

IMPACT OF COVID-19 PANDEMIC ON ENVIRONMENT, SOCIAL, AND ECONOMIC ISSUES

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Abstract

The main objective of our research is to understand the effect of COVID-19 and to demonstrate the positive and negative impact of India on the climate and socio-economic issues. On 11 March 2020, WHO described the COVID-19 banquet as an outbreak, with a growing number of cases involving Italy, South Korea and Japan. The number of cases outside India soon surpassed the number of cases inside India later in that month. The 2019 Novel Coronavirus, or COVID-19, is a modern respiratory virus that triggers respiratory disease outbreaks across the globe. Thousands of people have contracted the disease and the transmission of the infection is closely controlled by public health authorities. Coronavirus (COVID-19) is a new strain of coronavirus that has not been recognised previously in humans, although coronaviruses are common. Respiratory symptoms of fever and coughing are the main characteristics of COVID-19. In a very short period of time, the worldwide spread of diseases has led to a major reduction in manufacturing practises, road transport and tourism. At this time of crisis, restricted human contact with nature tends to be a blessing to nature and the world. This paper helps improve the quality of air and the atmosphere before and after this epidemiological condition during the shutdown. An attempt has been made to imagine changes in the quality of air and water using instruments. Real-time on-site monitoring results at different locations in India and the Air Quality Index (AQI) as determined by the Central Pollution of India Board of Governance.

Key Words: COVID-19, strain, pandemic, lockdown, AQI, CPCB

1. Introduction

The word Corona comes from the word "crown or garland" in Latin. In 1968, an informal group of virologists first used the term Corona virus to designate the viruses of the new family. As the name covid-19 CO-corona, VI-virus, and D-disease and 19 reflects the year it occurred, COVID -19 stands for coronavirus disease 2019. COVID-19 is actually a large family of viruses that was detected in China's Wuhan City in 2019 and declared a pandemic in December 2019. The first reported case of covid-19 in India was found in the Kerala coronavirus. There has been a decrease in noise, air and water pollution, effect on transport, business, educational institutions, resinous areas, many regions and a whole. A new idea or subject is not the connexion between man and disease. This virus is highly infectious and can easily and regularly be transmitted by droplets and close contact with the infected person. An infected individual exposed to cough can spread from human to human by sneezing respiratory droplets. These aerosol droplets are able to penetrate the human body through the nose and mouth during inhalation. It is a respiratory disorder and lung tissue is weakened. Pandemics are anti-urban, preying on our ability to interact with humans (Kimmelman (2020)). The coronavirus pandemic has prompted urbanists to attack and spread viruses around cities, but the fact is that cities and urban areas have long been devastated by infectious diseases. Companies have moved from office parks to compact urban centres, and high-earning young adults trained in college have embraced city life with shared facilities. The per capita income in the city centre is now the highest in the average American city (Popov (2020)). Charles Kenny has been thinking a lot about the correlation between cities and disease. Kenny is the author of many books, including *The War on Death* and *The Upside of Down: Why the Rise of the Rest is Good for the West* (Kenny (2014)), a senior fellow at the Center for Global Development and a former World Bank economist. On 30 January 2020, the WHO declared that the Chinese epidemic of COVID-19 was an international public health emergency that posed a high risk to fragile health care systems (Kambalagere, 2020).

2. Effects of COVID-19 on environment

The direct or indirect effect on the ecosystem of the corona virus has been analysed. And the environment scientist has never seen a reduction in pollution and green house gas emissions since World War II. This was due to the government 's social distancing policies being implemented.

a. Air Quality

Covid-19 's impact will minimise both climate change and air pollution. COVID-19 is at higher risk, but it is not yet clear which forms of air pollution are common threats to both COVID-19 and climate change. Many studies have resulted in a 25 percent reduction in carbon emissions in India. In India, due to the reduction in air traffic, oil refining, and coal use, the first lockdown emitted less carbon dioxide than in the same period in 2019. Many experts on Earth have assessed that this reduction in emissions might have saved at least 77,000 lives.

b. Water Quality

We have observed throughout India that the water quality in the Ganga has improved during the national Covid-19 lockdown by collecting samples from a research facility to report a nearly 30 percent reduction in pollution levels. A analysis of Ganga river water samples collected from several places before and after the lockdown was implemented, and the findings of those collected in the middle of the lockdown showed that pollution had decreased by 25 % to 30%. To ensure reliable results, and to collect five samples from different locations in each location. DO concentration results increased by 20 percent to 30 percent when checked, and BOD concentration decreased by 35 percent to 40 percent. The Ganga pollution load has decreased by 25 % to 30 percent in total. Data from the CPCB (Central Pollution Control Board) and the UPPCB (Uttar Pradesh Pollution Control Board) indicate that more dissolved oxygen and less nitrates are borne by the water of the Ganga along its most polluted stretch in Uttar Pradesh. Such conditions are conducive to aquatic life's survival. Correspondingly, the biochemical demand for oxygen (BOD) has decreased along with the concentration of total coliform, which is a testament to improved water quality. Similar positive developments have been identified for the Yamuna. Typically enormous amount of dust admixing to nearby river with drainage debouches and modifying the usual parameters of water quality such as total dissolved solid, temperature, pH, turbidity, dissolved oxygen etc. (Pal and Mandal 2019).

c. Noise Quality

At the time of lockdown, noise pollution defined as any distracting or unwanted sound created by industrial or commercial activities crackers and certain equipment, engine vehicle and melodies at high volume was silent. The primary source of irritation for the public and the community is ambient noise contamination. It is the

third WHO-declared hazardous waste after air and water. The WHO estimates that India's population is subject to a high noise level of about 40 percent. People in Delhi have woken up to the chirping of birds during the full lockdown. During those months, noise pollution decreased dramatically.

d. Decrease in demand of natural resources

The effect of Covid-19 on energy and natural resources in India has been serious and unprecedented. But the demand for natural resources declines during the time of lockdown due to the absence of resource use. Nature and its natural resources are over-exploited by human beings for whom frequent international and national meetings are held on our planet, although the predicted field-level results are not always satisfactory. In order to save the climate, the world has experienced many such intra- and inter-national meetings without any significant results.

3. Impact of COVID-19 on the economy of India

Beyond imagination, India and the Indian economy, which has been full-fledged every year for the past 40 years, have been redesigned by the Covid-19 pandemic, faltering even before the lockout, this year it will shrink by 4.5%. Hundreds of millions of people who have been raised by decades of development out of life-threatening poverty are now at risk in more than one way.

4. Effects on Migrant People

Millions of migrant workers were unable to get adequate government welfare or food payments, many died, and many more were burned by the meagre savings they had built up over years of work. During covid-19, individuals lost their urban jobs / jobs and returned to their rural homes. The lockdown had an instant and overwhelming effect due to the covid-19 pandemic. Migrant workers were not so excited about those who worked on daily wages paid for their evening meals. The employers and employees were thrown out into the streets when factories and construction sites closed down owners and bosses who also provide food and board to their temporary employees. And since welfare is administered in India at the level of the state, migrant workers are ineligible anywhere other than in their home state for benefits such as food rations. People had no food or resources to live, and millions of people had no choice when train and bus transport were stopped, so they immediately began to set off on foot, rickshaw, cycle, and arranged a source for their villages, hundreds of miles away. Many people died from sickness, others

died from "deaths of misery," including those due to malnutrition, road accidents, and lack of medical facilities. Due to contact with the infected person exposed to cough and cold, the transmission of corona virus happens. During inhalation through the nose and mouth, these aerosols enter the other human body (Phan et. al. 2020; Riou and Althaus 2020). Mild and typical signs and symptoms of acute respiratory disease such as fever, coronavirus-like cough (Baker et. al. 2020).

5. Effects of COVID-19 on urbanisation

Among people and society, the post COVID period was very susceptible. These individuals live in a congested area or in a shared family; the risk of infection has risen too much. Much of why this is a longstanding global problem is explained by these dynamics. Yet infectious diseases have always been part of the dark side of urbanisation. Epidemics were caused by urbanisation and the rise of slums and environmental issues. In such proximity, humans did not evolve to live. Near physical contact spreads germs, which is why it was so contagious in mediaeval and early-modern cities. The "confirmation bias" is created by global events such as the current crisis: we are likely to see an affirmation of our worldview in the coronavirus fiasco. Smart cities will help us fight the pandemic of the coronavirus.

6. Conclusion

Every corner of human life in a contemporary city, every landscape and wilderness, no matter how remote, has been touched by the modern pandemic and it reinforces this isolation. There are two kinds of people who, every hour, wash their hands and disregard social distances. Often the truth lies somewhere in the centre. One of the most relevant and significant threats is the environmental and climate change of the 21st century. More than 4.3 million confirmed cases and more than 2,900 deaths worldwide have resulted from the Covid-19 pandemic. Fears of a looming economy and recession have also triggered, social distancing, self-isolation, and restriction of travel have contributed to a decline in the population in all sectors of the economy and resulted in the loss of many jobs. They've closed schools. The operation of factories, corporations and markets has ceased. There was a decline in the need for raw materials and manufactured goods. Urban areas are in the grip of the crisis of Covid-19. There is a significant influence of Covid-19 on the urban poor. Those where the mortality rate seems to be higher than the law. Covid-19 and the climate change crisis are significant opportunities for cities to reconsider the "Global Future". Medical and food supplies have increased significantly in COVID-19. On one element of the global economy, we summarise the social economy initiative of COVID-19.

7. References

1. Allam, Z. and Jones, D. S. (2020). On the coronavirus (covid-19) outbreak and the smart city network: universal data sharing standards coupled with artificial intelligence (ai) to benefit urban health monitoring and management. In *Healthcare*, volume 8, page 46. Multidisciplinary Digital Publishing Institute.
2. Backer J.A., Klinkenberg., Wallinga J., (2020) Incubation period of 2019 novel corona virus, infection among traveller from Wuhan China. *Euro Surveill* 25 (5).
3. CPCB . Central Pollution Control Board; New Delhi, India: 2014. National Air Quality Index Report.
4. Chandra, S., Kassens-Noor, E., Kuljanin, G., and Vertalka, J. (2013) A geographic analysis of population density thresholds in the influenza pandemic of 1918–19. *International journal of health geographics*, 12(1)
5. Chandler, S. (2020). How smart cities are protecting against coronavirus but threatening privacy. *Forbes*.
6. Combs, V. (2020). How smart city tech is being used to control the coronavirus outbreak. *Tech Republic*.
7. Impact of lockdown on air quality, CPCB, M/o Environment, Forest and Climate Change, Govt. of India
8. Kambalagere Y. (2020) A study on Air Quality Index (AQI) of Bengaluru, Karnataka during lockdown period to combat coronavirus disease (Covid-19): air quality turns ‘Better’ from ‘Hazardous’
9. Kimmelman, M. (2020). Can city life survive coronavirus? *The New York Times*
10. Kenny, C. (2014). *The Upside of Down: Why the Rise of the Rest is Good for the West*. Basic Books (AZ)
11. Pal S., Mandal I.,(2017) Impacts of stone mining and crushing on stream characters and vegetation health of Dwarka river basin of Jharkhand and West Bengal, Eastern India *Journal of Environmental Geography*, 10 (1–2) (2017), pp. 11-21,
12. Phan Lt., Nguyen T.V., Le H.Q.,et.al. (2020) Importation and human to human transmissin of a novel coronavirus in Vietnam *N. Engl.J.Med.* 382 (9) 872-874)

13. Popov, I. (2020). Seven ways coronavirus will reshape the housing market. Daily Independent
14. Riou J. Althaus C.L. (2020) Pattern of early human to human transmission of Wuhan 2019 novel corona virus. Eurosurveillance 25(4).
15. World Health Organization (2020) Clinical management of severe acute respiratory infection when novel corona virus infection is suspected.