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Awareness, Facts, and Fallacy about Coronavirus in Duba Community

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Abstract:
Background*: People are aware of the coronavirus (COVID-19) disease. There is no treatment and vaccines are available to prevent this new virus[3]. Because of misleading information that was found in social media about corona virus, some people create their own remedies which give a wrong notion for the treatment of coronavirus[27]. It is essential to identify the facts and fallacy about coronavirus transmission and prevention[12].*
Objective: *To assess the awareness of the respondents on coronavirus. To determine the knowledge on facts and fallacy on coronavirus in Duba Community*
Materials and Methods*: A closed-ended survey questionnaire was used in the study. It consists of multiple choices for the source of awareness and true or false about facts and fallacy of coronavirus. A multiple- choice and true or false response were used to determine the level of agreement. The data were gathered and consolidated using excel and SPSS 16 for the significance of the study. A total of one hundred thirty (130) respondents participated in the study. The present study used percentage and frequency for the tabulation of data. Chi-square was also employed using a 0.05 level of significance.*
Results*: Most of the respondents source of awareness came from cell phones/internet, followed by the health workers, then from a friend, subsequently from TV programs, and lastly from the newspaper. The respondents in the study had a good knowledge regarding facts and fallacy about coronavirus and their differences were statistically significant.* ***Conclusion****: Majority of the respondents (92.6%) understood the fact that coronavirus transmitted by coughing and sneezing. Most of the respondents believed the fallacy statement that kids cannot get coronavirus. Recommendation: Regular updating about facts and fallacy about coronavirus in social media such as Twitter, WhattsApp, IMO, Facebook, etc. should be continued to maintain awareness about new information regarding coronavirus transmission and prevention.*
Key Word*: Coronavirus, awareness, fact, fallacy*

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I. Introduction

Background of the study
Coronavirus disease has been increasingly infecting people in most countries. Information about coronavirus from different sources could lead us into our beliefs and practices on transmission and prevention of coronavirus. There's a lot of information circulating about COVID-19, the disease caused by the new coronavirus, so it is important to know what is true and what is not[11].
Sahoo et al (2020) remarked:
"Myth is commonly considered as a folklore genre consisting of narratives/stories that play a fundamental role in human beings' everyday lives. These are often endorsed by leaders/rulers/religious preachers and explain to a great extent the functioning of a society and shape the beliefs of people."
In the absence of a technical knowledge on coronavirus, online misinformation has flourished. The World Health Organization (WHO) provided claims about the treatment and prevention of coronavirus online[27]. Similarly, Live Science, 2020 compiled a list of the most pervasive myths about the novel coronavirus SARS-CoV-2 and COVID-19, the disease it causes and, explained why these rumors are misleading, or just plain wrong[29]. Some articles separated fiction from fact and the most up to date information about coronavirus and update the coronavirus information regularly as discoveries become known[31].

From the given studies, the researcher believed that accurate information provided online and updating it regularly with the help of the experts will lead a better understanding regarding the facts on coronavirus. This belief sought to promote by answering certain questions in this study.

II. Methodology

Research Design

The present cross-sectional study was conducted from May to July 2020 among people in Duba Community, Saudi Arabia. Before the distribution of the questionnaire, the consent was obtained from the supervisor of the Medical Technology Department after explaining the purpose of the study.

A close-ended survey questionnaire was prepared with 10 questions. Question number one is about the sources of awareness of the respondents about coronavirus. The choices include a. health worker, b.TV program, c. Newspaper, d. Friend, e. Cell phone/Internet. Question two to ten are about the facts and fallacies about coronavirus and were answered by true or false by the respondents. The survey was consolidated using Excel and SPSS in terms of percentage and frequency.

For example, in question number 2 states that coronavirus can be transmitted by coughing and sneezing. This statement is a fact and the correct answer will be true. For question number three, is a pet at home transmit coronavirus? The correct answer will be false because there is no evidence that coronavirus can be transmitted by pets. This statement was considered a fallacy regarding coronavirus transmission. The remaining questions will be found in Table 1.

Participants of the Study

A total of 130 respondents were selected in the study. Saudi citizens were composed mostly of teachers and students in Duba Community. Non-Saudi citizens or expatriates comprise Filipinos, Bangladeshi, Sudanese, Indian, Egyptian, Yemeni, Iraqui, Nepali, Sri Lankan, Jordanian, Pakistani, Canadian and Dutch. The age group of the participants was between 18 to more than 55 years old. Participants residing outside Duba community were excluded from the study.

Data Gathering Procedure

The research was conducted in Duba community. The distribution of the questionnaire was consisting of two parts. The first one was by sending a link of a questionnaire to respondents through social media like WhatsApp and Facebook for teachers and students in Duba community. The second part was the distribution of a hard copy of English and Arabic questionnaire. The places of distribution of questionnaires were in the Beach front, Fast food, and small stores in Duba community.

Statistical Treatment

The data obtained from the samples were recorded in Excel and SPSS version 16. The age, status, educational background and citizenship of the respondents were entered in data sheet. In the analysis of data in SPSS frequency and percentage was obtained. Graphs, figures, tables were employed during statistical analysis and interpretation of data.

III. Summary of Findings, Conclusions and Recommendations

The study aimed to assess the awareness of the respondents on coronavirus. This study determined the knowledge on facts and fallacy on coronavirus using a survey questionnaire.

Specifically, the researcher will answer the following questions:

1. What is the profile of the respondents when group as follows?

a. Gender and age
b. Status and degree
c. Saudi and Non-Saudi participants

2. What are the sources of information on the awareness of respondents on coronavirus when they were grouped using the following?

a. Health worker
b. TV program
c. Newspaper
d. Friend
e. Cell phone/internet

3. What are the facts and fallacy results on coronavirus among respondents after employing the following?

a. corona virus transmitted by coughing and sneezing
b. pet at home transmitting corona virus
c. corona virus transmitted thru mail

d. stop shaking hands and hugging people
e. kids cannot get corona virus
f. people got corona virus will die
g. no current treatment for coronavirus
h. antibiotic can treat corona virus
i. garlic can treat corona virus

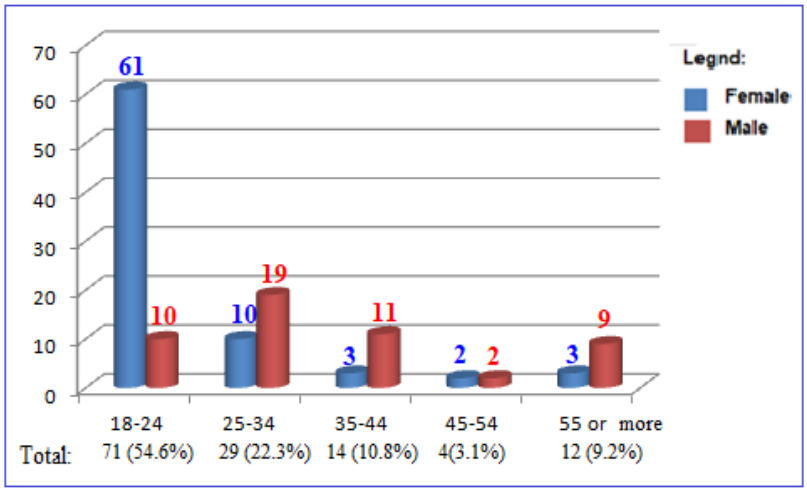
4. Is there a significant difference between the five sources of information on the awareness of respondents?

5. Is there a significant difference between the nine questions on the facts and fallacy about coronavirus?

Findings of the study

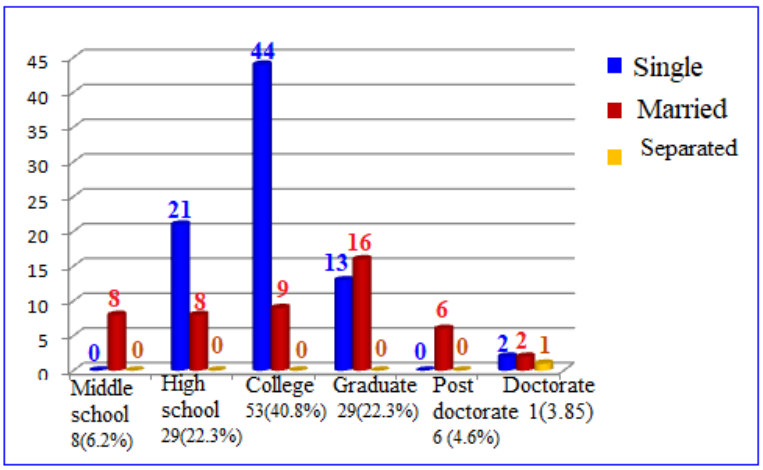
1. The profile of the respondents in terms of gender and age, status and degree and Saudi and Non-Saudi participants.

Bar graph 1. Gender and age distribution of selected respondents



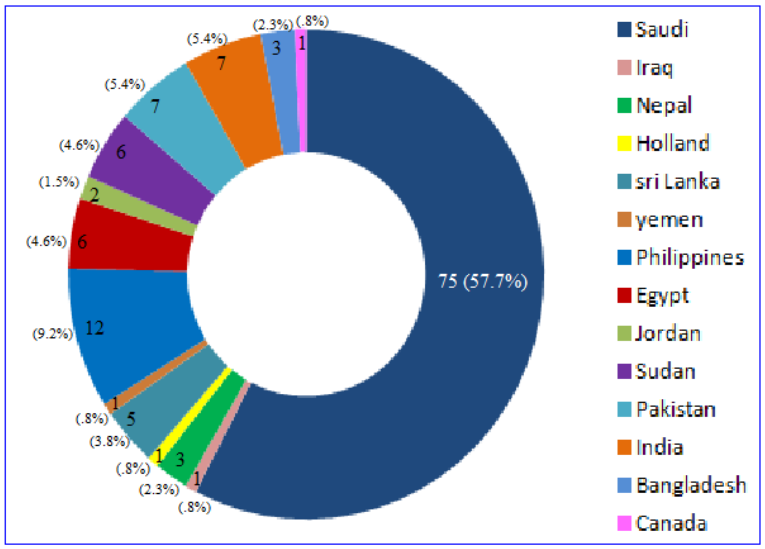
Bar graph 1. In the present study, majority of the respondents were: 18-24 years old, 71(54.6%) with (61 female, 10 male); 25-34 years old, 29 (22.3%) with (10 female, 19 male); 35-44 years old, 14 (10.8%) with (3 female, 11 male); 45-54 years old, 4 (3.1%) with (2 female, 2 male); 45-54 years old, 4 (3.1%) with (2 female, 2 male); age 55 or more, 12 (9.2%) with (3 female, 9 male).

Bar graph 2. Status and degree distribution of selected respondents



Bar graph 2. In terms of status and degree: most of the respondents were), 53 (40.8%) were college (44 single, 9 married); 29 (22.3%) graduate (13 single, 16 married, 0 separated); 29 (22.3%) were high school (21 single, 8 married and 0 separated); 8 (6.2%) middle school (8 married, 0 single and 0 separated); 6 (4.6%) post doctorate (6 married, 0 single and 0 separated); and 1 (3.85%) doctorate (2 married, 2 single and 1 separated).

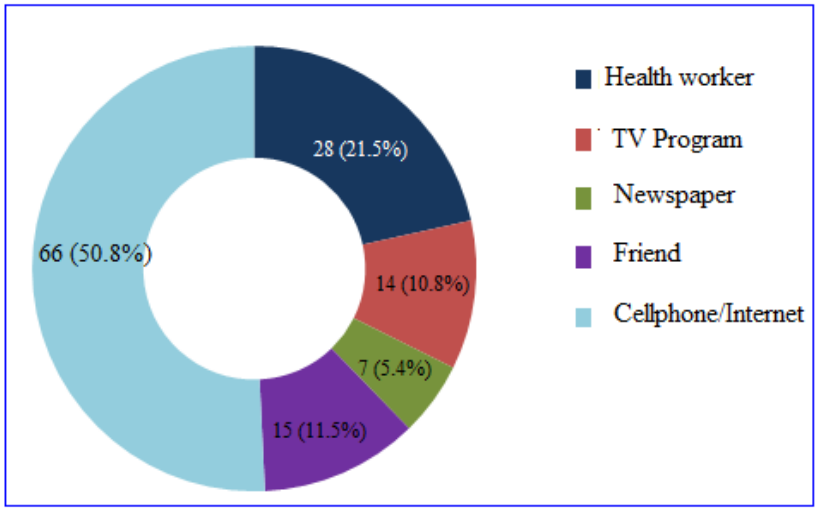
Doughnut graph 1. Saudi and Non Saudi degree distribution of selected respondents



Doughnut graph 1.Reveals that 75 (57.7%) of the respondents were Saudi while 55(42.35) were Non-Saudi which includes: Iraq: 1(.8%), Nepal: 3(2.3%), Holland: 1(0.8%), Sri Lanka; 5(3.8%), Yemen; 1(0.8%), Philippines; 12 (9.2%), Egypt; 6(4.6%), Jordan; 2(1.5%) Sudan; 6(4.6%), Pakistan; 7(5.4%) India; 7(5.4%), Bangladesh; 3(2.3%), Canada; 1(0.8%).

2. The result of the sources of information on the awareness on coronavirus.

Doughnut graph 2. Source of awareness of respondents



Doughnut graph 2.Illustrate that 28 (21.5%) source of awareness were from health workers: 14 (10.8 %) TV Program; 7 (5.4%) Newspaper; 15 (11.5%) Friend while 66 (50.8%) were from cell phone /internet.

Sixty-six (50.8%) of the respondents showed that their source of awareness about transmission and prevention of coronavirus was from cell phone/internet. This finding is closely connected to: Mobile phones provide an instant connection to friends and family to allow greater ease of communication[14]. The COVID-19 pandemic has resulted in misinformation about the scale of the pandemic and the origin, diagnosis, prevention, and treatment of the disease on social media[36].

Misinformation about coronavirus transmission and treatment would lead to harmful effects on our health. This statement is supported by The World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) made accurate and up-to-date information on websites about coronavirus[3]. Furthermore, to maintain standards and accountability about updates for coronavirus, Newsguard was made to produce credible news about coronavirus in social media[16]. Moreover, by using a cell phone and social media, there was a Clinician On-Call Center hotline through the Centers for Disease Control and Prevention (CDC) that provides information on a wide range of topics, such as diagnostic prevention and control about coronavirus [13].

Twenty-eight (21.5%) of the respondents source of awareness were from the health workers. Similar to this finding is attested by health workers provide information about transmission and prevention of coronavirus. Evidently, they are working as front liners in taking care of the sick patients[7]. Obviously, at times, they are anxious about the spread of disease to their family. They are devoted and compassionate to their chosen vocation to help coronavirus patients until they have recovered[15]. In fact, in France, French health care gave recognition to front liners in the fight against coronavirus pandemic[23].

Fifteen (11.5 %) of the respondents source of awareness came from friends. A friend is an important person you love, respect, and trust[5]. This finding corresponds to the data that friends are sometimes asking for advice even they know the right thing to do. They just want to confirm the information for themselves[6]. Particularly, myth and half-truth about coronavirus continue to rise in social media. Finding someone like a friend to stay informed about the current truth on coronavirus will help them distinguish between accurate and myth information about coronavirus[1].

Fourteen (10.8%) respondents source of awareness about coronavirus was from TV programs, since the students are staying at home because of coronavirus pandemic. This result is closely related to the report in the State of Idaho, they provide a special live program about coronavirus updates, distance learning websites for teachers and students. They also locally produce Science Trek for kids[33]. In addition, in California, a first broadcast CBS network shifts its full schedule for official held a conference announcing testing guidelines and updating COVID-19 in their television program[34]**.**

Seven (5.4%) of the respondents source of awareness about coronavirus was from newspaper. This finding denotes connection with the study that a newspaper gives information and opinions about current events and news. People read them to stay informed about current events in their community, state, or country[25].

In the United Kingdom, distribution of national newspaper decrease from nearly 22 million in 2010 to 10.4 million in 2018 while increase usage of social media (Twitter, WhatsApp, Instagram, and Snapchat) for news have increased[25].

3. The result of the facts and fallacy on coronavirus after employing the survey questionnaire**.**

Table 1. The questionnaire of the respondents used in the study

Q1. Choose one source of information mostly seen prevention and transmission of the coronavirus a. health worker b.TV program c. Newspaper d. Friend e. Cell phone/Internet		
Q 2. Is coronavirus can be transmitted by coughing and sneezing?	True	False
Q 3. Is pet at home transmitting coronavirus?	True	False
Q 4. Is coronavirus transmitted thru mail?	True	False
Q 5. Is stop shaking hands and hugging people- for now, will prevent transmission of coronavirus?	True	False
Q 6. Our kids cannot get coronavirus?	True	False
Q 7. When people got coronavirus, they will die?	True	False
Q 8. There is no current treatment for coronavirus?	True	False
Q 9. Can antibiotics can treat coronavirus?	True	False
Q 10. Can garlic treat coronavirus?	True	False

Table 1. Demonstrates the 1-10 questions which include: Question 1: contains 5 sources of information about awareness of transmission and prevention of coronavirus while Question 2-10 comprises about the truth and myth about coronavirus

In question no 2. One hundred twenty three (94.62%) respondents answered correct about transmission of corona virus by coughing and sneezing while 7 (5.38%) responded wrong. This question is considered a fact about COVID-19. This is justified by the fact close proximity with one coughing and sneezing infected person can easily transmit the corona virus[28]. Social distancing guidelines has recommended a 6 feet rule to prevent the transmission of coronavirus through coughing and sneezing[10.]

In question no 3. Eighty one (62.31 %) respondents were answered correct, 48 (36.92%) responded wrong, 1 (0.77 %). There was no transmission of corona virus through pets. This is in connection with the fact that this statement was considered a fallacy because there was no proven evidence that pets such as dogs and cats can spread coronavirus. However, washing of hands with soap and water after handling pets are advised[19].

In question no 4. Ninety five (73.08 %) got the correct answer while 30 (23.08 %) has wrong answer with 2 (1.53 %) missing and 3 (2.31%) answered maybe. Question 4 is considered a fallacy because corona virus cannot be transmitted thru mail. This is similar to the World Health Organization (WHO) stated that coronavirus will not be survived on objects like letters or packages[8].

In question no 5. One hundred eighteen (90.77 %) answered correct while 12 (9.23%) got wrong. Equally important is that no shaking of hands is considered a fact about corona virus. Handshaking represents a deeply established social custom[32]. Microbes that cause respiratory infection can be transmitted to others by handshaking. Experts advised the public to stop handshaking to prevent the transfer of respiratory infection to others[35]. To prevent the transmission of coronavirus by handshaking high five and fist bump greetings were proven effective as compared to handshaking[21].

Question no 6. Shows that one hundred ten (84.62 %) answered correct while 20 or (15.38%) responded wrong. This statement is considered a fallacy because children certainly can get coronavirus. This can be associated with the report of a Center for Disease and Control Prevention (CDC) studied more than 1.3 million COVID-19 patient in the U.S. children below age 9 has 52 cases per 100,000 people in that population of children; compared to the 400 cases (of any age) per 100,000 people as a whole population in the United States[29]. Corona virus can easily spread to others because most children with coronavirus were asymptomatic[2]. World Health Organization (WHO) informs all ages to take care of themselves from the virus, by doing hand washing and proper hygiene[37]

In question no 7. Ninety six (73.85 %) answered correct, 33 (25.38%) wrong, 1 (0.77% answered maybe. This phrase is considered a fallacy because not all patients with COVID-19 will die. This is relative to the information of the Chinese Center for Disease Control and Prevention reported recently that 80.9% cases of COVID-19 were mild and has no special treatment are required[24]. Scientists believe that it depends on the amount of virus that was transmitted to the patient that causes disease or death. According to WHO, 95% of those patients who died of corona virus are over the age of 60. Most of these patients have a combined condition like diabetes, renal disease, and other diseases[4].

In question no 8. Ninety-six (73.85%) replied correct, 34 (26.15%) got wrong .This statement is considered a fact. This has likeness with the declaration of WHO stated that currently, there was no treatment for the COVID-19 virus[12]. However, when a patient was infected with corona virus they should receive medical treatment[26.] Furthermore, the Food and Drug Administration (FDA) open Coronavirus Treatment Acceleration Program (CTAP) to find a new treatment for COVID -19 patients[9].

In question no 9. Eighty seven (66.92 %) answered correct, 42 (32.31%) wrong, 1 (0.77%) missing. This sentence is considered a fallacy because antibiotic is not used to treat coronavirus. Identical is the finding that the antibiotic was utilized to treat bacteria. COVID-19 is a virus. When a patient with COVID-19 has a bacterial complication, antibiotics will be recommended by the physician[17].

Lastly, Question no 10. This statement was considered a fallacy. Most respondents got 95 (73.08 %) correct, 33 (25.38%) wrong, 1 (0.77%) no answer, and 1 (0.77%) answered maybe. Garlic can cure coronavirus is a fallacy. Parallel is the announcement that although garlic has antimicrobial properties, there is no data stated that garlic can cure for coronavirus[17]. Garlic has allicin which has a sulfur compound against Gram-negative and Gram-positive bacteria[22]. Coronavirus is not a bacterium.

4. On the question whether there is a significant difference between the five sources of information on the awareness of respondents, below are the findings:

Most of the students' source of awareness yielded 66 (50.8%) were from cell phone /internet; 28 (21.5%) source of awareness were from health worker; 15 (11.5%) from Friend; 14 (10.8 %) from TV Program; 7 (5.4%) from Newspaper. The Pearson Chi-Square value of 14.823 with the critical f-value of .005

This suggests that the null hypothesis was rejected. Therefore, there is a significant difference between the five sources of information on the awareness of the respondents.

5. On the question whether there is a significant difference between the nine questions on the facts and fallacy about coronavirus, the following are the findings:

Question	n-130	%	Chi-square value	p-value
Q 2. Is corona virus can be transmitted by coughing and sneezing?				
Correct	123	94.62	.041	.840
Wrong	7	5.38		
Q 3. Is pet at home transmitting corona virus?				
Correct	81	62.31	2.505	.286
Wrong	48	36.92		
No answer	1	0.77		
Q 4. Is corona virus transmitted thru mail?				
Correct	95	73.08	9.733	.021
Wrong	30	23.08		
Missing	2	1.53		
Maybe	3	2.31		
Q 5. Are stop shaking hands and hugging people will prevent transmission of corona virus?				
Correct	118	90.77	1.123	.289
Wrong	12	9.23		
Q 6. Are kids cannot get corona virus?				
Correct	110	84.62	12.685	.000
Wrong	20	15.38		
Q 7. When people got corona virus, they will die?				
Correct	96	73.85	2.109	.348
Wrong	33	25.38		
Maybe	1	0.77		
Q 8. There is no current treatment for coronavirus?				
Correct	96	73.85	1.183	.277
Wrong	34	26.15		
Q 9. Can antibiotic can treat corona virus?				
Correct	87	66.92	1.500	.472
Wrong	42	32.31		
Missing	1	0.77		
Q 10. Can garlic can treat corona virus?				
Correct	95	73.08	2.958	.398
Wrong	33	25.38		
Missing	1	0.77		
Maybe	1	0.77		

Table 2. Q2 were: 123 (94.62% correct) 7 (5.38% wrong) (Chi-square .041 with p-value.840). Q3: 81(62.31 % correct) 48 (36.92 % wrong), 1 (0.77 % no answer), (Chi-square 2.505 with p-value .286). Q4: 95 (73.08 % correct) 30 (23.08 % wrong), 2 (1.53 missing), 3 (2.31 maybe), (Chi-square 9.733 with p-value .021). Q5: 118 (90.77 % correct), 12 (9.23 wrong), (Chi-square 1.123 with p-value.289). Q6: 110 (84.62 % correct), 20 (15.38 wrong), (Chi-square 12.685 with p-value.000). Q7: 96 (73.85 % correct), 33 (25.38 wrong), 1 (0.77 maybe), (Chi-square 2.109 with p-value.348). Q8: 96 (73.85% correct), 34 (26.15 wrong), (Chi-square 1.183 with p-value .277). Q9: 87 (66.92 % correct), 42 (32.31 wrong), 1 (0.77 missing), (Chi-square 1.500 with p-value.472). Q10: 95 (73.08 % correct), 33 (25.38 wrong), 1 (0.77 missing), 1 (0.77 maybe), (Chi-square 2.958 with p-value.398).

This suggests that the null hypothesis was rejected. Therefore, there is a significant difference between the nine questions on the facts and fallacy about coronavirus.

IV. Conclusion

On the basis of the findings of the study, the following conclusions were formulated:

More than one third (50.8%) of the respondents sources of information for the awareness of coronavirus were from cell phones and internet. A great number (92.6 %) of respondents believed the fact that coronavirus transmitted by coughing and sneezing. Almost half (62.31 %) of the respondents considered that pets can transmit coronavirus was a fallacy. More than half (73.08 %) of respondents understand that coronavirus can be transmitted through the mail was a fallacy. Two thirds (90.77%) of the respondents believed

the fact that discouraging handshakes and hugs will avert the spread of coronavirus. Eighty four point sixty two percent (84.62 %) of the respondents thinks the statement that kids cannot get coronavirus was considered a fallacy. The majority (73.85 %) of the respondents believed that the statement that all patients with COVID-19 will die. Similarly, (73.85 %) of the respondents' understood the fact that currently there is no treatment for COVID-19. An average number (66.92 %) of respondents recognized the fallacy about antibiotic can treat coronavirus. Greater part (73.08 %) of respondents knew the fallacy about garlic can treat coronavirus.

V. Recommendation

Public awareness should be raised to follow evidence-based preventive measures like hand hygiene, social distancing, and wearing mask in public and infection control measures for protection against coronavirus through social media like, Twitter, WhatsApp, IMO, Face book, and YouTube. The public should be informed of the facts and fallacy about transmission and prevention of coronavirus on social media. People should be reminded through social media to always follow reliable websites such as WHO and CDC websites to keep informed regarding coronavirus. Parents at home should advise simple preventive measures like hand washing, use alcohol, wearing a mask in public, and social distancing are important to prevent the spread of coronavirus to their children. Reminding each other to seek medical help as soon as possible if a person has signs and symptoms of coronavirus.

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