



DEVELOPMENT OF QUESTIONNAIRE PROFORMA TO SURVEY STUDY ON HEALTH IMPACT OF AYURVEDA PREVENTIVE MEASURES OF COVID-19 JANA-PADODHWAMSA

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ABSTRACT

A survey study was undertaken by Rishikul Ayurved Campus, Haridwar. A questionnaire proforma is a research instrument or tool of survey study. Questionnaire proforma is a set of questions asked to individuals to obtain statistically useful information about the intended objectives of the main study. Questionnaires become a valuable instrument/tool when properly constructed and administered among the target population. A questionnaire enables the researcher to collect information from a large group of populations. An appropriate questionnaire construction is critical to the success of a survey. This research article elucidates adequate questions, length of questions, should not excessive time be taken, correct ordering of questions, and correct scaling. Good questionnaire proforma makes the survey worthwhile, as it reflects the views and opinions of the participants in an accurate manner.

Keywords: Questionnaire, Survey, Research

INTRODUCTION

In early December 2019, an outbreak of coronavirus disease 2019 (COVID-19), caused by a novel severe

acute respiratory syndrome coronavirus 2 (SARS-CoV-2), occurred in Wuhan City, Hubei Province,

China. Corona virus is a deadly communicable disease¹. Total deaths in the world are 62.6L and 52.1Cr confirmed cases and in India total deaths are 5.24L and 4.31Cr confirmed cases till now². Despite vaccination, cases are still increasing and affecting human lives radically. Health sectors were drastically affected by the COVID-19 disease. Due to the unavailability of vaccines and treatment, people were more rely on ayurveda preventive measures and immunity boosters to fight the disease and its symptoms. Therefore, a survey planned to study the health impact on the population due to ayurveda preventive measures and immunity boosters of COVID-19. Epidemics or highly communicable diseases or intermittent outbreaks of infectious disease have wreaked havoc on human communities since ancient times and had lasting effects on societies throughout history. Ayurveda described the terminologies Sankramaka roga and Aupasargika rogas for communicable diseases and another term Janapadodhwamsa elaborated on the pandemic situation. In Charak samhita Vimansthan 3rd chapter explains the epidemic as Janapadodhwamsa. Janapada means the group of people or community and dhwamsa means demolition or annihilation. Therefore, Janapadodhwamsa means annihilation or destruction of a community, an empire, or people belonging to a country³. This survey tool finds beneficial in multiple domains, as an easy, yet reliable, method of getting information and opinion, and questionnaires play an acknowledged role in the survey study. McLeod has stated that "questionnaires can be an effective means of measuring the behavior, attitudes, preferences, opinions, and intentions of relatively large numbers of subjects more cheaply and quickly than other methods."⁴

Questionnaire Proforma

Perceptions and attitudes are subjective to establishing a survey study. As such, these are best studied by qualitative methods such as face-to-face interviews and focus group discussions. Therefore, we opted for a face-to-face interview via a questionnaire survey. Face-to-face interviews have obvious advantages which include the ease of circulation of questionnaire proforma among the population, removing any hur-

dles participants face during the administration of a proforma, covering the entire target population, responses rates being higher, ease of logistics and infrastructure, coverage of intended topics, and cost-efficiency. Hence, the decision was taken to develop a new questionnaire. The survey study was undertaken by the Rishikul Ayurved campus in Haridwar. A guide, Co-guide, and Statistician were chosen to develop the questionnaire who reviewed and revised it independently. In the very first stage, the main steps were language errors rectification and highlighting the questions which clarified the intended objectives of the main study or not. Discussions over refining the questionnaire were followed by a group meeting of Scholar, Guide, Co-guide, and Statistician. All the parameters were considered, and questions were finalized accordingly.

Dimensionality Of Questionnaire Proforma

1. Multidimensional questions related to Demographics, Preventive Measure Data, and the Primary objective i.e, Health Impact Data.
2. Demographic and Ayurveda Preventive Measures Data as Yes/No questions.
3. Primary objective viz., Health Impact Data as Close-ended questions.

Infrastructure Of Questionnaire Proforma

1. Unambiguous/ Accurate framing of questions.
2. Short and simple statements (as far as possible) are addressed in each question.
3. Avoiding questions that demand a detailed view or inconsistent responses from participants.
4. The sequence of questions was arranged in a specific manner viz., from Ayurveda Preventive Measures/Immunity Booster to Health Impact Data.

Length Of Questionnaire Proforma

This aspect was the challenging point because it should be prepared in such a manner that the questionnaire proforma should hold every detailed part of the study, short and quickly answerable. Finally, a compromise was reached so that the total of 20 dichotomous (YES/NO) questions with sub-questions and dichotomous were just adequate to measure the intended constructs of the study.

Administration Format

The questionnaire was administered offline via questionnaire proforma. A 20-item questionnaire was thus developed, which was divided into two sections, Part I deals with Ayurveda preventive measures and immunity boosters and this section has Independent Variables, Part II deals with Perceived Physical Health Impact Data and Mental Health Impact Data, and this section has Dependent Variables. These were as follows: Four questions of Part I are Predictors, two questions related to Ayurveda preventive measures and immunity boosters, one question related to Regularity, and One question related to Duration. In part II of the questionnaire proforma, one question related to Co-morbidities, one question is a Leading question, 9 questions are related to Physical Health Impact Data, and One question is related to Mental Health Impact Data. Hence, ten questions are directly targeted to the primary objective viz., Physical Health Impact Data and Mental Health Impact

Data. Of these, one was a scale question which is the Leading question. The majority (18) were dichotomous questions, and 2 questions are multiple-choice types, mostly with three options each. All the questions were made mandatory. Administration modalities were discussed. The respondents were asked if they were diagnosed with COVID-19. Then, the respondents were asked to indicate if during the COVID-19 lockdown they used medicinal plants single drug/formulation as a preventive measure and immunity booster or treat symptoms of COVID-19 and their impact on health. The selection of the Ayurveda Preventive Measure and Immunity Booster was based on guidelines directed by the ministry of Ayush. Finally, the respondents were asked to select the system in which they found effectiveness after drug/formulation intake. The actual survey consisted of a questionnaire and data collected by group administered questionnaire. We have maintained the confidentiality and reliability of the shared data.

PART I OF THE QUESTIONNAIRE PROFORMA	PART II OF QUESTIONNAIRE PROFORMA
Predictor- 4 question	Co-morbidity-1 question
Ayurveda preventive measure-1 question	Leading question-1 question
Ayurveda immunity booster-1 question	Physical health impact data-9 question
Regularity-1 question	Mental health impact data-1 question
Duration-1 question	

We ensured that the known disadvantages of a questionnaire survey were kept to a minimum with the following measures:

Skipped questions: The questionnaire proforma is created in such a manner that each question is linked to another so that one cannot submit without attempting all questions.

Accessibility issues: This would not be much of an issue, but a few participants of group B were trying to hide their covid positive history due to social stigma. Difficulty with language and differences in understanding and interpretation of proforma also was not expected to be a problem.

Difficult to analyze answers: Questions were Closed-ended so this reduces the hurdle to checking the responses. The approximate time to complete the questionnaire proforma was judged to be about 12–

15min. A topic of the survey study was stated at the beginning of the questionnaire, which included the consent for the study too. In addition, we described the plan of study and the proforma in both Hindi\English language to the participants.

CONCLUSION

This research article has been an effort to describe the process of development of a new questionnaire proforma for conducting a survey study, to examine the health impact due to ayurveda preventive measures for COVID-19.

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