difference on the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents when grouped according to profile variables?

### Conceptual Framework

The framework that was used in this study involves the input-process-output design which is divided into three frameworks.



**Figure 1**  
**Paradigm of the Study**

Figure 1 presents the paradigm of the study it includes the profile of the respondents and the Level of Consciousness and Health Protocols.

The first frame consists of the respondent's profile that includes age, sex, course, year level, monthly family income and Level of Consciousness and Health Protocols as to Nature and Mode Transmission and Prevention and Control.

The second frame depicts the methodology of the study and how information will be gathered via questionnaires and interviews. Additionally, it contains the statistical methods that will be used in the study, such as ANOVA, Pearson's r, weighted mean, frequency, and percentage.

The third frame reveals the results, which include a program for Covid19 Awareness, Prevention, and Control as well as the study's intended results, which include determining the Level of Consciousness and Health Protocols.

### Hypothesis

The hypothesis of the study is stated as:

1. There is no significant difference on the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents when grouped according to profile variables.

## II. METHODS

### Research Design

Since the purpose of this study was to confirm hypotheses that were made in relation to the current situation in order to clarify it, the descriptive technique of research was chosen.

According to Creswell [7], who defined the descriptive type of research as information gathering on the current state of existence, the descriptive technique is quick and practical from a financial standpoint. This model also permits a flexible approach, allowing for the conduct of extra research when substantial new issues or concerns arise throughout the course of the study.

On the other hand, descriptive research generally focuses on characterizing the nature or condition and level of specificity of the current situation. This approach is used to characterize the characteristics of a scenario at the time of the investigation as well as to look into the causes of a specific incident. The goal of descriptive research is to fairly describe the people, events, or circumstances.

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### Respondents and Location

The respondents of the study will be from various students of Polytechnic College of Botolan. The study involves the insight of two hundred ninety-nine (299) respondents.

### Instruments

The primary data-collection tool for this project will be a survey questionnaire. Just to clarify, a questionnaire is a research tool made up of a series of questions and other inquiries meant to gather data from respondents. The advantages of questionnaires over some other research instruments are their affordability, cost-effectiveness, and frequent availability of standardized responses that make data collection less challenging.

The researcher's tool for the study was the questionnaire. A questionnaire is a designed series of written questions linked to a certain issue with space provided for stating the response to each question. It is frequently used in normative survey studies and in the measuring of opinions [8].

The questionnaire is divided into two parts. The questionnaire's first portion focuses entirely on the higher education institution's profile, which covers the school's categorization, level, overall enrollment, and total numbers of faculty and staff.

The strategies for managing waste, such as segregation, waste reduction, reuse, and recycling, are covered in the second section of the survey questionnaire. These activities will be evaluated using a Likert scale. The researcher administers the questionnaire to the respondents in order to evaluate its validity for the study. These participants and their responses are solely utilized to do testing; they are not involved in the real research process. After the respondents had submitted their answers, the researchers asked for any comments or modifications that could be necessary to guarantee the instrument's ongoing validity and advancement. The researcher then adjusted the survey questionnaire based on the ideas offered by the respondents. The researchers then cut out pointless questions and replace them with ones that use simple or understandable language.

### Data Collection

Two different types of data were acquired for this study. The primary and secondary data kinds are among these. The responses that the survey respondents provided were used to create the primary data. On the other hand, secondary data came from written works that were pertinent to the subject and were published.

This study adopted a combined quantitative and qualitative method to research by using the survey questionnaire and published literatures. The researcher was able to gain the benefits of both quantitative and qualitative methodologies while also overcoming some of their drawbacks by using this combination approach. For the sample selection, stratified random sampling was used.

The stratification of a population into smaller groups known as strata is a critical component of the sampling technique known as stratified random sampling. Groups of people are separated into strata in a stratified random sampling according to shared characteristics or attributes. The terms proportionate random sampling and quota random sampling were also used to describe stratified random sampling.

Simple random sampling, on the other hand, involved choosing a sample of people at random from a population and including them in the sample. This technique of choosing people at random aims to choose a sample size that is an impartial representative of the population. However, it is not helpful if the population samples are very diverse. 2007 (Calderon and Gonzales).

### Data Analysis

An interviewer-administered questionnaire was employed by the researcher to the senior high student respondents. To elicit the most honest response from each responder based on their perception, a closed-type questionnaire using the Likert scale was used. For data analysis and interpretation, appropriate statistical procedures, such as Frequency Distribution, Percentage Distribution, person-r, and Analysis of Variance (ANOVA), were used.

## III. RESULTS AND DISCUSSION

### 1. Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents

Table 1 shows the Mean Rating on the Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents in terms of Nature and Mode of Transmission. Indicator 6, "The most common symptoms of COVID-19 are fever, dry cough, and tiredness. Other Symptoms that are less common and may affect some patients include loss of taste or smell, aches and pains, headache, sore throat, nasal congestion, red eye, diarrhea, or a skin rash." with weighted mean of 3.64, ranked 1<sup>st</sup> out of the 10 indicators with the descriptive rating of "Fully Aware" while indicator 2, "Coronaviruses are a diverse group of viruses infecting many different animals, and they can cause mild to severe respiratory infections in humans." with weighted mean of 3.25, ranked 10<sup>th</sup> and has a descriptive rating of "Fully Aware". The computed weighted overall mean of the table is 3.47 with a descriptive rating of "Fully Aware". This indicates that the respondents are fully aware on the nature of the virus and its mode of transmission.

**Table 3**  
**Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents in terms of Nature and Mode of Transmission**

Nature and Mode of Transmission	Mean	Descriptive Rating	Rank
1. COVID 19 is a new virus linked to the same family of viruses as severe acute respiratory syndrome (SARS) and some types of common cold.	3.58	Fully Aware	3
2. Coronaviruses are a diverse group of viruses infecting many different animals, and they can cause mild to severe respiratory infections in humans.	3.25	Fully Aware	10
3. COVID -19 can be characterized as a pandemic, this is due to the rapid increase in the number of cases outside China over the past 2 weeks that has affected a growing number of countries.	3.57	Fully Aware	5
4. The virus can be fatal in rare cases, so far mainly among older people with pre-existing medical conditions.	3.39	Fully Aware	6
5. The incubation period of COVID- 19 which is the time between exposure to the virus and symptom onset, is on average 5-6 days, but can be as long as 14 days.	3.36	Fully Aware	8
6. The most common symptoms of COVID-19 are fever, dry cough, and tiredness. Other Symptoms that are less common and may affect some patients include loss of taste or smell, aches and pains, headache, sore throat, nasal congestion, red eye, diarrhea, or a skin rash.	3.62	Fully Aware	1
7. The virus is transmitted through direct contact with respiratory droplets of an infected person (generated through coughing and sneezing)	3.61	Fully Aware	2

8. Individuals can also be infected from and touching surfaces contaminated with the virus and touching their face (e.g., eyes, nose, mouth)	3.58	Fully Aware	3
9. The COVID- 19 virus may survive on surfaces for several hours, but simple disinfectants can kill it.	3.36	Fully Aware	8
10. Many of the symptoms of COVID -19 can be treated and getting early care from a healthcare provider can make the disease less dangerous.	3.37	Fully Aware	7
<b>Overall Weighted Mean</b>	<b>3.47</b>	<b>Fully Aware</b>	

The result of the study is parallel to the result of the study conducted by Zaid et al. [9], that the participants generally had satisfactory knowledge of the main mode of disease transmission and the common symptoms of COVID-19, as half of the participants confirmed that transmission is via droplets from sneezing or coughing and from contaminated surfaces.

Table 4 shows the Mean Rating on the Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents in terms of Prevention and Control. Indicator 7, "Frequent handwashing using soap and water, or an alcohol-based hand rub prevent the spread of COVID-19." with weighted mean of 3.67, ranked 1<sup>st</sup> out of the 10 indicators with the descriptive rating of "Fully Aware" while indicator 2, "There is no currently available vaccine for COVID-19." with weighted mean of 3.03, ranked 10<sup>th</sup> and has a descriptive rating of "Aware". The weighted overall mean of the table 3.48 with a descriptive rating of "Fully Aware". This indicates that the respondents are fully aware of various ways and precautions in order to prevent and control covid19 infection.

**Table 4 : Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents in terms of Prevention and Control**

Prevention and Control	Mean	Descriptive Rating	Rank
1. Vaccination is the most effective method for a long-term strategy for prevention and control.	3.18	Aware	9
2. There is no currently available vaccine for COVID-19.	3.03	Aware	10
3. Masks are a key measure to suppress transmission and save lives and wear a mask when physical distancing is not possible.	3.48	Fully Aware	8
4. Wearing a medical mask can help limit the spread of some respiratory diseases. However, using a mask alone is not guaranteed to stop infections.	3.54	Fully Aware	6
5. Using face mask and face shield together has a higher tendency to prevent and control COVID- 19 transmission.	3.62	Fully Aware	2
6. Maintaining a safe distance of 1 meter from anyone who is coughing or sneezing, or any person can prevent COVID-19 transmission.	3.60	Fully Aware	3
7. Frequent handwashing using soap and water, or an alcohol-based hand rub prevent the spread of COVID-19.	3.67	Fully Aware	1
8. Making one immune system strong is a great defense against COVID- 19.	3.60	Fully Aware	3
9. Using gloves in holding and picking items touched by others reduces the possibility of COVID- 19 transmission.	3.49	Fully Aware	7
10. Reducing close contact to other people means reducing the tendencies of COVID-19 transmission.	3.56	Fully Aware	5
<b>Overall Weighted Mean</b>	<b>3.48</b>	<b>Fully Aware</b>	

The result of the study is similar to the study conducted by Alanezi [10], that focusing on awareness of preventive measures, participants exhibited good understanding, especially in relation to social distancing, covering mouth and nose while coughing or sneezing, avoiding close contact with symptomatic (flu, cough) persons, and seeking medical help in case the symptoms prolong after incubation period during quarantine. However, other preventive measures such as washing hands regularly and using hand sanitizers were only recognized by some of the participants. These two approaches are among the important measures which need to be considered on a daily basis to prevent being infected and contain the spread of the virus

## 2. Test the Significant Difference on the Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents

The computed Significant Values of 0.19, 0.54, 0.07, 0.54 and 0.07 which are higher than ( $>$ ) 0.05 Alpha Level of Significance, therefore the Null Hypothesis is accepted, hence, There is no significant difference on the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents in terms of nature and mode of transmission when grouped according to profile variable age, sex, course, year level and monthly family income.

Indeed, more accurate knowledge was significantly more likely among young adults, but intriguingly among respondents from rural areas, possibly reflecting that most of the participants were students, and that they all went back home, mostly to rural areas during the lockdown period. Srichan et al. [11] found marital status, education, occupation, annual income were significant factors associated with more accurate knowledge of COVID-19, whereas Zhong et al. [12] found that male sex, age-group of 16–29 years, marital status, education, employment and being a student were significantly associated with knowledge. Therefore, tailoring of the information provided by health officials and other media outlets on the disease needs to address the multifactorial nature of the drivers leading to reduced knowledge.

**Table 6 : Test of the Significant Difference on the Level of Consciousness and Health Protocols towards Covid 19 Pandemic Established at Home among Respondents Across Profile**

Grouping Variables		F- Value	Sig.	Decision ( $\alpha = 5\%$ )
Nature and Mode of Transmission	Age	1.49	0.19	Accept Ho (Not Sig)
	Sex	0.37	0.54	Accept Ho (Not Sig)
	Program	2.69	0.07	Accept Ho (Not Sig)
	Year Level	0.72	0.54	Accept Ho (Not Sig)
	Monthly Family Income	2.05	0.07	Accept Ho (Not Sig)
Prevention and Control	Age	1.44	0.21	Accept Ho (Not Sig)
	Sex	1.20	0.27	Accept Ho (Not Sig)
	Program	5.36	0.01	<b>Reject Ho (Sig)</b>
	Year Level	0.68	0.56	Accept Ho (Not Sig)
	Monthly Family Income	2.99	0.01	<b>Reject Ho (Sig)</b>

The computed Significant Values of 0.21, 0.27, and 0.56 which are higher than ( $>$ ) 0.05 Alpha Level of Significance, therefore the Null Hypothesis is accepted, hence, there is no significant difference on the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents in terms of Prevention and Control when grouped according to profile variable age, sex, and year level. On the other hand, the computed Significant Values of 0.01 and 0.01 which are lower than ( $<$ ) 0.05 Alpha Level of Significance, therefore the null hypothesis is rejected, hence, there is a significant difference on the Level of Consciousness and Health Protocols towards Covid19 Pandemic Established at Home among respondents in terms of Prevention and Control when grouped according to profile variable course and monthly family income.

This result contradicts to the study conducted by Gelaw and Andargie[13], that Sex, education level, religion, symptom, and knowing prevention methods were factors significantly associated with an understanding of COVID-19. Respondents who know all prevention methods are more likely to be aware of COVID-19 than its counterpart.

Moreover, the result that there is a significant difference on level of consciousness and health protocols towards covid19 Pandemic Established at Home among respondents in terms of Prevention and Control when grouped according to profile variable monthly family income is related to the study of Philippine Statistics Authority (PSA) and ICF Philippines National Demographic and Health Survey in 2017 that Low-income populations in the Philippines also disproportionately suffer from undernutrition, and in combination with lack of access to health care, we see rates of child mortality that are six times higher in the lowest wealth quintile, compared to the wealthiest.

## IV. CONCLUSION

The respondents' level of consciousness and health protocols towards covid19 pandemic established at home in terms of nature and mode of transmission and prevention and control is classified as Fully Aware. The respondents perceived no significant difference on Nature and Mode of Transmission when grouped according to profile variables and perceived that there is significant difference on Prevention and Control when grouped according to profile variable course and monthly family income. Based on the summary of the investigations and the conclusions arrived at, the researcher has offered several recommendations. The level of respondents' awareness and consciousness and health Protocols Established at Home towards covid19 pandemic are

respectively very high and very great according to all areas. To sustain progress and strengthen the knowledge of the student respondents, the respondents should get information through an official information channel that provide accurate information like the Department of Health information site to avoid getting hoax information that give confusion to the public. Parents and students should be knowledgeable on the signs and symptoms of the virus infection as well as on how to prevent and control the spread of the infection. Moreover, everyone should follow the minimum health standards guidelines given by the Inter-Agency Task Force (IATF) for the Management of Emerging Infectious Diseases. The school and community should work hand in hand and should have an implemented community engagement strategy that can be used to support in designing of interventions, building trust and community entry, social and behavior change communication, risk communication, surveillance and contact tracing, and logistical and administrative support during COVID-19 prevention and control responses. Lastly, a follow up studies along this line may be conducted in a wider perspective to see the consistency of the study and that other researchers to contribute new ideas and insights about the topic.

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