www.ThePharmaJournal.com

The Pharma Innovation



ISSN (E): 2277-7695 ISSN (P): 2349-8242 NAAS Rating: 5.23 TPI 2022; SP-11(5): 1774-1782

www.thepharmajournal.com Received: 15-03-2022 Accepted: 18-04-2022

Dr. T Kamalaja

© 2022 TPI

Senior Scientist, Department of Foods and Nutrition, AICRP-WIA, Post Graduate and Research Centre, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

R Arunjyothi

Scientist, Home Science, K.V.K, PVNRTVU, Mamnoor, Warangal, Telangana, India

N Sushma

Research Scholar, Department of Foods and Nutrition, Post Graduate and Research Centre, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

G Sai Bhavani

Research Scholar, Department of Foods and Nutrition, Post Graduate and Research Centre, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

Dr. Swetha Kodali

Scientist, Department of Resource Management and Consumer Sciences, AICRP-WIA, Post Graduate and Research Center, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

Dr. R Neela Rani

Principal Scientist, Department of Extension Education, AICRP-WIA, Post Graduate and Research Center, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

Corresponding Author Dr. T Kamalaja

Senior Scientist, Department of Foods and Nutrition, AICRP-WIA, Post Graduate and Research Centre, PJTSAU, Rajendranagar, Hyderabad, Telangana, India

Assessment of knowledge levels COVID-19 vaccinations

Dr. T Kamalaja, R Arunjyothi, N Sushma, G Sai Bhavani, Dr. Swetha Kodali and Dr. R Neela Rani

Abstract

Understanding the perception and concerns of people about COVID-19 vaccine in developing country like India will help in understanding demand for the vaccine and further tailoring out public health information and education activities. The study was carried out to assess the present state of knowledge people have about the probable vaccine for COVID-19, to know the preferences of subjects about this vaccine and to learn the expectations and apprehensions of people about features of this prospective COVID-19 vaccine exist in the capital city of India. The online based survey was conducted for three weeks. A bilingual, semi-structured questionnaire was set up using google forms and generated link, shared on social media (i.e., Gmail and WhatsApp). Data were collected on sociodemographic variable, vaccine acceptance, knowledge and perception regarding COVID-19 vaccine. Among the study population 30 subjects, among the study population, 83.33% got vaccinated while 16.66% said they were not going to take the vaccine. The following study has helped to understand the percentage of people who had knowledge, attitude and perception about vaccine.

Keywords: Knowledge, attitude, perception, COVID 19, vaccination

Introduction

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness. The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow). COVID-19 is the disease caused by a new coronavirus called SARS-CoV-2. WHO first learned of this new virus on 31 December 2019, following a report of a cluster of cases of 'viral pneumonia' in Wuhan, People's Republic of China. COVID-19 affects different people in different ways. Most infected people will develop mild to moderate illness and recover without hospitalization (Source: WHO, 2020) [2, 3].

Most common symptoms: Fever, Dry cough and Tiredness, less common symptoms: Aches and pains, Sore throat, Diarrhoea, Conjunctivitis, Headache, Loss of taste or smell and A rash on skin, or discoloration of fingers or toes and Serious symptoms: Difficulty breathing or shortness of breath, Chest pain or pressure and Loss of speech or movement (Source: WHO, 2020) [2,3].

In 2020, novel coronavirus (SARS-CoV-2) pneumonia broke out in the world. The cases infected by the new variants of the SARS-CoV-2 have been confirmed in many countries, including the UK, South Africa, France, Japan, Thailand, Canada and Portugal and so on. Great effort in the world have been made for controlling COVID-19 pandemic in the past year, but unfortunately, the COVID-19 epidemic is still deteriorating in many countries. In such a severe situation, the development and use of vaccines have been a great hope to control COVID-19 epidemic. The development of COVID-19 vaccines is accelerated, but the capacity of vaccine production is limited and it may take time to make vaccine available to all the people who are willing to receive it. Thus, it is badly needed to develop vaccination strategies in order to maximize the benefit of vaccination in controlling COVID-19 epidemic (Wang *et al.* 2021) [1].

Vaccination is a simple, safe, and effective way of protecting people against harmful diseases, before they come into contact with them.

It uses your body's natural defenses to build resistance to specific infections and makes your immune system stronger. Vaccines train your immune system to create antibodies, just as it does when it's exposed to a disease. However, because vaccines contain only killed or weakened forms of germs like viruses or bacteria, they do not cause the disease or put you at risk of its complications. Vaccines reduce risks of getting a disease by working with your body's natural defenses to build protection. When you get a vaccine, your immune system responds. It recognizes the invading germ, such as the virus or bacteria. Produces antibodies. Antibodies are proteins produced naturally by the immune system to fight disease. Remembers the disease and how to fight it. If you are then exposed to the germ in the future, your immune system can quickly destroy it before you become unwell. The vaccine is therefore a safe and clever way to produce an immune response in the body, without causing illness.

Our immune systems are designed to remember. Once exposed to one or more doses of a vaccine, we typically remain protected against a disease for years, decades or even a lifetime. This is what makes vaccines so effective. Rather than treating a disease after it occurs, vaccines prevent us in the first instance from getting sick. Two key reasons to get vaccinated are to protect ourselves and to protect those around us. Because not everyone can be vaccinated – including very young babies, those who are seriously ill or have certain allergies – they depend on others being vaccinated to ensure they are also safe from vaccine-preventable diseases.

Like any medicine, vaccines can cause mild side effects, such as a low-grade fever, or pain or redness at the injection site. Mild reactions go away within a few days on their own.

Severe or long-lasting side effects are extremely rare. Vaccines are continually monitored for safety, to detect rare adverse events. Vaccination is the most cost-effective medical intervention for preventing mortality and morbidity against infectious diseases. A number of effective and safe vaccines are currently available against several viral diseases of significant medical importance (Source: WHO, 2020) [2, 3].

Methodology

The online based survey was conducted for three weeks. A bilingual, semi-structured questionnaire was set up using google forms and generated link. The access link was then shared on social media (i.e., Gmail and WhatsApp). The inclusion criteria for respondents eligibility include those more than 18 years old, and an understanding of the English language. The respondents were requested to take part in the survey by completing the questionnaire without any time restrictions and it has been sent for 30 people. The questionnaire consisted of questions on knowledge (before and after vaccination), acceptance and perception of COVID-19 vaccine. The association between demographic factors with scores on knowledge about COVID-19 vaccine were analysed. The sharing was escalated to family members. friends, colleagues, and acquaintances (Islam et al. 2021) [4]. The questionnaire consists of four sections: Section A on demographic profile of subjects, Section B on the knowledge about COVID- 19 vaccine (before vaccination), Section C knowledge after acceptance of COVID- 19 vaccine (after vaccination), Section D symptoms of COVID-19 vaccine and Section E attitude based on perception (Health Belief Model, HBM) on COVID-19 vaccine. For Section B about knowledge of COVID 19 vaccine participants were given three options: Yes, No and Do not know. Section C with knowledge after acceptance of vaccine consists of questions on the willingness to take the vaccine and the reason, cost of

the vaccine and factors influencing the decision. Section D with symptoms of vaccination consist of questions symptoms within 30 min of vaccination, first day after vaccination and second day symptoms. For Section E attitude on vaccination consist of questions thinking about vaccine whether safe/unsafe, which vaccine is safe and only healthy people should take/not in it five options were given: strongly agree, agree, neutral, disagree and strongly disagree, for perceived susceptibility and barriers. (Islam *et al.* 2021, Mohemad *et al.* 2021) ^[5, 6].

Results and Discussion Demographic data

General information of the subjects was presented in Table 1. Out of 30 samples surveyed, majority of the subjects i.e., 76.66 per cent were female and 23.33 per cent subjects were male. Age group of the subjects was mostly 20-30 years' age (43.33%), 41-50 years' age (26.66%), 31-40 years (16.66%) and 51-60 years (13.33%) respectively. Mostly lived in urban area and 40% lived in rural areas. With regard to educational qualification, 56.66 per cent subjects were post-graduated, 13.33 per cent were graduated similarly 13.33 per cent studied intermediate/diploma, 10 per cent did other courses and similarly 3.33 per cent completed primary and secondary school education. Occupation of the subjects revealed that 40 per cent had government job, 33.33 per cent were students, 23.33 per cent had private jobs and 3.33 per cent were doing other jobs like business etc., Findings revealed that 60 per cent of the subjects were married and 40 per cent of the subjects were unmarred. Religion of the subjects showed that 83.33 per cent were Hindus, 10 per cent were Christians and 6.66 per cent were Muslims.

Table 1: General information of the subjects

General information	Frequency (Percentage) n=30		
Gender			
Male	7 (23.33)		
Female	23 (76.66)		
Age Group			
20-30	13 (43.33)		
31-40	5 (16.66)		
41-50	8 (26.66)		
51-60	4 (13.33)		
Residence			
Rural	12 (40)		
Urban	18 (60)		
Educational Qualification			
Primary school	1 (3.33)		
Secondary school	1(3.33)		
Intermediate/Diploma	4 (13.33)		
Graduation	4 (13.33)		
Post-graduation	17 (56.66)		
Others	3 (10)		
	Occupation		
Government Job	12 (40)		
Private Job	7 (23.33)		
Student	10 (33.33)		
Others	1 (3.33)		
Marital status			
Married	18 (60)		
Unmarried	12 (40)		
	Religion		
Hindu	25 (83.33)		
Muslim	2 (6.66)		
Christian	3 (10)		

Knowledge regarding vaccination

Cent per cent of the subjects heard about corona vaccination. 83.33% got vaccinated and 16.66% were not vaccinated. 60% of the subjects took covishield vaccine and 23.33% took covaxin while 16.66% were not vaccinated. Most Cent per cent of the subjects were aware of free vaccination. 90% of the subjects took free vaccination while each of 3.33% took

vaccine for Rs.250, Rs.300 and Rs.1200. 70% completed single dose, 13.33% completed double dose and 16.66% were not vaccinated. 63.33% of the subjects didn't face any problem while taking vaccination, 20% felt problematic while taking vaccination and 16.66% were not vaccinated. Table 2 shows the knowledge questions and scores for each statement.

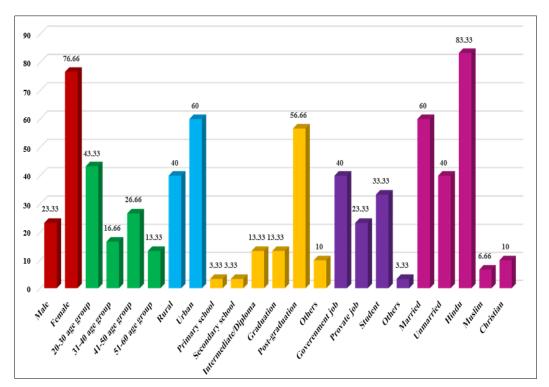


Fig 1: General information of the subjects

Table 2: Survey/Responses regarding Corona vaccination

a) Knowledge about vaccination	Frequency (Percentage) n=(30)		
Heard about cor	Heard about corona vaccination		
Yes	30 (100)		
No	0 (0)		
Got vaccinated			
Yes	25 (83.33)		
No	5 (16.66)		
Type of vaccine			
Covishield	18 (60)		
Covaxin	7 (23.33)		
Others	0 (0)		
None	5 (16.66)		
Awareness about free vaccination			
Yes	30 (100)		
No	0 (0)		
Amount for	vaccination		
Free	27 (90)		
250	1 (3.33)		
300	1 (3.33)		
1200	1 (3.33)		
Doses completed			
Single dose	21 (70)		
Double dose	4 (13.33)		
Not vaccinated	5 (16.66)		
Faced a problem while taking vaccination			
Yes	6 (20)		
No	19 (63.33)		
Not vaccinated	5 (16.66)		

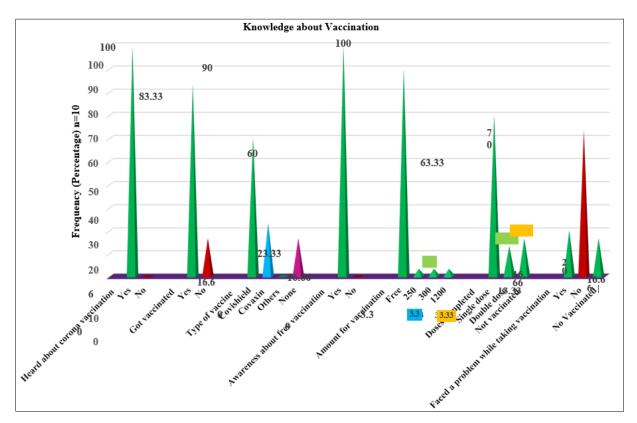


Fig 2: Survey/Responses regarding Corona vaccination

Knowledge and acceptance after vaccination

53.33% took Paracetamol/Dolo after vaccination while 30% didn't take Paracetamol/Dolo after vaccination and 16.66% not vaccinated. 83.33% subjects didn't take any other medication other paracetamol/Dolo and 16.66% were not vaccinated. 83.33% subjects didn't contact any doctor with tension after taking vaccination.

83.33% subjects were following covid-19 precautions after

vaccination, while 16.66% were not vaccinated. 76.66% of the subjects were aware of taking food before vaccination while 23.33% not aware of taking food before vaccination. 60% waited for 30 minutes after vaccination, 23.33% did not wait for 30 minutes after vaccination while 16.66^ were not get vaccinated. Table 3 shows the knowledge and acceptance after COVID 19 questions and scores for each questions.

Table 3: Knowledge and acceptance after COVID 19 Vaccine

b) Information after Vaccination	Frequency (Percentage)
Taking Paracetamol/Dolo after vaccination	
Yes	16 (53.33)
No	9 (30)
Not vaccinated	5 (16.66)
Any other tablet other than Para	cetamol/Dolo?
Yes	0 (0)
No	25 (83.33)
Not vaccinated	5 (16.66)
Contacting doctor with tension after	taking vaccination
Yes	0 (0)
No	25 (83.33)
Not vaccinated	5 (16.66)
Following covid-19 precautions aft	ter vaccination?
Yes	25 (83.33)
No	0 (0)
Not vaccinated	5 (16.66)
Aware of taking food before v	vaccination
Yes	23 (76.66)
No	7 (23.33)
After vaccination, waiting for	30 minutes
Yes	18 (60)
No	7 (23.33)
Not vaccinated	5 (16.66)

Symptoms of Vaccination

Out of 83.33% vaccinated subjects, 80% didn't had any symptoms within 30 minutes after vaccination, while 3.33% had symptoms within 30 minutes after vaccination. Out of 83.33% vaccinated subjects, first day symptoms were 16.66% had only hand pain, (13.33%) had only tiredness/drowsiness, (10%) had only fever, another (10%) had fever and tiredness while 10% had no symptoms at all. While next first day

symptoms question shows each option with 3.33%.

Second day symptoms after vaccination were 13.33 per cent had hand pain next with only body pains, (10%) had no symptoms, 6.66% had tiredness, body pains, hand pain and other subjects had fever, tiredness, body pains and another subjects had only had fever. Each of the option in second day symptoms had only 3.33%. Table 4 shows the symptoms of vaccination and their scores for each statement.

 Table 4: Symptoms of Vaccination

c) Symptoms of vaccination	Frequency (Percentage) n=30
Symptoms within 30 minutes after vaccination	
Yes	1 (3.33)
No	24 (80)
Not vaccinated	5 (16.66)
First day symptoms after vaccination	
Body pains	1 (3.33)
Body pains, Hand pain	1 (3.33)
Fever	3 (10)
Fever, Body pains, Hand pain	1 (3.33)
Fever, Tiredness/ Drowsiness	3 (10)
Fever, Tiredness/ Drowsiness, Body pains	1 (3.33)
Fever, Tiredness/ Drowsiness, Body pains, Hand pain	1 (3.33)
Fever, Tiredness/ Drowsiness, Body pains, Head ache, Hand pain, All the Above	1 (3.33)
Fever, Tiredness/ Drowsiness, Hand pain	1 (3.33)
Hand pain	5 (16.66)
None of the above	3 (10)
Not vaccinated	5 (16.66)
Tiredness/ Drowsiness	4 (13.33)
Second day symptoms after vaccination	
Body pains	4 (13.33)
Fever	2 (6.66)
Fever, Body pains, Head ache, Hand pain	1 (3.33)
Fever, Tiredness, Body pains	2 (6.66)
Fever, Tiredness, Body pains, Head ache	1 (3.33)
Fever, Tiredness, Body pains, Head ache, Hand pain, All the above	1 (3.33)
Fever, Tiredness, Hand pain	1 (3.33)
Hand pain	4 (13.33)
None of the above	3 (10)
Not vaccinated	5 (16.66)
Tiredness	1 (3.33)
Tiredness, Body pains	1 (3.33)
Tiredness, Body pains, Hand pain	2 (6.66)
Tiredness/Drowsiness	1 (3.33)
All the above	1 (3.33)
Grand Total	30 (100)

Attitude and perception on COVID 19 Vaccine

46.66 per cent felt both covishield and covaxin are safe, 36.66 per cent felt only covishield is safe and 16.66 per cent felt only covaxin is safe. 56.66 per cent contacted any doctor/friends/others to know whether vaccination is safe or not while 43.33 per cent did not contact any doctor/friends/others to know whether vaccination is safe or not. 93.33 per cent subjects accepted covid-19 vaccination for below 18 years' age group while 6.66 per cent subjects did not accept covid-19 vaccination for below 18 years' age group. 63.33 per cent strongly agreed Covid 19 vaccinations are compulsory while 36.66 per cent agreed Covid 19 vaccinations are compulsory. 36.66 per cent strongly agreed that reports heard/read in the media/ on social media made them to consider the choice to have vaccinated and 36.66 per cent agreed that reports heard/read in the media/ on social media made them to consider the choice to have vaccinated while 16.66 per cent were neutral that reports heard/read in the media/ on social media made them to consider the choice

to have vaccinated and 10 per cent disagreed that that reports heard/read in the media/ on social media made them to consider the choice to have vaccinated.

53.33 per cent agreed that leaders (religious, political, teachers, health care workers) in community support vaccination and 36.66 per cent strongly agreed that leaders (religious, political, teachers, health care workers) in community support vaccination while 10 per cent were neutral that leaders (religious, political, teachers, health care workers) in community support vaccination. 33.33 per cent subjects strongly agreed that they share information related to vaccination within social media network, 33.33 per cent subjects were neutral about sharing information related to vaccination within social media network and 23.33 per cent subjects agreed that they share information related to vaccination within social media network and 10 percent subjects disagreed that they do not share information related to vaccination within social media network. 46.66 per cent subjects agreed that spending more than one hour for getting vaccinated is important enough to travel, 40 per cent subjects strongly agreed that spending more than one hour for getting vaccinated is important enough to travel, 6.66 per cent subjects were neutral about spending more than one hour for getting vaccinated is important enough to travel while 3.33 per cent subjects disagreed about spending more than one hour for getting vaccinated is important enough to travel and 3.33 per cent subjects strongly disagreed about spending more than one hour for getting vaccinated is important enough to travel.

60 per cent subjects strongly agreed to receive more information on vaccination at health center and 36.66 per cent subjects agreed to receive more information on vaccination at health center while 3.33 per cent subjects disagreed to receive more information on vaccination at health center. 50 per cent of the subjects strongly agreed that if they get vaccinated, others are also protected as well, 40 per cent of the subjects agreed that if they get vaccinated, others are also protected as well while 6.65 per cent of the subjects were neutral that if they get vaccinated, others are also protected as well and 3.33 per cent of the subjects disagreed that if they get vaccinated, others are also protected as well. 60 per cent of the subjects strongly agreed that covid-19 vaccination is safe, 36.66 per cent of the subjects agreed that covid-19 vaccination is safe and 3.33 per cent were neutral that covid-19 vaccination is safe. 46.66 per cent of the subjects strongly agreed that covid-19 vaccination will keep body healthy, similarly 46.66 per cent of the subjects strongly agreed that covid-19 vaccination will keep body healthy and 6.66 per cent of the subjects were neutral that covid-19 vaccination will keep body healthy.

40 per cent of the subjects agree that covid-19 vaccinations might cause any side effects, 30 per cent were neutral that covid-19 vaccinations might cause any side effects while 16.66 per cent disagreed that covid-19 vaccinations might cause any side effects, 6.66 per cent strongly agreed that covid-19 vaccinations might cause any side effects and 6.66 per cent strongly disagreed that covid-19 vaccinations might cause any side effects. 60 per cent of the subjects agreed that Covid-19 virus could be prevented through vaccination, 23.33 per cent strongly agreed that Covid-19 virus could be prevented through vaccination, 10 per cent were neutral that Covid-19 virus could be prevented through vaccination while 3.33 per cent disagreed that Covid-19 virus could be prevented through vaccination and 3.33 per cent strongly disagreed that Covid- 19 virus could be prevented through vaccination.

53.33 per cent strongly disagreed that after vaccination, there is no need to keep mask and maintain social distance, 30 per cent disagreed that after vaccination, there is no need to keep mask and maintain social distance while 10 per cent agreed that after vaccination, there is no need to keep mask and maintain social distance and 6.66 per cent strongly agreed that after vaccination, there is no need to keep mask and maintain social distance. 53.33 per cent strongly agreed that all healthy people should be vaccinated, 36.66 per cent agreed that all healthy people should be vaccinated while 6.66 per cent were neutral that all healthy people should be vaccinated and 3.33 per cent disagreed that all healthy people should be

vaccinated. 50 per cent of the subjects disagreed that only unhealthy people should be vaccinated, 40 per cent of the subjects strongly disagreed that only unhealthy people should be vaccinated while 6.66 per cent were neutral that only unhealthy people should be vaccinated and 3.33 per cent strongly agreed that only unhealthy people should be vaccinated.

43.33 per cent subjects disagreed that there are other better ways to prevent corona virus than vaccination, 36.66 per cent were neutral that there are other better ways to prevent corona virus than vaccination, 10 per cent strongly agreed that there are other better ways to prevent corona virus than vaccination and 3.33 per cent agreed that there are other better ways to prevent corona virus than vaccination. 63.33 per cent of the subjects agreed that vaccines strengthen the immune system and 30 per cent agreed that vaccines strengthen the immune system and 6.66 per cent were neutral that vaccines strengthen the immune system.

53.33 per cent disagreed that they did not felt confused about registration/scheduling of vaccination, 20 per cent were neutral about confusion during registration/scheduling of vaccination, 13.33 per cent strongly disagreed that they did not felt confused about registration/scheduling of vaccination and 13.33 per cent agreed that they felt confused about registration/scheduling of vaccination. 36.66 per cent strongly disagreed that other activities (going to work, market etc.,) are more important than getting vaccination, 36.66 per cent disagreed that other activities (going to work, market etc.,) are more important than getting vaccination, 20 per cent agreed that other activities (going to work, market etc.,) are more important than getting vaccination, 3.33 per cent strongly agreed that other activities (going to work, market etc.,) are more important than getting vaccination and 3.33 per cent were neutral that other activities (going to work, market etc.,) are more important than getting vaccination.

53.33 disagreed that they did not had social pressure to get the vaccine, 20 per cent were neutral about social pressure to get the vaccine, 16.66 per cent strongly disagreed that they did not had social pressure to get the vaccine and 10 per cent strongly agreed that they did not had social pressure to get the vaccine. 56.66 per cent agreed that there was adequate safety information about vaccination, 23.33 per cent were neutral regarding adequate safety information about vaccination while 16.66 per cent strongly agreed that there was adequate safety information about vaccination and 3.33 per cent disagreed that there was adequate safety information about vaccination. 33.33 per cent subjects were neutral regarding confidence that the health center or doctor's office will have the vaccine you need, when you need them, 30 per cent disagreed that they don't have confidence that the health center or doctor's office will have the vaccine you need, when you need them, 16.66 per cent strongly disagreed that they don't have confidence that the health center or doctor's office will have the vaccine you need, when you need them and 10 per cent strongly agreed and 10 per cent agreed that they have confidence that the health center or doctor's office will have the vaccine you need, when you need them.

 Table 5: Attitude and perception on Vaccination

	perception on vaccination	
d) Attitude on Vaccination	Frequency (Percentage) n=30	
Which v	vaccine is safe	
Covishield	11 (36.66)	
Covaxin	5 (16.66)	
Both	14 (46.66)	
Contacting any doctor/friends/others	to know whether vaccination is safe or not	
Yes	17 (56.66)	
No	13 (43.33)	
Accepting covid-19 vaccinate	tion for below 18 years age group	
Yes	28 (93.33)	
No	2 (6.66)	
Covid 19 vaccina	ations are compulsory	
Strongly agree	19 (63.33)	
Agree	11 (36.66)	
Neutral	0 (0)	
Disagree	0 (0)	
Strongly Disagree	0 (0)	
	dia made to consider the choice to have Vaccinated	
Strongly agree	11 (36.66)	
	· · · · ·	
Agree	11 (36.66)	
Neutral	5 (16.66)	
Disagree	3 (10)	
Strongly Disagree	0 (0)	
	care workers) in community support Vaccination	
Strongly agree	11 (36.66)	
Agree	16 (53.33)	
Neutral	3 (10)	
Disagree	0 (0)	
Strongly Disagree	0 (0)	
	accination within social media network	
Strongly agree	10 (33.33)	
Agree	7 (23.33)	
Neutral	10 (33.33)	
Disagree	3 (10)	
Strongly Disagree	0 (0)	
Spending more than one hour for getti	ng vaccinated is important enough to travel	
Strongly agree	12 (40)	
Agree	14 (46.66)	
Neutral	2 (6.66)	
Disagree	1 (3.33)	
Strongly Disagree	1 (3.33)	
Preferring to receive more inform	mation on vaccination at health center	
Strongly agree	18 (60)	
Agree	11 (36.66)	
Neutral	0 (0)	
Disagree	1 (3.33)	
Strongly Disagree	0 (0)	
	ated, others are also protected as well	
Strongly agree	15 (50)	
Agree	13 (30)	
Neutral	2 (6.66)	
Disagree	1 (3.33)	
Strongly Disagree	0 (0)	
<u> </u>	id-19 vaccination is safe	
Strongly agree	18 (60)	
	11 (36.66)	
Agree Neutral	1 (36.00)	
Disagree	0 (0)	
Strongly Disagree	0 (0)	
	. ,	
Strongly agree	ccination will keep body healthy 14 (46.66)	
Agree Neutral	14 (46.66)	
	2 (6.66)	
Disagree Strongly Disagree	0 (0)	
Strongly Disagree	0 (0)	
Believing that covid-19 vaccinations might cause any side effects		

A comp o	2 (6.66)
Agree Neutral	12 (40) 9 (30)
Disagree	5 (16.66)
Strongly Disagree	2 (6.66)
	prevented through vaccination
Strongly agree	7 (23.33)
Agree	18 (60)
Neutral	3 (10)
Disagree	1 (3.33)
Strongly Disagree	1 (3.33)
	need to keep mask and maintain social distance
Strongly agree	2 (6.66)
Agree	3 (10)
Neutral	0 (0)
Disagree	9 (30)
Strongly Disagree	16 (53.33)
<u>;, </u>	e should be vaccinated
Strongly agree	16 (53.33)
Agree	11 (36.66)
Neutral	2 (6.66)
Disagree	1 (3.33)
Strongly Disagree	0 (0)
Only unhealthy peo	ple should be vaccinated
Strongly agree	1(3.33)
Agree	0 (0)
Neutral	2 (6.66)
Disagree	15 (50)
Strongly Disagree	12 (40)
	prevent corona virus than vaccination
Strongly agree	3 (10)
Agree	1 (3.33)
Neutral	11 (36.66)
Disagree	13 (43.33)
Strongly Disagree	2 (6.66)
	nen the immune system
Strongly agree	9 (30) 19 (63.33)
Agree Neutral	2 (6.66)
Disagree	0 (0)
Strongly Disagree	0 (0)
	ration/scheduling of vaccination
Strongly agree	0 (0)
Agree	4 (13.33)
Neutral D:	6 (20)
Disagree	16 (53.33)
Strongly Disagree	4 (13.33) ket etc.,) are more important than getting Vaccination
Strongly agree	1 (3.33)
Agree	6 (20)
Neutral	1 (3.33)
Disagree	11 (36.66)
Strongly Disagree	11 (36.66)
	ssure to get the vaccine
Strongly agree	0 (0)
Agree	3 (10)
Neutral	6 (20)
Neutai	16 (53.33)
Disagree	5 (16.66)
Disagree Strongly Disagree	5 (16.66) information about vaccination
Disagree Strongly Disagree	
Disagree Strongly Disagree There is adequate safety	information about vaccination
Disagree Strongly Disagree There is adequate safety Strongly agree	information about vaccination 5 (16.66)
Disagree Strongly Disagree There is adequate safety Strongly agree Agree	5 (16.66) 17 (56.66)
Disagree Strongly Disagree There is adequate safety Strongly agree Agree Neutral Disagree Strongly Disagree	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Disagree Strongly Disagree There is adequate safety Strongly agree Agree Neutral Disagree Strongly Disagree	5 (16.66) 17 (56.66) 7 (23.33) 1 (3.33)

Agree	3 (10)
Neutral	10 (33.33)
Disagree	9 (30)
Strongly Disagree	5 (16.66)

Conclusion

Knowledge about vaccine was relatively high and most of the people got vaccinated because of the awareness of free vaccination and also does not faced any problem. Cent percent of the individuals are aware of the symptoms of vaccination and taking care of them self. Most of the individuals preferred to take vaccine and also believed that covid 19 vaccine is safe and Furthermost of the respondents had good knowledge to take vaccination to fight against Covid – 19 vaccination.

References

- Wang C, Wang Z, Wang G, Lau JY, Zhang K, Li W. COVID-19 in early 2021: current status and looking forward. Signal Transduct Target Ther. 2021 Mar 8;6(1):114. doi: 10.1038/s41392-021-00527-1. PMID: 33686059; PMCID: PMC7938042.
- 2. https://www.who.int/health-topics/coronavirus#tab=tab_1
- 3. https://www.who.int/news-room/q-a-detail/vaccines-and-immunization-what-is-vaccination
- 4. Islam F, Agarwalla R, Panda M, Alvi Y, Singh V, Debroy A, et al. Assessment of the knowledge, preferences and concern regarding the prospective COVID-19 vaccine among adults residing in New Delhi, India–A cross-sectional study. Journal of Family Medicine and Primary Care. 2021;10(6):2369.
- 5. Islam M, Siddique AB, Akter R, Tasnim R, Sujan M, Hossain S, *et al.* Knowledge, attitudes and perceptions towards COVID-19 vaccinations: a cross-sectional community survey in Bangladesh. BMC public health. 2021;21(1):1-11.
- Mohamed NA, Solehan HM, Mohd Rani MD, Ithnin M, Che Isahak CI. Knowledge, acceptance and perception on COVID-19 vaccine among Malaysians: A web-based survey. Plos one. 2021;16(8):e0256110.