



# **AN ASSESSMENT OF THE KNOWLEDGE AND PERCEPTION OF STREET ELDERS TOWARDS COVID-19 IN CASE OF WOLAITA SODO CITY**

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<b>Received:</b> 2 <sup>nd</sup> January 2021 <b>Accepted:</b> 13 <sup>th</sup> January 2021 <b>Published:</b> 3 <sup>rd</sup> February 2021	This study is conducted in Wolaita Sodo city, and street elders are the subject of the study. The study aimed to assess knowledge and perception of street elders to covid 19. Judgmental sampling technique used to select 10 respondents of the study. Descriptive research design together with survey, unstructured interview and observation research methods used in the study. Both qualitative and quantitative data analysis techniques are employed in the study to analyze primary and secondary data. The research found that study participants have moderate level of knowledge about symptoms, preventive strategies and transmission mode of the Covid 19. Moreover the study found that the study participants perceived covid 19 as sever disease and they perceived as they are more susceptibility to covid 19. Though they recognize their high susceptibility to covid 19 and the severity of the disease, they are unable to practice any preventive strategies due to their financial limitation, style of life in the street and lack of awareness.

**Keywords:** Wolaita Sodo city, covid 19, style of life, street and lack of awareness.

## **1. INTRODUCTION**

Among the devastating pandemics our earth has hosted throughout human history, Covid 19 is lined in the first row. More than 16.8 million individuals have been affected by this new pandemic and more than 650, 000 individuals were died. U.S.A and Brazil are leading nations interms of the number of deaths recorded due to the pandemic. United States of America has alone registered around 4.3 million victims and nearly 151, 000 of them has passed away. The number of death also passed 88, 000 in Brazil (WHO, 2020).

Due to this new pandemic, countries were lockdown their factories, canceled their home and international flights, shutdown their tourist attraction areas and restricting cross-boundary peoples movement. This in turn highly affected their annual growth rate. For instance some economist forecast USA economy will go down by 3% in the coming year (Herald newspaper, 2020). Since those factories were forced to fired their workers, unemployment has increased dramatically and it created financial burden on the government. In addition to this broad impact of the pandemic at national level, private trans-boundary and huge companies became in economic crisis. For instance Boing plane factory has reported a 1 billion dollar crisis due to the spread of novel corona virus (Herald newspaper, 2020)

In addition to those massive economic crises, the covid 19 pandemic has also resulted political disputes between nations. For instance the two giant countries, China and U.S.A, have entered weapon less war because of the virus. United States of America released from World health organization, public election in Singapore and some Latin American countries are postponed. Public oppositions are started in U.S.A and Brazil by opposing governemts late commitment to combat the virus (Addis Zemen newspaper, 2020)

When we come to Ethiopian context, the new pandemic has also outcome multiple crises interms of human life, economy and social life. Interms of human life the new pandemic has affected more than 15,800 individuals and based on the latest report more than 259 individuals are died because of the pandemic (Ministry of health, 2020).

Universities, many factories, international flights and broad public markets are lockdown in our country because of the virus. The virus forced the government of Ethiopia to retransfer huge amount of budget in health sector in the cost of others and import variety of medical equipment from abroad that used in combating the virus (Addis Zemen newspaper, 2020). Many, both governmental and nongovernmental, organizations also become subjected to the adverse effect of covid 19. For Instance Ethiopian Airline Company reported more than 2 billion birr crises due to the lockdown of international flights. At individual level the new pandemic has created so much economic crises. Individuals are fired from their work, forced to take debit from their friends and workplace, resulted the high occurrences of several sexual harassments, rapes and crimes (Addis Zemen newspaper, 2020).

Even though the new pandemic has affected all segments of society, some group of people are more exposed to severe problem than others because of their limited coping strategies and their low socio-economic status. Among the more highly vulnerable group of peoples, street elders are front runner. This is due to various factors which include low knowledge level of covid 19, high risk to related disease, lack of safer places to spend their nights, declining of biological resistance and their economic hardship in effectively implementing preventive strategies rendering them vulnerable to the pandemic (Ministry of health, 2020). Despite their reasonable number and high degree of vulnerability, street elders are not believed to have been adequately addressed by covid 19 prevention and impact mitigation programs in Ethiopia due to different factors, including lack of targeted interventions and isolation of the street elders from the mainstream community (Ministry of health, 2020).

Health-preventive behaviors and strategies during a pandemic are associated with more accurate knowledge and perception about the virus (Li, J. et.al, 2020). Though many researches recently conducted with related to knowledge, attitude and perception of population towards covid 19 like Community Perception, Knowledge, Attitude and Practice Survey in Afghanistan (Noor Ahmad et. at, 2020), perceptions and Awareness of Covid-19 (Coronavirus) in Cameroon (Exodus Akwa, 2020), Knowledge, perception and attitudes in regard to Covid-19 pandemic in Peruvian Population of Peru (Zegarra-Valdivia, et.al, 2020) and knowledge, perceptions and preventive practices towards Covid-19 among Jimma University Medical Center visitors, Southwest Ethiopia (Yohannes Kebede et.al, 2020), it has little said about street elders and their knowledge and perception towards the new pandemic. Studying street elder's knowledge about the new pandemic and their perception about their susceptibility, severity and preventive strategies of the new pandemic help to make appropriate intervention programs. Therefore this study tried to:

- Investigate the knowledge and perception of street elders towards covid 19

### **1.1 Significance of the study**

This research is useful for students or other interested individuals who conduct study related with the topic that I have investigated. It used as a secondary review document and it provide clues on what methods, research design and approaches are important for them during their study. Moreover this research also provides important information about street elder's knowledge, perception and susceptibility of the new pandemic to the government or city administrator. This in turn helps to identify what important measurements should take to minimize street elder's vulnerability to the pandemic and the effect of the pandemic on them.

### **1.2 Scope of the study**

The study is limited in Wolaita Sodo town in it's geographical coverage and street elders in its population inclusion. Thematically the study delaminated to the knowledge and perception of street elders to the new pandemic of covid 19.

## **2. LITERATURE REVIEW**

### **2.1. Corona virus: it's symptoms, mode of transmission and preventive strategies**

Coronaviruses (CoV) infections are emerging respiratory viruses and known to cause illness ranging from the common cold to severe acute respiratory syndrome (SARS) (Zhou P, Yang XL, Wang XG, et al., 2020). Corona virus is zoonotic pathogens that can be transmitted via animal-to-human and human-to-human (Guo YR, Cao QD, Hong ZS, et al., 2020). Multiple epidemic outbreaks occurred in the world during 2002 (SARS) with resulted 800 deaths and 2012 (Middle East Respiratory Syndrome: MERS-CoV) with 860 deaths (Guo YR, Cao QD, Hong ZS, et al., 2020, Andersen KG, et.al., 2020). Approximately eight years after the MERS-corona virus epidemic, the current outbreak of

novel coronavirus Covid-19) in Wuhan City, Hubei Province of China, has emerged as a global outbreak and significant public health issue(Zhang T, Wu Q, Zhang Z. ,2020).

On 30 January 2020, the World Health Organization (WHO) declared Covid-19 as a public health emergency of international concern (Coronavirus Resource Center, 2020). Astonishingly, in the first week of March, a devastating number of new cases have been reported globally, emerging as a pandemic. As of 9 March 2020, more than 110,000 confirmed cases across 105 countries and more than 3800 deaths have been reported (Centers for Disease Control and Prevention, 2020). At the moment 16.9 million peoples are infected by novel corona virus and among them over 650,000 peoples were died.

The COVID-19 is spread by human-to-human through droplets, feco-oral, and direct contact, with an incubation period of 2-14 days (Centers for Disease Control and Prevention, 2020). . The most common presenting symptoms in the general population are fever, cough, dyspnea, and or fatigue. So far, no antiviral treatment or vaccine has been recommended explicitly for Covid-19. Therefore, applying the preventive measure like consistent use of face masks and alcohol, staying at home, controlling body temperature and avoiding physical contact to control Covid-19 infection is the utmost critical intervention.

## **2.2. Covid 19 and elders**

Though the novel corona virus is not selective and affected all segments of society, elders are the more commonly infected group of peoples (WHO, 2020). The mortality of the covid 19 pandemic in elders has been striking. According to Johns Hopkins University report (2020) mortality rate in adults older than age 80 had reached to 21.9%. Another report on 355 patients with covid 19 found that patients who died had an average age of 79.5 years. A report on 4,226 cases in the United States indicated a mortality rate is less than 1% in patients younger than age 54 but a mortality rate of 3% to 11% in patients aged 65 to 84 and 10% to 27% in patients older than age 85(Centers for Disease Control and Prevention, 2020). More than 80% of deaths among adult patients occurred in those older than age 65. Most of the fatal cases to date have involved older peoples and patients with comorbidities (Centers for Disease Control and Prevention, 2020).

## **2.3. What factors increase the susceptibility of street elders to covid 19?**

### **2.3.1. Other communicable non-communicable diseases they have experienced in the street**

According to world health organization (2020) an individual who infected by another disease has high probability of dying through corona virus. Street elders frequently suffer from sexually transmitted diseases, age induced and other communicable and non-communicable diseases mainly due to the declining function of their biological organs (UNESCO, 2006). This in turn have a chance to increase their susceptibility to the covid 19 pandemic and subsequent deaths.

### **2.3.2. Low Level of Knowledge about Covid 19**

Street elders in many parts of the world lack the right knowledge of covid 19. Being denied of the opportunity to actively participate in community and school settings, in awareness creation programs, make street elders to miss the right understanding about covid 19 and other issues ( WHO, 2020). Perhaps, such a lack of comprehensive knowledge is the worst risk factor because all other risk factors are, in most cases, caused by lack of complete knowledge and inadequate change in behavior

## **3. RESEARCH METHODOLOGY**

### **3.1. Setting**

#### **Location of the study area**

The study is conducted in Wolaita Sodo city. Wolaita Sodo is located at about 380km south of Addis Ababa in Southern Nations, Nationalities and Peoples' Region (SNNPR). It is part of the *enseste* zone of Ethiopia. The city has by estimation more than 250, 000 inhabitants. Temperate type of climate is characterized the city and majority of the respondents speak *Wolaitigna* language as a mother tongue language. Wolaita sodo city is the capital of Wolaita Zone.

### **Target population**

The units of analysis are elders living and sleeping in street. 10 street elders were selected randomly. Elders who live in the street and aged 50 and above were included in the study. Being a street elder and age are eligibility criteria to select respondents. Other homeless groups not included in the study because of the very narrow nature of the study.

### **3.2. Sampling technique and sample size**

Judgmental sampling technique is used to select study participants. Since it is difficult to access sample frame due to the shortage of available time and the lack of properly recorded document, the researcher decided to select any street elders without any prior criteria. 10 street elders were selected using judgmental sampling method. Inclusion criteria for selecting respondents are being a street elder and aged above 50.

### **3.3. Research design, methods and instruments**

This study utilizes the descriptive method of research. The purpose of employing the descriptive method is to describe the nature of a condition, as it takes place during the time of the study and to explore the cause or causes of a particular condition. The researcher opted to use this kind of research considering the desire to acquire first hand data from the respondents to formulate rational and sound conclusions and recommendations for the study. According to Creswell (1994), the descriptive method of research is to gather information about the present existing condition.

Two types of data were used: the primary and the secondary data. The primary data were derived from the answers respondents gave in the structured questionnaire prepared by the researcher. In addition, the information obtained from the interview and observation also provided primary research data that supported the study. The secondary data on the other hand, were derived from the findings stated in published documents and literatures related to the research problem. These were based from the recent literatures related to street elders and Covid 19. Questionnaire, interview check list and observation checklists/guides are used as instruments in order to collect primary qualitative and quantitative data. The questionnaire and interview are structured in such a way that respondents would be able to answer it easily. The questionnaires and interview guides are designed by English language and translated in to Amharic when data was collecting from study participants. Researcher administered questionnaire (is type of questionnaire that a researcher read the question and respondents replied) has been used for this study.

### **3.4. Data Processing analysis**

The study utilized first hand data, which comes from the chosen respondents who answered the survey-questionnaires asked to them. First-hand data consists of the information on the survey results. The study also utilized secondary data. Secondary data include raw data and published summaries, as well as both quantitative and qualitative data. Having completed the collection of the quantitative and qualitative data, the questionnaires were checked for their completeness. Then close-ended questions were coded and analyzed manually using descriptive statistics. The qualitative data was analyzed using thematic analysis technique.

### **3.5. Organization of the paper**

The paper has five main sections. The first section of the paper is an introductory part. In this part general overview of the problem, the rationale of the study and objectives that addressed in this study are discussed. The introduction and statement of the problem part are written jointly for the sake of making the length of the paper as much as possible precise. In the second section of the paper available literatures related with the topic under investigation are discussed. The third part of the paper is methodology part. Here the type of sampling, study design, research method, data collection instrument that applied in the study are briefly discussed. The fourth part of the paper is result and discussion part. The data obtained from secondary and primary source through questionnaire, interview, observation and document review were briefly presented qualitatively and quantitatively. The final section of the paper is a summary part and recommendation part.

### **3.6. Ethical considerations**

This study is addressed certain ethical considerations. Among the significant issues that are considered included:

**Gaining consent:** Securing permission and gaining the consent of the participants for this study is an important ethical consideration. In order to do so, the researcher relayed the aims of the research clearly among all selected participants

**Confidentiality:** The privacy of the respondents as well as the confidentiality of their responses is prioritized by the researcher as well. In order to do so, the names of the participants are kept confidential.

**Data protection:** The researcher protected the data obtained from the research process as well.

### **3.7. Limitation of the study**

Due to time constraint and the difficulty of the present condition, the study couldn't incorporate more study participants. Consequently the researcher couldn't able to make more depth analysis of the situation.

## **4. RESULT AND DISCUSSION**

### **Introduction**

In this part information which generated from interview, questionnaire and observation analyzed using quantitative and qualitative data analysis techniques. The first part revolves around participant's understanding/knowledge toward the new pandemic. Here only quantitative data analysis technique is used. The second part tried to discuss participant's perception about their susceptibility to the pandemic and their perception about the severity and preventive strategies of covid 19.

### **4.1. Socio-demographic and clinical characteristics of respondents**

A total of 10 respondents were participated in the study. All of the respondents were aged 50 and above. From them 3 respondents were aged 60 and above. 2 respondents were female and the remaining 8 respondents were male. All participants are lived in the street and have not attended formal education. Interms of their clinical characteristics all respondents had not reported known history of covid 19.

### **4.2. Situation of elders in the street**

8 of the respondents had experiences of 3-6 years street life and the remaining 2 respondents had been on the street for more than six years. More than half (7 respondents) street elders started street lives at the age of (60-70 years) and the remaining 3 respondents started street life at the age of 71 and above. Slightly half of the respondents (6) of them became street elders because of their children or caretaker death. The remaining two respondents become street elders because of poverty and other two respondents go out to street because of conflict with their families. About 8 respondents used begging as a means of income and the remaining two respondents used casual work as their income source. 7 respondents reported that their daily income is below 20 Ethiopian birr and two and one respondents respectively reported that their daily income is near 30 birr and above 35 Ethiopian birr.

### **4.3. Knowledge of respondents about covid 19 modes of transmission, symptoms and preventive strategies**

#### **4.3.1. Information and Awareness about covid 19**

All the study participants (9 respondents out of 10 respondents) heard of Covid-19. The main sources of information about covid-19 for the participants were their friends ( always) and any talks about covid 19 by anyone in the street( rarely).A large majority (8 out of 10 respondents ) had the notion that covid 19 affects anyone irrespective of the person's identity and background. But 1 respondent did not agree with the idea while the remaining 1 respondent was not sure. Further, 7 respondents thought that it was possible to judge one's covid 19 status based on observation of his/her physical conditions, such as when he has sneezing and coughing. Moreover, the remaining 3 respondents did agree that it is not possible to judge person's covid 19 condition using sneezing and coughing since they are symptoms of common cold. Similarly, majority of the respondents (9 respondents) respondents did believe that covid 19 is killing disease and non-curable disease

#### **4.3.2. Knowledge of respondents related with mode of transmission of covid 19**

The study participants were asked as to which mode/s of covid 19 transmission they knew vis- à-vis sharing of materials with other person without gloves, having unprotected contact with person without keeping physical distance, sharing same living room or bed with covid 19 positive person, incorrect/inconsistent use of face mask, making a contact with a person who has high fever, make a contact with a person who has frequently sneezing and

coughing. Almost all (9 respondents) of the participants mentioned at least one mode of covid 19 transmission. The total number of respondents who cited only one mode of covid19 transmission were 6. Those participants who named two and three modes of covid transmission were 3 and 1 respectively. No one of the participant cited all the modes of covid transmission mentioned above. Sharing the same living room or bed with covid 19 victim person and making contact with a person who has frequently sneezing and coughing are the most commonly known modes of covid 19 transmission by respondents because they reported by 8 study participants followed by sharing of materials with other person without gloves (6 respondents) and incorrect/inconsistent use of face mask (4 respondents). On other hand making a contact with a person who has high fever is the least known modes of transmission of covid 19 because it was reported by only 2 respondents respectively

#### **4.3.3. Knowledge of responds about prevention mechanism of covid 19 pandemic**

Concerning knowledge about covid 19 prevention mechanisms, study participants asked as to which mode/s of covid 19 transmission they knew vis- à-vis: consistent use of face mask, sanitayizer and glave, keeping physical distance from other person who has fever and who frequently sneezing and coughing, avoiding sharing materials with other person through hand, stay in home, avoiding shaking hands with person who living with covid 19. Almost more than 2/3 of the participants knew a minimum of one mechanism of preventing covid 19 transmission. However, the knowledge of the majority of respondents (6) was limited only to a maximum of two prevention mechanisms, out of the above listed preventive strategies. Only 1 respondent could cite four of the above mentioned prevention mechanisms: consistent use of face mask and alcohol, stay in home, keeping physical distance from others and avoid shaking hands with person who living with covid 19. Stay at home and consistent use of face mask as a means of preventing covid 19 transmission were mentioned by majority of the respondents. About 3 and 2 respondents respectively included avoiding personal contact with others and avoiding sharing materials with others as mechanisms of Covid 19 prevention in their responses.

#### **4.3.4. Knowledge of respondents about symptoms of covid 19**

More than half of the study participants correctly identified the commonly known frequent symptoms like sneezing (8 respondents), fever (6 respondents), fatigue (5 respondents), and dry cough (8 respondents) along with others as just as sore throat (2 respondents). A certain consensus is also observed among the subjects in recognizing as a manifestation of the disease the shortness of breath/shortness of breath (8 respondents) and runny nose (5 respondents). However diarrhea (2 respondents) and nasal congestion (no respondent) were not recognized as part of the disease by the respondents, despite being more frequent than other symptoms such as shortness of breath/shortness of breath. The majority of the population (7 respondents) knew the incubation period.

### **4.4. Perception of study participants about the severity, preventive strategies and their susceptibility to covid 19**

#### **4.4.1. Perceived Severity**

9 out of 10 of the participants perceived Covid 19 as a serious disease which results in death and only one respondent consider covid 19 as a benign disease. Though majority of respondents' perceived covid 19 is a serious disease that results death and the recommended preventive strategies as good, they have not correctly practiced or use those appropriate preventive strategies.

I asked questions about why they can't use any preventive strategy and I have gained some reasons. Accordingly, the respondents were asked questions related to why they have not used face mask, alcohol and gloves. Respondents replied that even if they have heard face masks, alcohols and using gloves can help to protect themselves from covid 19, their financial limitation make them unable to access those preventive strategies. One respondent was responded as the following.

".No! I never go to use face masks and alcohol/sanitayizers, while they are available from every direction, every place and every shops. .... Because of lack of money, even I want, I can't do that. Neither the peoples surround us nor do city administrators distribute masks and alcohols to us. I always make very few coins through begging and I used them to cover my daily meal. So I can't wear and I can't buy alcohol". (Direct translation, a 62 years old interview participant).

Another interview participant continued:

"Although me and other street elders knew the uses of face masks and gloves to protect ourselves from corona virus, we couldn't use them. This is mainly due to shortage of money. There is no as such regular income. Our income source is making begging or collecting extra-foods from nearby cafes and restaurants. So we can't do that." (Direct translation, a 68 years old interview participant)

The data obtained from observation is also supported the information which generated from interview. I tried to look whether they have wear face mask and glove or not and I observed that no one was use mask or gloves. Those street elders make greeting with their counter parts and other peoples without using gloves and talk with their friends very closely without covering their mouths using a piece of cloths. Besides this I also observed that, not only street elders, but also other individuals have not developed a habit of using face masks and gloves.

Besides this the respondents have also never practiced keeping physical distance and stay at home strategies to prevent themselves from Covid 19 pandemic. They argued that their living style in the street is not allowed to make this type of measurement.

"Social life is practiced in our daily life. We begging together, we eats bules, extra unused foods which take from cafes and restaurants, together and even we share one blanket. If we try to make physical distance between us, even we can't collect our daily food needs. So making physical distance is not possible for us." (Direct translation, 70 years old interview respondent).

Another respondent continued

"Stay at home? How can we make that? We have not our own home. There is no anybody helped us. We share foods, blankets, sacks for sleeping. If we want to make physical distance, we must get the support of others. But that is not possible for us. Street life is not easy as you live in your home. " ( Direct translation, 75 years old respondent).

Lack of awareness is also another factor that hamper study participants from applying any preventive strategies to prevent themselves from Covid 19. As respondents reported they were not attend awareness creation educational programs about the pandemic. Respondents reflected that due to the negative attitude of community to them, no one interested to inform them about how to protect themselves from the pandemic. Regard to this problem one respondent said this:

"Since all people considered us as dependent and meaningless, they have not any intention to help us. No body wants to teach or give information for us. If we call them them "Lije ", our begging of money and coins immediatly come to their mind and said " Egzier yistlgn."( Direct translation, 60 years old respondent)

#### **4.4.2. Perceived susceptibility**

Perceived susceptibility is considered an important element to prevent the spread of the pandemic. If a person thinks he/she is susceptible for any illness who are in the street particular may be at higher risk for more severe illness. In this study, 9 of the participants perceive as they may be susceptible to covid 19. More than half of the participants of this study perceived that they are susceptible to covid 19. This susceptibility was associated with different factors. Among them lack of information about the new pandemic is one factor that identified by study participants. When I asked for the reasons why they have high perception of susceptibility to covid 19, they responded that most peoples hides information about the disease and doesn't clearly communicate to them. One respondent said this:

"Whenever we want to know something about the pandemic, we usually went to our friends, who are not much informed about the virus like us. If we want ask anybody walked around the street about the virus, they don't want to make contact with us because our begging of money or coins come to their mind. We are not accessed to Medias which are principal source of information. Since we are less informed about the virus, we become highly susceptible to it." ( Direct translation, 75 years old respondent).

Another respondent also share his friend's idea

"Moreover the posters and other brochures about the pandemic are not helpful for us since most of us are illiterate. We are bombarded with unclear information from the media, the government, the health workers, and

friends and anybody from the street. Due to those reasons we are distanced from essential information about the pandemic and this make us highly susceptible to the new pandemic". ( Direct translation, 69 years old respondent). Moreover another greatest fear among the evaluated population is being in contact with people in their daily encounter. The participants revealed that they have made many contacts with many peoples since their livelihood mechanism forced them to do this. One interviewee responded in this way.

"For ours (elders), the possibility of being victim of covid 19 is very high. Although some elders are supported and assisted by their children and relatives, we are also few elders having life in the street. This is mainly for the sake of earning money and lack of support from somebody. The walkers (in the street) give coins to us. Once we are in the street and want support, we received the coins and make contact or hand shake with the givers without any hesitations. This in turn may increase our susceptibility to the pandemic."( Direct translation, 64 years old respondent) Generally from this, with regard to study participants perception to their susceptibility to Covid 19, participants perceived as they are more susceptible to the new pandemic due to lack of information and frequent contacts with others.

## **5. CONCLUSION AND RECOMMENDATION**

### **5.1. Conclusion**

With regard to participants awareness about the new pandemic ( Covid 19), respondents have moderate level of awareness. Even if they have some understanding about covid 19, their knowledge about the virus is not satisfactory.

Interms of transmission mode of the virus, almost all of the participants mentioned at least one mode of covid 19 transmission. But majority of the respondents cited only one mode of Covid 19 transmission. Similar result was also found with regard to preventive strategies. As a transmission mode of the virus, almost all respondents were aware a at least one preventive mechanism of the pandemic but only few respondents have cited three and more preventive strategies of the new pandemic. Like a preventive strategies and transmission mode of the new pandemic, most of the study participants are less aware about multiple symptoms of covid 19.

Though study participants' perceived Covid 19 as a severe disease and recognize the recommended preventive strategies can support them from being a victim of Covid 19, they have not practiced them because of lack of awareness and financial limitation. Respondents also perceived them as highly susceptible to covid 19 because of their multi-dimensional contact with different peoples and their low awareness how to protect themselves.

### **5.2. Recommendations**

Based on the finding of the study, I strongly recommended the following possible measurements should be taken to mitigate street elders's susceptibility to covid 19.

It is noted that although street elders have a moderate level of information and awareness about covid 19, it's mode of transmission, preventive strategies and symptoms, they critically lack change in behavior and practices to protect themselves from the pandemic. Therefore, it is crucial to design and implement quality Covid 19 programs that ensure comprehensive knowledge and appropriate change in behavior and practice among street elders

With regard to preventive programs, it is also crucial to intensively work towards mitigating the economic and social impacts of the covid 19 on street elders through creating adequate access to aid and income generating opportunities together with other psycho-social supports.

It is significantly important that Covid 19 prevention, care and treatment interventions for street elders should start with proper understanding of their unique situations and the circumstances they are living in. This would help not only to design and implement targeted interventions that can effectively address the issue correctly as well as the specific needs and problems of street elders but also to make them part of the solution

Distribution of alcohols, face masks and related medical supplies should be distributed to those street elders immediately as much as possible. This helps in one side to protect street elders from the pandemic and in another side the spread of virus from those street elders to others.



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