

## Assessment of Public Transport Drivers Knowledge, Attitude and Practices to Use Personal Protective Equipment for Anticipation of Covid-19 Transmission in Jimma Town, Southwest, Ethiopia

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### Abstract

**Background:** The coronavirus disease 19 (COVID-19) pandemic is highly infectious disease as it reached all countries in the world within a record short period of time. Upto date, there is no confirmed treatment drug or vaccine for tackling spread of corona virus disease 19 (COVID-19). Hence effective use of personal protective equipment (PPE) is key to mitigating the spread of corona virus disease 19 (COVID-19) in the community. This study aimed to assess Public Transport Drivers Knowledge, Attitude and Practice to Use personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, Ethiopia.

**Methods:** Cross sectional descriptive study design was conducted among 422 Public transport drivers in Jimma Town Southwest Ethiopia. Data were collected from October to December 2020. A structured and pre-tested self-administered questionnaire was used to collect data. Data analysis was done by using SPSS VERSION 24.

**Results:** A total of 422 respondents were included in the study with a response rate of 100%. 421 (99.8%) were males and 1 (0.2%) were females. Their mean age was  $24 \pm 2.66$  years. The proportions of the participants who had poor knowledge about the Use personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, Ethiopia was 420 (99.5%). About 256 (60.7) of public transport drivers had positive attitude towards the Use personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, Ethiopia. 245 (57.6%) of the participants agreed their work place is highly risk for getting a COVID-19 pandemic. Among the participants 217 (51.4%) was found to be good practice to use personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, Ethiopia.

**Conclusion:** Most of Public transport drivers in Jimma Town southwest Ethiopia were poor knowledge about the Use personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, Ethiopia. But their attitude and practices is higher than their knowledge. Hence serious education is required to up raise their knowledge in order to tackle the transmission of COVID-19 in Jimma Town, Southwest, Ethiopia.

**Keyword:** COVID-19; PPE; Public Transport Drivers; Attitude; Knowledge; Practice

## **Introduction**

Coronaviruses (CoVs) are members of the family Coronaviridae, the enveloped viruses that possess extraordinarily large single-stranded RNA genomes ranging from 26 to 32 kilobases in length [1]. Can cause illnesses such as the common cold, severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS) [2].

Coronavirus disease 2019 (COVID-19) is characterized by a pneumonia, fever, breathing difficulty and lung infection which caused by a newly discovered virus named severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), was first reported in Wuhan, Hubei Province china, in December, 2019 [3-5]. Has clear potential for long-lasting global pandemic, high fatality rates and incapacitated health [6]. In March 2020, the World Health Organization (WHO) declared the COVID-19 outbreak a pandemic [7]. Coronavirus Disease 2019 which can cause severe respiratory disease in humans, has been a potential threat to human health attracting worldwide attention after the 2003 severe acute respiratory syndrome (SARS) pandemic [8]. Followed by the 2012 middle east respiratory syndrome (MERS [9,10]. The potential for these viruses to grow to become a pandemic worldwide represents a serious public health risk [11]. The pandemic has also precipitated social disruption, exceptional health-care utilization, and economic instability worldwide [12]. The coronavirus pandemic is characterized by high infectious rates and relatively high mortality, especially among the elderly over the age of 80 [13].

The Coronavirus disease has a spectrum of clinical presentations. Approximately 81% of those infected will have mild disease not requiring hospital care less severe forms of pneumonia and 13.8% had a severe condition and 4.7% were critically ill requiring hospitalization that may include intensive care unit admission, endotracheal intubation, and mechanical ventilation and nearly half (49%) of the critically ill patients have died [14,15]. Based on the available evidence, the primary route of viral transmission appears to be through respiratory droplets between people through close contact droplets, although viral particles found within the path of hospital ventilation systems suggests that aerosolization of these particles makes COVID-19 even more contagious [16,17] and airborne transmission of SARS-COV-2 is also possible due to its persistence into aerosol droplets in a viable and infectious form [18]. The people most at risk of infection are those who are in close contact with a COVID-19 patient or who care for COVID-19 patients, hence Preventive and mitigation measures are key in the community. Up to date, there is no specific treatment available and management for COVID-19 viral infection. The only available infection prevention approaches are case isolation, contact tracing and quarantine, physical distancing, decontamination and hygiene measures.

COVID-19 pandemic is a respiratory disease that is different from others infections which is transmitted through infected bodily fluids. Because of these differences in transmission, personal protective equipment (PPEs) for COVID-19 prevention and protection is highly expected and mandatory.

The use of PPE is one effective measure within a package of administrative and environmental and engineering controls, as described in WHO's Infection prevention and control of epidemic- and pandemic-prone acute respiratory infections in health care [19]. The use of PPE are the most visible in the hierarchy of controls of COVID-19 pandemic, but PPE controls is should not be relied on as a stand-alone primary prevention program [20].

Measures for protecting workers from exposure to, and infection with, SARS-CoV-2, the virus that causes Coronavirus Disease 2019 (COVID-19), depend on the type of work being performed and exposure risk, including potential for interaction with people with suspected or confirmed COVID-19 and contamination of the work environment [21], the availability of PPE and the attitude of to use PPE. In the COVID-19 pandemic every individual required PPE to tackle the pandemic. The greatly increased need for PPE caused by the COVID-19 pandemic has caused PPE shortages [22].

The current global stockpile of PPE is insufficient the supply of Medical mask, Gown, Gloves and Eye protection (goggles or face shield) is soon expected to be insufficient [16]. Besides this inappropriate use of equipment PPE and careless removal of PPE after use. The existing evidence related to the epidemiology of Coronavirus Disease 2019 (COVID-19) is rapidly evolving [23], therefore, inferences based on existing data will need to be made to make decisions to wards community awareness creation about COVID-19 pandemic transmission appropriate PPE utilization to whole communities. Particularly risk and the responsible groups of the community such as Public Transport Drivers. Public transport drivers need to be knowledgeable about transmission and prevention of the virus, utilization as well as limitation of their respective PPE.

### **Aim of the Study**

This study was aimed to assess Utilization of PPE and its associated factors among Public transport drivers to Prevent COVID-19 pandemic in Jimma Town, Southwest, Ethiopia.

### **Methods**

#### **Study setting and period**

The study was conducted in Jimma Town from October 28 - 15 December 2020, Jimma town is the capital city of Jimma Zone in Oromia National Regional, which is 335 Km at southwest of Addis Ababa, the capital city of Ethiopia.

#### **Study design, population and sample**

Cross sectional descriptive study design was conducted to assess Public Transport Drivers Knowledge, Attitude, Practices and Use of personal protective equipment for anticipation of COVID-19 Transmission in Jimma Town, Southwest, and Ethiopia. All public transport drivers who received a legal driving license and give transport services during the study period in the town were the source of population and drivers who fulfilled the inclusion criteria were the study population.

#### **Inclusion and exclusions criteria**

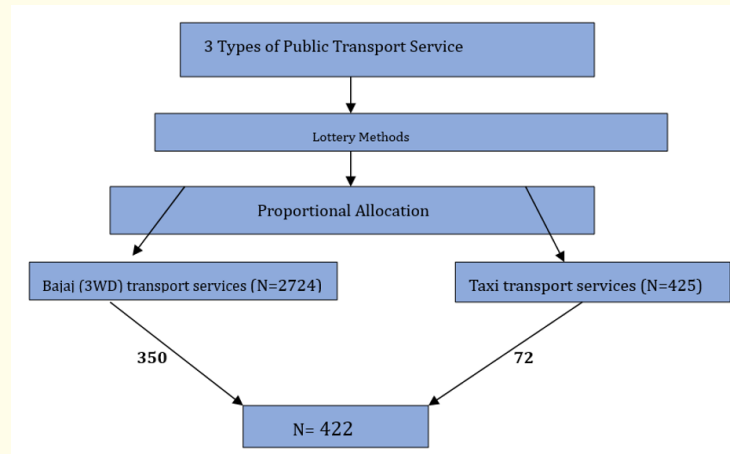
Public transport Drivers (age  $\geq 20$ ) and who have legal driving license, permanent residents (greater than 6 months) of Jimma Town were included in the study. Whereas Public transport drivers who were unwilling to respond and absented during the data collection were excluded from the study.

#### **Sample size determination**

The sample size (n) required for the study was calculated using the formula to estimate a single population proportion formula by considering the following assumptions.  $Z_{\alpha/2}$  = critical value for normal distribution at 95% confidence level which equals 1.96 (Z value at  $\alpha = 0.05$ ), d = margin of error 0.05 and P = 50% because estimation proportion of Utilization of PPE and its associated factors among Public transport drivers to Prevent COVID-19 pandemic is unknown. In addition, considering a 10% non-response rate, the total sample size was 422.

#### **Sampling procedures**

In Jimma Town, there are 3 types of Public transport service namely Bajaj (3WD) transport services, Taxi transport services and Bus transport services. Among the three transport services, two were selected using lottery method namely Bajaj transport and Taxi transport services. Therefore, the total sample size was proportionally allocated to the two transport serves based on inclusion criteria (Figure 1).



**Figure 1:** Sampling procedure for assessing knowledge, attitude and practice of public transport drivers on PPE utilization to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia 2020.

### Data collection instrument and procedure

The structure questioner was adapted from similar literatures, which contain 4 parts. Part-I: Participants socio-demographic data, Part-II: Knowledge-related questions, Part-III: Attitude statements, Part-IV: Public transport drivers Practice on Utilization of personal protective equipment to prevent the transmission of Noble corona virus (Covid-19) virus. The questioner was prepared in English and translated to dominant local languages (Amharic and Afan Oromo) and back to English by different language expertise. Then the questionnaire was pre-tested on a 5% of the total sample size in Adjacent Town (Asendabo) before actual data collection. Amendment of the questioner was done after the pilot test. Four experienced BSC (2 nurses and 2 public health) and two supervisors were recruited and trained for data collection and supervision respectively. The training was given one and half day on how to ensure confidentiality, tool, how to protect themselves and the community from COVID-19 pandemic and interview techniques. Both the data collected and supervisors followed to the WHO Guidelines on COVID-19 pandemic prevention [24]. Accordingly, they maintained social distance, worn PPE such as facemask, glove and used alcohol-based hand sanitizers during the data collection. The data were collected via face-to-face interview based method.

### Data quality assurances and management

Data quality was assured by careful selection and collection of complete and appropriate data. The clearness and completeness of data collection formats were checked before the actual data collection. Data were cleared before entered into Epi-data 3.1. The collected data were processed and retained careful in line with its objective. A 5% sample pretest was performed on adjacent town (Asendabo) before the commencement of the study.

### Data processing and analysis

After collecting, the data were cleaned and checked for completeness and consistency. The data generated were analyzed using Statistical Package for Social (SPSS version 24) for analysis. Descriptive statistics was used for calculating frequency and percentage of both dependent and independent variables.

**Ethical consideration**

Ethical clearance was obtained from the institutional review board (IRB) of Jimma University, Ethiopia. Official Permission was obtained from the Oromia regional Transport bureau, Jimma town transport bureau. All study participants were adult and verbal consent was obtained from each participant to confirm willingness for participation after explaining the objective of the study. Confidentiality of the information was sustained. The participant had full right to withdraw from this study.

**Results**

**Socio-demographic characteristics of respondents**

A total of 422 participants were participated in this study. All individuals gave their consent to participate in the study with response rated 100%. Four hundred twenty one (99.8%) of the respondents were males. The mean age of the respondents was --- years. One hundred twenty-Six (29.9%) of the respondents were in the age group of 25 to 29 years. The majority respondents 263 (62.3%) of them were single followed by married 151 (35.8%). Two hundred twenty-two (52.6%) of the respondents were orthodox Christian religion followers. Most of the respondent 392 (92.9%) live in Jimma Town. Two hundred forty four (57.8%) of the respondents have attended from grade 9 to 12. Two hundred forty-five (58.1%) of the respondents had monthly salary 3001 - 5000/Month. One hundred thirty (30.8%) of the respondents had working experience from one year to three years. Two hundred seventy (64.0%) of the public transport vehicles were Baja (3WD) and the remaining 152 (36.0%) were Taxi (4WD). Two hundred seventy-two 272 (64.5%) of the respondents derive others vehicles. Almost all 417 (98.8%) of public transport drivers derived in day time and 312 (73.9%) of the drivers drive < 8 Hours/day. Two hundred nineteen (51.9%) of the driver hadn't health insurance 374 (88.6%) of the drivers hadn't any medical condition (Table 1).

Socio-demographic characteristics	Categories	Frequency	Percent
Age	20 - 24	115	27.3
	25 - 29	126	29.9
	30 - 34	48	11.4
	35 - 39	62	14.7
	>= 40	71	16.8
Sex	Male	421	99.8
	Female	1	0.2
Marital status	Single	263	62.3
	Married	151	35.8
	Divorced	6	1.4
	Widowed	2	0.5
Religion	Orthodox	222	52.6
	Muslim	148	35.1
	Protestant	50	11.8
	Catholic	2	0.5
Residence	Jimma Town	392	92.9
	Out of Jimma Town	30	7.1

Education status	1 - 8	89	21.1
	9-12	244	57.8
	College and above	89	21.1
Av. Household monthly Income in EBR	< 1000/month	59	14.0
	1001 - 3000/Month	82	19.4
	3001 - 5000/Month	245	58.1
	> 5000/Month	1	0.2
	Didn't want to mention it	35	8.3
Year of service	< 1 year	54	12.8
	1 - 3 Years	130	30.8
	3 - 5 Years	121	28.7
	> 5 Years	117	27.7
Types of Vehicles	Bajaj	270	64.0
	Taxi	152	36.0
Owner of the Vehicles	Owen	144	34.1
	Other's	272	64.5
	Government's	6	1.4
When you derived most of the time	Day	417	98.8
	At night	2	0.5
	Both	3	0.7

Table 1: Socio-demographic data of public transport drivers in Jimma Town, Southwest, Ethiopia (N = 422).

#### Knowledge of the participants towards utilization of PPE

This study showed that 414 (98.1%) of respondents had heard about PPE before this study. Three hundred seventy (87.7%) of the participants heard about the use of PPE for preventing of COVID-19. The main sources of the information for the use of PPE for preventing the transmission of COVID-19 is Television 169 (40.0%) followed by social media 136 (32.2%), 236 (55.9%) of the participants knew 3 - 4 types (items) of PPE. Four hundred twelve (97.6%) of the participants responds overall clothes are PPE to prevent COVID-19 pandemic transmission. 402 (95.3%) of the participants had knowledge the uses of PPE to derive safely. 366 (86.7%), 272 (64.5%), 326 (77.3%) of the participants were know, mask and gloves, facemask are PPE used for the prevention of COVID-19 transmission respectively. And 292 (69.0%) of the participants know the indication of the PPE (Table 3).

Statements	Categories	Frequency	%
1. Have you heard of PPE before?	Yes	414	98.1
	No	8	1.9
2. Do you hear the use of PPE for preventing of COVID-19 Pandemic?	Yes	370	87.7
	No	52	12.3
3. Source of information the use of PPE for preventing of COVID-19 Pandemic?	Newspaper	7	1.7
	Social Media	136	32.2
	Health professionals	14	3.3
	Television	169	40.0
	Radio	96	22.7
4. How many types (items) of PPE do you know?	1 - 2	185	43.8
	3 - 4	236	55.9
	5 - 6	1	0.2

5. Overalls clothes are PPE to prevent COVID-19 Pandemic	Yes	412	97.6
	No	10	2.4
6. Is using Personal Protective Equipment important to drive safely?	Yes	402	95.3
	No	20	4.7
7. Do you know if the face mask and gloves worn protects you against COVID-19 infections?	Yes	366	86.7
	No	56	13.3
8. Gloves are Personal Protective Equipment to prevent COVID-19 Pandemic.	Yes	272	64.5
	No	150	35.5
9. Face Masks are Personal Protective Equipment to prevent COVID-19 Pandemic	Yes	326	77.3
	No	96	22.7
10. Do you know the indications for PPE?	Yes	291	69.0
	No	131	31.0

**Table 2:** Distribution of public transport drivers knowledge on PPE Utilization to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia (N = 422).

Statements	Categories	Frequency	%
1. I am willing to use the PPE recommended for COVID-19 prevention	Agree	390	92.4
	Undecided	20	4.7
	Disagree	12	2.8
2. I am feeling following strict rules in wearing face mask and glove is mandatory.	Agree	355	84.1
	Undecided	28	6.6
	Disagree	39	9.2
3. I strongly believe that the available PPE keep standard quality	Agree	341	80.8
	Undecided	76	18.0
	Disagree	5	1.2
4. Wearing PPE is effective in preventing COVID-19 pandemic	Agree	209	49.5
	Undecided	208	49.3
	Disagree	5	1.2
5. I believe locally manufactured PPE is as good as imported ones	Agree	87	20.6
	Undecided	333	78.9
	Disagree	2	0.5
6. I recommend for my clients to use PPE while using taxi/bajaj	Agree	234	55.5
	Undecided	187	44.3
	Disagree	1	0.2
7. It is not my concern about my client if I can use PPE while driving	Agree	372	88.2
	Undecided	49	11.6
	Disagree	1	0.2
8. It is effective in preventing COVID-19 if one of the two person used PPE at the same time	Agree	375	88.9
	Undecided	47	11.1
	Disagree	0	0.0
9. You are Susceptible for risk of getting a COVID-19 pandemic or being transmitted through your nature.	Agree	243	57.6
	Undecided	178	42.2
	Disagree	1	0.2

**Table 3:** Distribution of public transport drivers attitudes on PPE to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia (N = 422).

The overall knowledge of the participants was summed and estimated after calculated mean scores. Which resulted in a mean score of 8.1896. The maximum score was 12.00 the minimum score was 7.00. Based on the response of those public transport drivers scored above the mean > 8.1896 of knowledge statement were considered as having good knowledge 2 (0.5). Whereas public transport drivers scored who scored ≤ mean score (≤ 8.1896) of knowledge statement were considered as having poor knowledge the uses of PPE to prevent the transmission of COVID-19 (Table 6 and figure 2).

**Attitude of the participants towards utilization of PPE**

Attitude of the participants towards the uses of PPE to prevent the transmission COVID-19 was assessed by asking with liker scales (Agree = 1, undecided = 2, and disagree = 3). Majority 390 (92.4%) of participants were willing to wear PPE to prevent the transmission of COVID-19 (Table 4). Based of the overall computed statement of Attitudes 256 (60.7) of the participants had positive attitude towards using of PPE to prevent the transmission of COVID-19 (Table 5 and figure 3).

**Practice of the participants towards utilization of PPE**

This study showed that, 268 (63.5%) of public transport drivers had used before COVID-19 pandemic out breaks, 275 (62.5%) of the participants were seen PPE before COVID-19 pandemic out breaks. 202 (47.9%) of the participants had worn PPE during driving and 173 (41.0%) of them touch the front of the mask when taking it off, 394 (93.4%) of the participants were reused mask. Whereas 220 (52.1%) were never worn PPE while driving. 285 (67.5%) of the participants cover their nose and mouth during coughing or sneezing. 304 (72.0%) and 298 (70.6%) of the participants reported there is no work have any policy on PPE utilization in their work policy and correctly select PPE for the prevention of COVID-19 transmission (Table 4).

Statements	Categories	Frequency	%
1. Have you ever used PPE before COVID-19 pandemic out breaks?	Yes	268	63.5
	No	154	36.5
2. Have you ever seen PPE before COVID-19 pandemic out breaks?	Yes	275	65.2
	No	147	34.8
3. Have you worn a face mask and glove when you driving?	Yes	202	47.9
	No	220	52.1
4. If yes, do you touch the front of the mask when taking it off?	Yes	173	41.0
	No	249	59.0
5. Do you reuse a mask?	Yes	394	93.4
	No	28	6.6
6. Do you cover your nose and mouth during coughing or sneezing with the elbow or a tissue, then throw the tissue in the trash?	Yes	285	67.5
	No	137	32.5
7. Does your work have any policy on PPE use?	Yes	304	72.0
	No	118	28.0
8. Do you know how to correctly select PPE?	Yes	298	70.6
	No	124	29.4

**Table 4:** Distributions of public transport drivers practice to towards utilization of PPE to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia (N = 422).



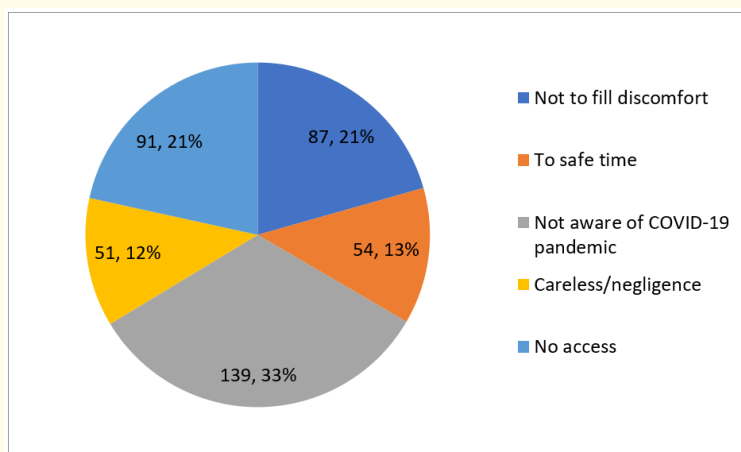
The overall Practice of the participants was summed and estimated after calculated mean scores. Which resulted in a mean score of 10.7891. The maximum score was 15.00 and the minimum score was 8.00. Based on the response of those Public transport drivers scored above the mean > 10.7891 of PPE utilization practices statement was considered as having good practice 217 (51.4%). Whereas Public transport drivers who scored ≤ mean score (≤ 10.7891) of practice statement were considered as having poor practice 205 (48.6%) towards PPE utilization practices statement (Table 5 and figure 2).

**Utilization of PPE**

One four hundred fourteen (98.1%) of the participants were reported as they were not used PPE during driving. The reasons for not using PPE were 139 (33%), 91 (22%) not available, 87 (21%) not comfortable to use, 54 (13%) to save time and 55 (12%) Careless/negligence from work side (Table 5 and figure 3).

Statements	Categories	Frequency	%
1. Do you use PPE all the time while driving to prevent COVID-19 pandemic?	Yes	8	1.9
	No	414	98.1
2. If yes to Q 1 what type? (More than one answer is possible).	Glove	21	5
	Facemask	394	93.4
	Face shield/Safety glass	---	
	Eye protections	---	
	Gowns	7	1.6
3. If No to Q3, what are the reasons for not using PPEs all the time? (More than one answer is possible).	Not to fill discomfort	87	21
	To safe time	54	13
	Not aware of COVID-19 pandemic	139	33
	Careless/negligence	51	12
	No access	91	22

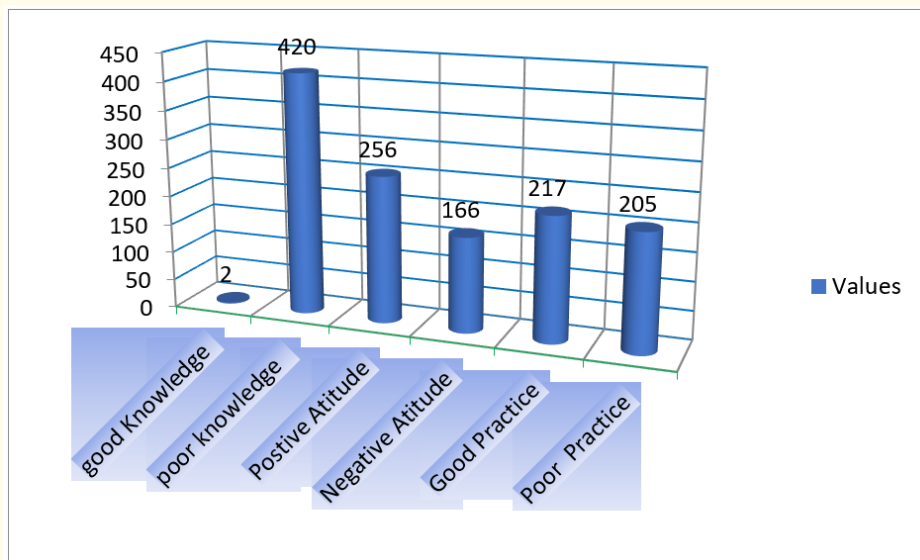
**Table 5:** Distributions of public transport drivers utilization of PPE to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia (N = 422).



**Figure 2:** PPE utilizations among public transport drivers to prevent the transmission of COVID-19 in Jimma Town, Ethiopia, 2020.

Domains	Minimum score	Mean score	Maximum score	Range	Categories	N (%)
Knowledge	7.00	8.1896	12.00	> Mean score	Good Knowledge	2 (0.5)
				<=Mean score	Poor Knowledge	420 (99.5)
Attitudes	9.00	11.9810	17.00	> Mean score	Positive Attitude	256 (60.7)
				<=Means core	Negative Attitudes	166 (39.3)
Practices	8.00	10.7891	15.00	> Mean score	Good Practices	217 (51.4)
				<=Mean score	Poor Practices	205 (48.6)

**Table 6:** Overall assessment public transport drivers knowledge, attitudes and practices to utilization of PPE to prevent transmission of COVID-19 in Jimma Town, Southwest, Ethiopia (N = 422).



**Figure 3:** Knowledge, attitude and practices of public transport drivers to use for prevention of COVID-19 transmission in Jimma Town, Southwest, Ethiopia, 2020.

### Discussion

Our finding provides insight into Public transport drivers, knowledge, attitudes and practices about the uses of PPE to prevent the transmission of COVID-19. Covid-19 Specific PPE utilization knowledge; attitudes and practices awareness creation had the most significant impact on Public transport drivers, because Public transport drivers were the most concerned or responsible about being exposed or contacting COVID-19 at work. And the present study showed that, the mean score for knowledge, attitude and practices were 8.1896, 11.9810 and 10.7891 respectively. From 422 respondents 414 (98.1%) had heard about PPE before COVID-19 outbreaks. The main sources of Information for participants 169 (40%) about the use of PPEs for prevention of COVID-19 transmission is Television this is inline with the study done in Addis Zemen Ethiopia [25]. Public transport drivers of Jimma Town had poor knowledge about the uses of PPE for the prevention of COVID-19 transmission, only 2 (0.5) of the respondent had good knowledgeable. This study is comparable

the study in Nigeria on HCW [26]. Majority of the respondent 390 (92.4%) of the respondent agreed that wearing PPE for prevention of COVID-19 transmission, this study is similar with the study done in Nigeria [27]. Most participants 217 (51.4%) had good practices about the uses of PPE for the prevention of COVID-19 transmission.

In this study, the utilizations PPE among public transport drivers very low which was 8 (1.9%). This could be due to lack of awareness about COVID-19 transmission and negligence of the drivers.

## **Conclusion**

Almost all of the public transport drivers in Jimma Town south west Ethiopia had Poor knowledge for utilization of PPE to prevent COVID-19 Transmission. But had positive attitude and Good practices for utilization of PPE to prevent COVID-19 Transmission in the study area. In this study very low PPE utilization rate was observed and the main reason not using PPE was due to lack of awareness about COVID-19 pandemic. Therefore, intensive awareness creation activities and education is required to up raise their knowledge in order to tackle the transmission of COVID-19 in Jimma Town, Southwest, Ethiopia. To achieve this multi-sectoral collaborations to be needed in the region as well as the country.

## **Study Limitations**

We believed that our finding has same limitations. The first is the nature of the study design, in cross-sectional study design, the fundamental interferences may not be drawn and association can be influenced by cofounding variables, second, the study was conducted only in single Town cannot be generalize, Finally, we could not able to compare our study with other studies in the region as well as abroad due to lack of information in the area.

## **Conflict of Interest**

The authors declare that they have no conflict of interest.

## **Availability of data and Materials**

Not applicable.

## **Acknowledgment**

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