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A STUDY ON IMPACT OF FACTORS INFLUENCING RESPIRATORY DISEASES LIKE INFLUENZA WITH RESPECT TO EPIDEMICS IN VISAKAHAPATNAM ANDHRA PRADESH

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Abstract
In a cluster of connected areas of study, including the undeniable confirmation of factors impacting educational attainment, explanations of shifting levels of interest in formal and informal adult preparation, and conditions expected for the turn of events and improvement of foundations and practices that support dependable learning, the possibility of social capital has increased in importance over the past ten years or so. Social capital has been defined in a variety of ways in these specific circumstances, all of which are linked to entire norms, values, and relationships that reflect how human individuals help in "a commonplace life considering family and neighborhood." In this way, social capital improvement seems to be directly related to neighborhood guidance since the neighborhood is fully represented as a social learning process that empowers individuals and remembers them as inhabitants for total activities focused on economic development. By delving into various key topics of interest about the typical relationships between neighborhood and social capital reorganization, the creator of this obligation casts doubt on the validity and adequacy of social capital as a key concept in adult tutoring research. Multivariate methods and ANOVA were used to examine the data. We recognize the causes of clinical problems and risk factors for individuals, as well as the natural ways of life that contribute to maternal success. The present study includes a survey in the region of the rural and urban parts of Visakhapatnam district.

Keywords: Social Capital, Adult Education, Neighborhood Learning, Educational Attainment, Economic Development, Visakhapatnam District.

Introduction

Neighborhood is an advancement framework that emphasizes individuals' overall efforts to improve their daily environment while depending on their own motivation and action as much as is realistically possible [1]. In any case, the concept of using "neighborhood" in personal growth progress is an unreliable one that has been employed in numerous research contexts. On a methodological level, there has been a tendency to portray "the neighborhood" without providing evidence as to whether it implies a geographical or political [2]. Social class is often as conceivable to have a knot of meetings and vested parties that are regularly engaged in real relationships [3]. In any case, citizens of lamentable organizations may have unmistakable traits in common, such as low and erratic pay, sporadic employment, little exposure to formal structures, and a generally poor quality of life; the families are objectively identifiable in one another's eyes [4]. These family credits influence how they perceive and resolve everyday concerns by fostering a positive attitude toward neighborhood-friendly behavior [5].

Aim

The goal of the current study was to emphasize the health conditions, as well as lifestyle changes (both financial and sociable), that are causing major health issues in the majority of visakhapatnam populations.

Methodology

A collection of different research on visakhapatnam population makes up the current study. By comparing the tribes from various geographic regions, it was discovered why poverty and undernutrition persisted among them even after the government and other organizations gave help and money.

Results/Findings

The balance of the peoples way of life was upset when thei r early occupation gave way to their current one.Their heal

th may have deteriorated since the change from farming o r hunting and gathering to daily earnings was a major shoc k to them.According to WHO rules, thebulk of the visakhap atnampeoples was considered underweight if their mean BMI was less than 18.5 kg/m^2

Results and Discussion

Food Habits

The graph from Fig. 01 shows the percentage of individuals in various habit categories. The majority of individuals eat both vegetarian and non-vegetarian meals, according to this graph, with a significantly higher percentage (76.00%) than those who eat vegetarian (5.33%) or non-vegetarian-only diets (18.67%). The proportion of people's food habits is shown by the color in this illustration. Poor cleanliness, raw eggs, undercooked meat, exposure to polluted water and surfaces, unclean refrigerators or storage containers, and improperly washing fruits and vegetables may all be causes and explanations [6].

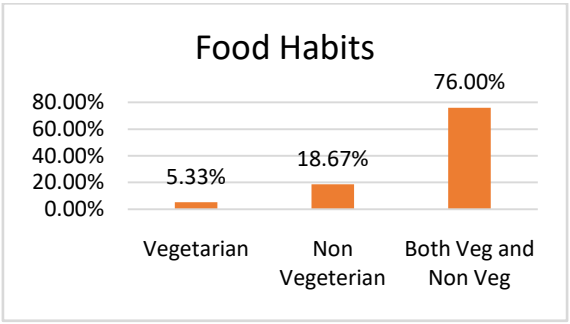

Fig. 01 types of habits

Salary Categories

In Fig. 02, the monthly income of various demographic groups is plotted against the proportion of the population and the number of individuals. As illustrated in this graph, the majority of individuals earn a monthly wage of 000 p.m., which is higher than the monthly wages of 4500 p.m. (12.66%) and 6000 p.m. (25.32%) in terms of percentage (62.03%). This illustration represents the distribution of population and various income categories. Low income or poverty may indirectly contribute to the cause and explanation, as well as a lack of access to healthcare, an inability to buy clean water, and a scarcity of hygiene products [7].

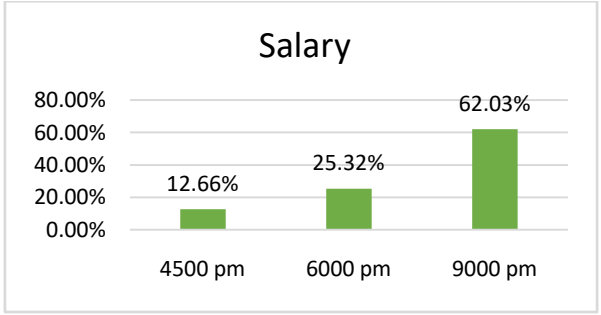

Fig. 02 salary categories

Monthly Expenses

The graph is plotted from Fig. 03 against the percentage of people and their monthly expenditures. This graph reveals that a greater percentage of people's monthly expenditures is allocated to both food and electricity bills (61.84%) than to either alone (14.47% for electricity bills and 23.68% for groceries) [8]. The percentage of people's monthly expenditures is shown in the figure below. Although it is related to income, it places a greater emphasis on how funds are used for necessities such as food, water, health, and hygiene. A lack of investment in hygiene education, low expenditure on hygiene supplies, and an inability to purchase safe drinking water may be the cause and rationale.

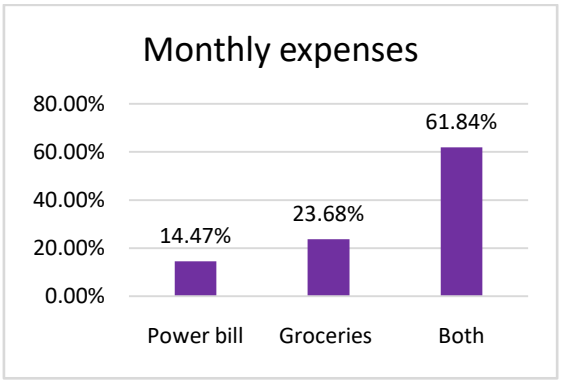

Fig. 03 area of living

Family Troubles

The percentage of people with various family issues is shown by the graph in Fig. 04. The majority of the people in this graph have their background status, and their family problems are contributing to unemployment and undesirable behaviors. The percentage is high (61.04%) when compared to those with bad habits (14.29%) and those who are unemployed (24.68%). The percentage of people experiencing familial problems is shown in the figure below. But a family's vulnerability is largely determined by its social and economic circumstances. Unemployment may limit the family's capacity to spend on safe food, water, and medical care. [9] Additionally, it may result in a neglect of fundamental cleanliness and caregiving obligations.

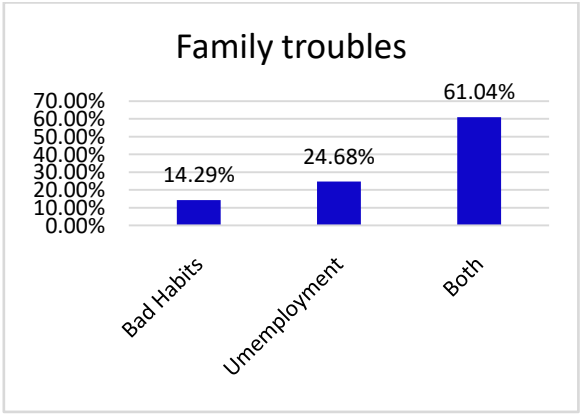

Fig. 04 family troubles

Treatment Centers

The percentage of individuals and treatment facilities is shown in the graph of Fig. 05. The majority of respondents chose not to seek treatment at any one-use hospitals, with a greater proportion favoring government hospitals (18.37%), PHC (14.29%), or government facilities (67.35%) for their medical care, as seen in this chart. This illustration displays the percentage of treatment centers for people. It could be that government hospitals offer free outpatient care, and primary health centers could offer considerably cheaper or free therapy, laboratory testing, and prescription costs [10-11].

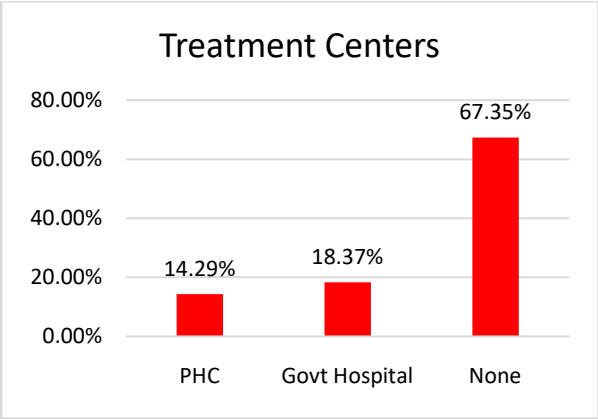

Fig. 05 Treatment Centers

Table 01 ANOVA single factors

Anova: Single Factor						
SUMMARY						
Groups	*Count*	*Sum*	*Average*	*Variance*		
Food Habits	30	75	2.5	0.5344883		
Salary	30	79	2.6333333	0.3781611		
Monthly expenses are high due to	30	76	2.5333333	0.5333333		
Family troubles, if any	30	77	2.5666667	0.5298885		
Treatment Centers	30	49	1.6333333	0.4471276		
ANOVA						
Source of Variation	*SS*	*df*	*MS*	*F*	*P-value*	*F crit*
Between Groups	20.82667	4	5.206667	10.74431	1.18E-07	2.434065
Within Groups	70.2	1	0.48			
	6667	45	4598			
Total	91.09333	149				

The ANOVA table includes a standard F test for the single component sway. The verifiable method of evaluating variation, more often referred to as ANOVA, analyzes the plan for at least two groups of values. The potential outcomes of receiving an F score of 2.434065 or more are 1.18E-07 at the precise moment the p-regard is valid.

Conclusion

The need for rural groups to understand, fix, and rearrange resources in accordance with their demands was made evident by the uninterrupted focus. The way ahead initiatives are organized as necessary. The water sources are impacted by a variety of things that can be categorized into five broad groups known as water source determinants, etc. These combine drinking water sources, household water sources, wellsprings of water for cooking, wellsprings of water for channel, and wellsprings of water for further explanation. The larger economic causes are implied by these. In spite of a few mediations, the ongoing survey makes it plain that individuals residing in wonderfully genealogical rural areas close to Visakhapatnam region, AP, INDIA, still have a very low standard of living.

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Inform consent and Ethical Considerations

Not Applicable

Conflict of Interest

Not Applicable

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