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Research Paper

Journal of Vaccination: Pre-Covid and Post-Covid

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ABSTRACT

Immunization has proven a vital part of public health & disease prevention (Covid) and yet remains a controversial topic in our society today. A disease that was responsible for significant morbidity has now become all but eradicated thanks to the introduction of vaccines. A vaccine is a pharmacologic compound that improves a person's immunity to a particular disease. Vaccines have proven to be effective against the Sars Cov-2 was in preventing serious illness and death. In a time of urgent need and measurable goal is essential. The prioritization and delivery strategy need to align to achieve maximum impact. The control of injection in the population is the long-term goal. The short-term goal is to prevent individual at highest risk and saves lives. **Keywords:** WHO, UNICEF.

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I. INTRODUCTION

A vaccine is a mild form of a disease that is injected into the body of a person or animal using an injection to protect the body against the disease and the act of Introducing a vaccine into the body to produce Immunity to fight against the disease is called vaccination. During this pandemic, countries are beginning to deploy covid 19 vaccines, bringing new hope to the fight against the global pandémic. WHO, UNICEF, and many more are working together to support countries in preparing the covid-19" vaccine.

II. RESEARCH OBJECTIVES

- All people get the correct information and are not influenced by disinformation, myths so misconceptions.
- The hesitancy of the public is addressing the covid-19 vaccination process.
- Provide correct consistent and timeline information on the new covid-19 vaccines (availability safety and timing) and vaccination process.
- Ensure that all eligible groups receive the vaccine with confidence.
- Address low-risk perception of the information amongst people and build on enabling environment to adopt and maintain covid appropriate behavior to reduce any risk of infection.

SCOPE

This study aims to show the readers the VACCINATION being faced by India today. Keeping in mind the various aspects we covered almost everything that it needs to be. The research design covers all urban, rural, and suburban regions irrespective of caste, creed, gender, inequality, favoritism, etc. Common people of different regions are the participants/respondents to this project. It took us 15-25 days to fully analyze our research. An opinion poll was conducted to know the perspective of diverse individuals. Thus, leads to the accomplishment of the project.

III. LITERATURE REVIEW

Vaccines are effective interventions that can reduce the high burden of diseases globally. This study aimed to investigate the acceptability of COVID-19 vaccines and their predictors in addition to the attitudes towards these vaccines among the public. An online, cross-sectional, and self-administered questionnaire was instrumentalized to survey participants on the acceptability of COVID-19 vaccines. A total of 250 participants completed the survey. The public acceptability of COVID-19 vaccines is fairly low (35.3%). Females are more likely to accept the Covid-19 vaccines by 71.6% and males by 28.4%.

Similarly, participants between the age of 18-25 are more likely to accept the Covid-19 vaccines by 89.3%. However, people above the age of 55 and Unemployed are less likely to take the vaccination.

Only 64.7% of the participants have taken Vaccination and in those people, only 37.2% of people agree that the process of getting vaccination is easier. The people who have taken the vaccine consider Covi-shield to be the most effective one among all the Covid-19 Vaccines. While on the other hand getting yourself register for the vaccination is quite a task for 35.3% of the participants and the rest found it easier.

Turns out that the COWIN website has got more vote by 54.2% for its convenience more than AAROGYA SETU which has got 45.8%.

According to the results, people believe and have seen positive changes in the graph of Covid-19 after vaccination derived.

But unfortunately, people are not satisfied with the prices at which the vaccinations are provided in India. Agreed by 52.1 % of participants.

Have a look at the detailed analyses from the survey...

1. GENDER:

The evidence from this pie chart shows that the mostly female population has filled this form. 71.6% of female participants have come up through this survey while only 28.4%. of male participants, has filled the forms.



Fig-1: More females have completed this survey than males.

2. AGE:

This pie chart shows that people between the age group of 18-25 have mostly completed this survey which is 89.3% while only 10.7% of other age group has come up through this survey.



Fig-2: People between the age of 18-25 have mostly completed this survey.

3. PROFESSION:

From this pie chart, we came to know that most students completed this survey which is 85.6%. While other such! As employed is 7%, unemployed is only 0.4% and self-employed are 7%.



Fig-3: Most students have submitted this survey out of all the participants.

4. GOT VACCINATED:

The evidence from this pie chart shows that only 35.3% of participants are being vaccinated and the rest are not which is 64.7% of the participants.



Fig-4: Out of all participants, only 35.3% of people have taken the vaccine.

5. IS GETTING VACCINATION EASIER:

From the above pie chart, we came to know that 37.2 % of the total participants disagree with the fact that getting vaccination is easier. Where 32.6 percent of the participants say that maybe it is easier and on the other hand 23.3 % agree and 7% strongly agree that getting vaccination is easier. We get to know that it is dependent on person to person which made it easier for the half and difficult for the other half.



Fig-5: Only 23% of the participants agree that getting vaccination done is easier.

6. IS IT EASIER TO REGISTER:

This pie chart shows that according to most of the participants i.e. almost 64.7% it easy to get yourself registered for vaccination while the other 35.3% that it is not easy to get registered for vaccination.



Fig-6: 64.7% of the participants believe that registration for vaccination is easier.

7. WHICH WEBSITE IS CONVENIENT TO REGISTER?

The evidence from the above pie chart shows that most of the participants i.e almost 54.2% things that it is easier from the website Cowin to get registered yourself for vaccination, while other huge percentages of participants i.e. almost 33.5% think that it is easier to register themselves for vaccination from Aarogya Setu app and a very less percentage i.e. 12.3% of participants think that it is easier to register themselves by covaxin.com.



Fig-7: Aarogya setu is the most convenient website for getting yourself registered for vaccination.

8. CHANGES OCCURRED IN THE GRAPH OF COVID-19 AFTER VACCINATION DERIVED:

-From the above pie chart, we get to know that almost 55.8 percent of the participants realized changes in the graph of covid-19 after vaccination, while the other participants i.e. almost 35.8% think that maybe there are the changes and the other 8.3% disagree with the fact that any changes have arrived in the graph of covid-19 after vaccination.



Fig-8: Most participants saw good changes in the graph of Covid-19 after the vaccine has arrived.

9. PRICES AT WHICH THE VACCINES ARE AVAILABLE:

As per the responses, an avoidable controversy has been created. People are not satisfied with the price at which vaccines available with 52.1% of the participants agreeing to the same.



Fig-9: The majority of participants are not satisfied with the prices at which the vaccines are available.

10. WHICH VACCINE IS MORE EFFECTIVE?

According to the pie chart, 56.7% of the participants believe that Covi-shield is the most effective vaccine and 43.7% of participants had voted for Covaxin, 12.6% for P-fizer, 18.1% for Sputnik, and 5.1% believes none of them is effective.



Fig-10: Most of the participants believe that Covi-shield is the most effective vaccine of all.

11. IN INDIA ARE VACCINATION CENTRES WORKING EFFECTIVELY?

This piechart shows that 49.3% in total agrees that vaccination centers in India are working effectively and 15.8% of the participants disagree with the same and the rest are confused.



Fig-11: Only 40.9% of the participants believe that vaccination centers are working effectively in India.

12. DO YOU THINK VACCINATION SHOULD BE COMPULSORY?

This pie chart shows that according to most of the participants i.e. 92.6% believes that vaccination should be compulsory while the other 7.4% don't agree to this.



Fig-12: 92.6% of the participants agrees with getting vaccination should be compulsory.

13. DOES VACCINATION PREVENT THE SPREAD?

From the above pie chart, we came to know that 51.6% of the total participants agree with the fact that vaccination prevent the Covid-19 spread. Where 8.8% of the participants say that it doesn't prevent the spread and the rest of participants i.e. 39.5% agrees and disagrees both.



Fig-13: According to the majority, vaccination prevents the spread of Covid-19.

14. HOW MANY MEMBERS IN YOUR HOUSE ELIGIBLE FOR VACCINES?

As we can conclude from the pie-chart given below, it shows that people above the age of 4 are eligible for the vaccination according to 53% of the people and the rest 43.7% agree to 2-3 years of age group should be eligible for getting the vaccination.



Fig-14: People above the age of 4 are eligible for being vaccinated.

15. IS NATURAL IMMUNITY BETTER THAN VACCINE ACQUIRED IMMUNITY?

The evidence from this pie chart shows that natural immunity is better than vaccine-acquired immunity. 49.3% of the participants agree to the same and the rest doesn't agree with it.



Fig-15: Most of the participants believe that natural immunity is better than vaccine acquired immunity.

16. DO MOST PEOPLE YOU KNOW ARE BEING VACCINATED / ARE GETTING THEIR CHILDREN VACCINATED?

This piechart shows that 62.6% of people have vaccinated themselves and their children and some 19.4% haven't vaccinated and 19.4% are not sure.



Fig-16: According to the participants, most of the people are getting themselves and their children vaccinated.

17. DO YOU THINK OUR GOVERNMENT IS DOING WELL DURING THIS PANDEMIC?

This piechart shows that 32.6% people think that govt. is doing well in this pandemic and 33% of people think that govt is doing nothing to improve the situation while 34.4% are confused.





LONG TERM AND SHORT TERM GOALS

The control of infection in the population is the long-term goal. The short-term goal is to protect individuals at the highest risk and to save lives. The deaths from co vid-19 show clearly that those who are the oldest are at the greatest risk of severe disease and mortality, with distinct stratification of severity by age, followed by those with comorbidities such as diabetes mellitus and hypertension. Yet, the risk of severe disease and death among younger people, though low, is not zero, and therefore when large numbers of young people get infected some of them will die even with the best medical management. Nonetheless, the goal of preventing the maximum number of severe cases and deaths requires an age descending

Approach. This was indeed the strategy that was initially implemented in India, but the opening of the age tiers has not kept pace with the supply. The government has not revealed a clear road map of the availability of vaccines and their supply to individual states. This has highlighted the reluctance by the government of India to reveal information that would help in formulating a predictable delivery mechanism that could be communicated to citizens.

Coupled with the anti-science statements made by those seen as close to the government, this has led to a situation where the public is confused as to how best to cope with the novel coronavirus pandemic. With the promise of vaccines as at least a partial solution, but with no certainty on availability, doubt, fear, anxiety, and depression are widespread.

To move forward, we must accept that it is extremely unlikely that we will achieve the goal of vaccinating every adult by the end of 2021. Therefore, based on the principles of public health, we must vaccinate those most at risk from serious illness and death first. Based on population pyramid data, we can extrapolate that there are about 360 million above the age of 45 years. Even though recent data from the united kingdom with the delta variant indicates slightly lower effectiveness against severe disease requiring hospitalization with a single dose (71% with one dose and 92% with two doses), the high rates of previous exposures in India may make it feasible to immunize a large part of our population with a single-dose, at least initially

POSITIVE AND NEGATIVE IMPACTS

The COVID-19 pandemic has posed multiple substantial challenges, affecting not only public health but also economic systems, socio-cultural patterns, and political institutions. Studies have focused on the relationships between complex emergencies and natural disasters with outbreaks of infectious diseases. However, there is a dearth of relevant literature on the impact of a global pandemic on vaccination programs - an important topic because delays or stops in such programs are likely to result in outbreaks and epidemics of other infectious diseases. Thus, this article discusses the negative and positive impacts that the COVID-19 pandemic may exert on vaccination for vaccine-preventable diseases (VPDs). Negative impacts include the increased risk of VPD outbreaks in low-resource countries where vaccination programs must be temporarily halted to prevent the spread of infection. Positive effects include the strong possibility that the universally recognized need for a coronavirus vaccine may increase people's appreciation for vaccines in general, resulting in improved vaccination uptake once the pandemic passes. Concerned stakeholders, such as governments and the World Health Organization (WHO), should seize this moment to effectively build on these positive impacts by planning renewed and revitalized post-COVID vaccination programs.

IV. CONCLUSION

In conclusion, a considerable percentage of the population (92.6%) indicated an approval to get vaccinated, while 7.4% were not sure. Vaccines perceived safety concerns and costs were associated with this approval. Hence, the health authorities via health care providers, who were identified by the people as the most trust source of information regarding information about COVID-19 vaccines, should design interventions in terms of awareness campaigns via all types of multimedia to spread more transparent information about the safety and efficacy of the vaccines. The awareness campaigns should also shed the light on the new technology that was utilized in the production of a few of them to boost COVID-19 vaccine acceptance. Making the vaccine available for free or at subsidized prices by the government could as well enhance vaccine acceptance among the population.

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