Face Mask Education During Covid-19: Cost and Benefit Safety Precaution Campaign Through Media

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ABSTRACT:
Globally as lockdown measures to slow the spread of severe coronavirus. It is, therefore, important to assess any changes in the policy of lifting lockdown without preventive measures practiced by the people. A global pandemic caused societies to realign radically and quickly. To avoid community transmission of virus Schools worldwide shifted to virtual learning although, which is not ideal in many respects. Many countries are ready to reopen their education institutions especially schools but strictly follow of preventive measures is important including social distancing, hand washing, sanitization and most importantly wearing a face mask when students and staff in the school are in contact with each other without 6 feet distancing. The media can effectively disseminate the science of mask use. Correct use of the masks can allow safer interactions at closer distances because the masks contain droplets. If one person is infected, the virus will not be transmitted to another.

Key words: COVID-19, mass media intervention, health communication, prevention, social behavioral changes, facemask education.

INTRODUCTION:

The world exists the lockdown and in the phase of reopening local economies, the education sector also desires to open densely populated schools with safe strategies to prevent students and teachers from coronavirus. It is important to support facemask citizen science education among children and families, the data of UNICEF represent that 26% of the global population are children from the age of 0-14 years (UNICEF, 2017). There are 1.2 billion students in the world, accounting for 67.7% of the world's student population, and they were affected by school closures at the end of May (Jones, et al., 2020). COVID'19 is the pandemic that disseminates among the people when people talk, cough and sneeze, infectious respiratory droplets or saliva are released into the environment and spread from person to person (Eichler, et al., 2020). Globally, the most tailored measures are hand washing, social distancing, and stay-at-home strategies to prevent local transmission of COVID-19 and droplet safety. In contrast, wearing facemask or face covers in hospitals and communities has been inconsistently indebted to the international and local media creating confusion, chaos, and misinformation. Also, influential political leaders of the countries developed and developing both have been involved in giving misleading signs or gestures regarding containment measures associated with COVID-19.

HEALTH COMMUNICATION STRATEGIES AND FUTURE EDUCATION DURING COVID-19:

In terms of social and economic instability, COVID-19 has posed numerous problems to the world. People are concerned because of high infection rates, rapid community spread, and high fatality rates, especially among the elderly and those with underlying medical issues.

Risk communication has existed since its inception as a technique of expressing differences in lay and expert risk perceptions. Two techniques to achieving a more shared understanding between specialists and the general public are described in risk communication theory. The first is the technocratic approach that addresses risk communication as experts informing the public about the risks to influence and persuade the public to share expert's views (World Health Organization, 2017). The second is the stakeholder involvement approach that emphasizes two-way communication or a common exchange of information between experts and the public (Lundgren & McMakin, 2018).

Moving forward, mass media can increase droplet education and facemask use. Good communication through the media and a unified education campaign are important in elementary/secondary schools and higher education institutions. This is a great opportunity for or educators all across the world to have a better grasp of how and why it is critical for students to increase coronavirus prevention strategies.

COMMUNITY ACTION: FACEMASK AND DROPLET SCIENCE:

Social distance and wearing facemasks are two of the most significant ways to prevent the transmission of COVID-19 (Howard, 2020). However, the value of facemask is not adequately publicized rather early in the pandemic many countries' officials included high profile public officials tell people that they did not need to wear facemasks created public distrust. Individuals must be educated about facemask science in order to encourage community action in the fight against COVID-19. The theory behind facemasks is simple: they prevent droplets from dispersing (97.2–99.7%) (Howard, et al., 2021). Thus, the ultimate purpose of this work is to promote knowledge and self-awareness in order to achieve equitable and long-term public droplet safety.

EFFECTIVENESS OF FACE MASKS AGAINST SPREAD OF COVID-19

In the early days of the COVID19 pandemic, it was unclear whether wearing masks would be effective in responding to the pandemic. In addition, institutions such as the World Health Organization (WHO) and the US Centers for Disease Control (CDC), as well as many governments around the world, do not recommend the use of masks to combat COVID19 in nowhere except in closed public places (MacIntyre & Wang, 2020).

This situation has changed after the school reopened in June 2020. There is no doubt that covering one's face is the most efficient way to protect oneself from the virus. (Prather, Wang, & Schooley, 2020).

There is epidemiological evidence that the use of masks is effective for the spread of the COVID19 virus. In Hong Kong, 96% of the population wear masks, and the number of new cases in March was 129 per million inhabitants. In Spain, Italy, and Germany, where masks were not worn at the time, the incidence rate was 2,983. (Italy), 2251 (Spain) and 1242 (Germany) per million (Esposito, Principi, Leung, & Migliori, 2020).

Similarly, an experiment and natural study published on June 16, 2020 found that the change in the daily growth rate of COVID19 at the county level from March 31 to May 22, 2020 is associated with a decrease of 2%.

in the daily growth rate of COVID19. Two to three weeks after the mandatory use of a mask (Lyu & Wehby, 2020).

The Lancet Online published a comprehensive review and meta-analysis on June 1, 2020, using data from 172 observational studies from 16 countries / regions (44 of which were for healthcare and one non-comparative study for healthcare setting. Masks (surgical type) Reduce the risk of infection by 85% Because masks are relatively cheap and easy to use, they are one of the simplest and most direct means of containing the spread of SARSCOv2 and Covid19 (MacIntyre & Wang, 2020).

FUNCTIONALITY OF VARIOUS TYPES OF MASKS

Figure 1 A medical mask

Medical mask. These are loose, disposable masks, sometimes called surgical masks. They are designed to protect the wearer from bacterially contaminated drops and splashes. When the wearer inhales, a medical mask filters out large particles in the air. Tie the ear loops where they connect to the mask to make the medical mask fit better. Then fold the excess cloth and push it under the edge. Wearing a medical mask does not affect the amount of carbon dioxide in the air you breathe.

Figure 2 A KN95 mask

The KN95 mask is a type of respiratory system that meets international standards. When inhaled, it filters both large and small particles, providing stronger protection than medical masks. However, care should be taken when purchasing KN95 masks, as many imitation masks are available that do not exceed quality standards.

Figure 3 A N95 mask

The N95 mask is a type of respiratory system that meets US quality standards. The N95 provides the most protection. When inhaled, it filters both large and small particles, providing greater protection than medical masks. The general public can use the non-surgical N95. According to the CDC, the N95 Surgical Mask should only be used by medical personnel. Before using the N95 Surgical Mask, medical professionals must be trained and pass a fit test.

Like surgical masks, N95 masks are disposable. Meanwhile, researchers are investigating ways to sterilize and reuse them. The cotton mask is designed to capture the respiratory droplets released when the wearer speaks, coughs, or sneezes. It also acts as a barrier to prevent the wearer from inhaling droplets emitted by others.

A cloth mask with multiple layers of tightly woven cloth such as cotton is most effective. Layers prevent you from passing through or escaping the mask. Wearing a mask does not affect the amount of CO2 in the air you breathe. If you wear gaiters, it must consist of at least two layers of fabric.

Figure 4 A cloth face mask

WHEN IS IT APPROPRIATE TO REMOVE THE MASK?

The CDC paper-bag rule recommends throwing away a disposable N95 mask after five uses. However, that recommendation was intended for healthcare staff. That may not be essential for everyone else. A mask can still be worn if its elastic bands continue to give a snug fit and the material appears clean and provides adequate airflow. (Dust, pollen, air pollutants, cosmetics, skin oils, and, yes, inactivated virus all collect and clog the filter over time.)

Consider where you've worn the mask and how long you've been wearing it. Someone who wears a mask on the metro every day, for example, may need to toss it out sooner than someone who wears one to the grocery store every now and then. In any case, replace your mask if it is dusty, thinner, broken, or difficult to breathe through, or if it no longer maintains a good seal.

THE COST OF APPLYING FACE MASK

It is therapeutically clear that whatever has an effect additionally has incidental effects. The actual side effect of face mask is primarily detailed by clinical experts. In an investigation of 158 clinical staff during the COVID19 pandemic, the most widely recognized symptom of delayed utilization of masks was a two-sided migraine, which was accounted for by around 80% of the members (Ong, et al., 2020). Face masks may give bacteria with a breeding ground. Irritating dermatitis, which is produced by

the mask and/or the associated rubber strings touching the skin, nose, and ears, can create itchy rashes (Cheok, et al., 2021).

The most potent instrument in human communication is nonverbal communication. Facial expressions are the most prevalent form of communication amongst humanoids who speak two distinct languages that they don't understand but can still communicate through facial emotions like smiling and frowning. When masks are worn, there is a risk of misunderstanding since masks can alter speech transmission when masks are widely used in schools (Spitzer, 2020).

The mask prevents teachers and students from exchanging emotional cues. Emotions have a vital role in social interaction, particularly in the areas of teaching and learning. The results of an experimental study on emotion recognition published by Bielefeld University researchers in 2017 clearly revealed the role of the eyes and lips in the perception of facial emotions (Wegrzyn, Vogt, Kireclioglu, Schneider, & Kissler, 2017).

PROMOTING EVIDENCE-BASED GUIDELINES ON FACEMASKS

Many specialists recommended people not to use masks at the outset of the outbreak because they believed that wearing masks for non- health work would exacerbate the shortage of personal protective equipment (PPE) that hospitals need (U.S. Surgeon General, 2020). Reportedly many countries included developed country health workers have experienced a high rate of infection due to insufficient access to PPE (Jones, et al., 2020).

However, global prevention and control experts generally recommend that medical personnel wear masks when entering rooms that may have viral respiratory infections (Feng, et al., 2020). In COVID19, wearing a mask can be beneficial in protecting medical personnel and the public.

Benefit and cost analysis is a widely and systematically used approach for assessing the impacts of environmental and health safety policies (Norheim, Emanuel , & Millum , 2020). Science and citizen education campaigns on the use of masks require clear guidance and the dissemination of objective information in the community. Lack of clear information can lead to negligible medical advice. Although most people think that masks are protective, there is also data that shows evidence of reduced transmission.

Furthermore, in highly populated countries of the world like the USA, India, Brazil, etc. the education of mandatory wearing of facemask when it is difficult to maintain a distance of 6 feet from others would attenuate the local transmission of the virus (Editor Al-Jazeera, 2020). The relative

effects of facemasks are confirmed by the countries that have mandatory facemask policies. For a few months, countries with high coronavirus cases and mortality can minimize transmission by enforcing a uniform facemask policy. The use of facemasks would be a great achievement; the cost must, however, be lower than that for companies and schools not being reopened.

COLLABORATIVE APPROACH TO ENHANCE PUBLIC HEALTH PREPAREDNESS FOR PANDEMIC

The concept of community preparedness is the ability of the community to prepare for or recover from natural or man-made disasters together with its stakeholders (Smith, Graham, & Guttmacher, 2005). Preparing local communities during health emergencies is considered a basic goal, but implementation and monitoring remain a challenge.

At that time, emergency risk communication and community participation were an important part of public health. Community communication and response strategies should change over time based on the evolution of the COVID19 outbreak (epidemiology) (Esposito, Principi, Leung, & Migliori, 2020).

To understand risk perception behaviors and existing barriers, specific needs and knowledge gaps, it is important to actively promote two-way dialogue with the community. Community-based response measures to mitigate COVID19 cases must ensure that all people at risk of contracting the virus are identified, contacted, and involved. In order to communicate the risk of COVID19, effectively determine the channels people use to search for health information in each specific community for example the broadcast media (TV and radio), reputable websites, social networks (Facebook, Twitter, and so on.). Community and health center, health boards and publication boards brochures and pamphlets (World Health Organization, 2020).

COLLABORATIVE GOVERNANCE AND SOCIETY:

Comprehensive government health plans are necessary for a successful response to the pandemic, but are not enough to fight the pandemic alone. Success requires more than high-tech medical tools, healthcare, and vaccines/immunizations; it also requires the widespread adoption of sometimes simple but unpopular (and potentially harmful) protocols such as social distancing, restrictions on population movement, mask distribution and hand washing. Therefore, building and operating an effective national pandemic response system involves much more than simply investing in proven public resources health methods.

As can often be observed, even technically good solutions are not always implemented due to political constraints (Brinkerhoff & Crosby, 2002). In fact, the political aspect of the pandemic response requires government agencies responsible for the pandemic response to design a model that includes advanced public health tools as well as local government officials and non-state actors.

Such a strategy is not easy to implement. However, the World Health Organization (WHO) and other organizations are increasingly calling for such a partnership. WHO advocates that states recruit non-state actors to play a variety of roles, including distributing resources such as bed nets, condoms and sanitary toilets; gather and disseminate information to educate and mobilize the public to achieve public health priorities; represent the interests of the community while promoting equal access; and provide some funding and aftercare (Malden, 2012). According to the WHO (World Health, 2009), "there is significant potential for improving public health through a strategic partnership between governments and civil society".

CONCLUSION:

The usual notion has been that pandemic preparedness and response are the duty of the state. Working alone, the state has proven only partially effective, a scenario aggravated by the public's natural predisposition to dismiss the possibility of future pandemics as improbable or irrelevant to themselves. Governments respond to the public's predisposition by focusing their limited resources on immediate, visible initiatives like road building, bridge maintenance, park expansions, etc., often neglecting preparedness for future outbreaks.

School closures can have life-long consequences, reduce expected students to learn again, and exacerbate global education and economic inequality. In order to prevent the spread of COVID19, widely promoted measures that rely on social distancing and frequent hand washing alone cannot produce the expected results. Education on wearing masks is very important. As a result, it is critical to realize the importance of allowing citizens to digitally envision the benefits of healthy activities. No country in the world has a perfect plan to safely reopen schools, there are only options that are not so bad. On a global scale, for all schools and educational institutions, there is no single strategy that works. Despite these challenges, the school still operates significantly in public health interventions and regularly checks the CDC guidelines for changes in their protocols and definitions. These resources can promote the coronavirus safety of students and faculty in the

school so that they can return to the classroom safely. If children can learn the basic laws of hygiene in China, South Korea, Japan, and Vietnam such as washing hands and paying attention to the hygiene practices, then children and adolescents should be able to do so, even wearing facial masks in Pakistan.

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