Experiencing New Normal – Upshots of COVID-19

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ABSTRACT: With a global extent, the COVID-19 coronavirus and the resulting measures to contain the contagion imposed immediate changes in the routine experiences of people and societies. As its upshots have disrupted every aspect of human activity, society is moving towards a "new-normal", with different set of attitudes, habits, behaviours and sentiments. The new normal is an awareness of the calculated risks and dangers on getting infected. The study highlights the experiencing new normal in forms of sociability and fulfilment of day to day needs and demands with the help of technological devices. People are experiencing massive behaviour change that have never seen before, sparked by fear, proselytized by social media, restricted and encouraged by government. To rebuild the new normal as a better normal, people are to reinvent and reform their all age old habituated practices and adjustments, so that they can make a healthiest and safest world.

KEY WORDS – Covid-19, experience, upshots, technology, new normal

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1. INTRODUCTION

Humankind is going through the changed and unprecedented human experiences with the rapidly spreading Covid-19 outbreak. Such change includes frequent sanitizing, work from home and like imposing quarantines, enacting new laws to manage the pandemic, using modern technology for e-learning and telework, ensuring a minimum standard of living for all. The outbreak radically has changed the modern world, leading to the emergence of a new human being, whose daily behaviour and thinking differ from what it was before the Covid-19 outbreak. The social and economic systems are to adapt to this new human being. Added to the fear of contracting the virus in this COVID-19 pandemic are the significant changes to people’s daily lives with restricted movements in support of efforts to contain and slow down the spread of the virus. Faced with new realities of working from home, home-schooling of children, and lack of physical contact with outside family members, friends and colleagues, state governments enacted sweeping ‘Stay-at-Home’ orders to curb the spread of the disease, the underlying fear and tensions in the social structure along with the human survival instincts set up the ‘New-Normal’. The new normal is an awareness of the calculated risks and dangers on getting infected with newly emerged experiences of social and behavioural norms that all the countries need to adjust. Therefore, this pandemic era is also called as new normal era.

Within a short span of time, COVID-19 has profoundly changed human lives, challenging even the well-equipped healthcare systems and disrupting lives on a scale, causing tremendous human sufferings and challenging the most basic foundations of societal well-being that no one has imagined. The current crisis is not only the pandemic alone. Rather, it has of the far-reaching consequences on human experiences. Addressing these repercussions the current situation should not be limited to taking of ad-hoc costly measures but should prompt to think about putting into place innovative measures and actions that go beyond the pandemic. In light of the impact of COVID-19 on the individual and collective indoor stay behaviours of society and State, humankind lives in a world that is very different from the one before the virus.

The COVID-19 outbreak is not the first pandemic to trigger the effects, but it is more consequential and significant than previous ones because it enforced quarantine in nearly half of the World within short span of time. Secretary-General of the United Nations, António Guterres, described the COVID-19 pandemic as “a global health crisis unlike any in the 75-year history of the United Nations - one that is spreading human suffering, infecting the global economy and upending people’s lives” [1]. COVID-19 has changed the whole world. Whether through fear for health, or a sense of responsibility towards society, or compliance with
regulation, how people interact with other people has changed. Personal relationships among families and friends have been reshaped during the COVID-19 outbreak. The lockdown has forced family members to live closer together, whereas others, such as friends and extended family members, have been further apart from each other. However, due to self isolation precautions, people have suffered from isolation from friends and the community. The lockdown has made the people to realise the importance of actually appreciating the things and people that they had taken for granted, but what it has taught them, is the spirit of togetherness and providing a helping to others and helping where one can as much as possible. It has shown how much greatness can come from working together and what it can do for a nation and community just by giving hands of helping where it is needed and wanted.

COVID-19 is a new coronavirus disease that has caused great impacts to the people’s daily life extraordinarily. It has led the entire world to its knees. Meanwhile, humankind across the world is struggling to discontinue the chain reaction of COVID-19, and also to optimize its growing burden, it is imperative to keep balance in public lifestyle and day to day new experiences. The course of the COVID-19 pandemic in India is different in terms of mortality and spread of infection as compared to some other countries of the world at the present time. Now it’s important to explore the ways, how people have found to cope with the pandemic experiences spending time in self isolation and threat, anxiety of getting infected. It is the need to find how people are adjusting their routine and habits in this new normal, while staying indoors due to the impact of coronavirus imposed series of lockdowns.

II. COVID-19

COVID-19 is the highly contagious infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), emerging as the most consequential global health crisis since the era of the influenza pandemic of 1918. SARS-CoV-2 rapidly disseminated across the world in a short span of time, compelling the World Health Organization (WHO) to declare it as a global pandemic on March 11, 2020 - within a period of three months of its emergence, by then about 114 countries were affected across the world [2], identifying the first cases of this predominantly respiratory viral illness were reported in Wuhan, Hubei Province, China, in 31st December 2019 [3]. On 30th January 2020, WHO declared an outbreak [4], a Public Health Emergency of International Concern (PHEIC) and On 11th February, 2020, WHO officially named this outbreak of the disease associated with the coronavirus as COVID-19 [5], where CO-Corona, VI-Virus D-Disease, and 19-2019 is the year it primarily occurred. Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) is the root cause behind COVID-19 disease.

The virus can spread from an infected person’s mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe. These particles range from larger respiratory droplets to smaller aerosols. Current evidence suggests that the virus spreads mainly between people who are in close contact with each other, typically within 1 metre (short-range). A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose, or mouth. The virus can also spread in poorly ventilated and/or crowded indoor settings, where people tend to spend longer periods of time. This is because aerosols remain suspended in the air or travel farther than 1 metre (long-range). People may also become infected by touching surfaces that have been contaminated by the virus when touching their eyes, nose or mouth without cleaning their hands [6]. Even though substantial progress in clinical research has led to a better understanding of SARS-CoV-2 and the management of COVID-19, limiting the continuing spread of this virus has become an issue of increasing concern, as SARS-CoV-2 still continues to wreak havoc across the world, with so many countries enduring a second or third wave of outbreaks of this viral illness attributed mainly due to the emergence of mutant variants of the virus.

In India, the first confirmed positive case was reported on 30th January in a student from Thrissur district of Kerala who had returned home for a vacation from Wuhan University in China [7].

III. PRECAUTIONARY MEASURES TAKEN

In response to the crisis, authorities across the world have implemented long span lockdowns, i.e., closing borders, restricting international travel, and placing severe limitations on individual movements and group gatherings. The lockdown restricted the masses from stepping out of their homes. All transport services - road, air and rail - are suspended, with exceptions for transportation of essential goods, fire, police and emergency services. Educational institutions, industrial establishments and hospitality services are also suspended. Services such as food shops, banks and ATMs, petrol pumps, other essentials and their manufacturing have been exempted. Actually, the lockdown restriction includes school closures, workplace closures, cancellation of public events, restrictions on mass gatherings, public transport closures, stay-at-home orders, restrictions on internal movements and restrictions on international travel. Several vaccines have been developed and widely distributed since December, 2020.

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Another fundamental and widely accepted approach to living with the virus is physical distancing, through advising people to keep a distance of 1-2 metres from people. It is accomplished that the physical separation curtails the spread of the virus, yet the practice of physical distancing inherently limits people’s in-person social interactions, which may narrow their sense of social connection. The term “physical distancing” is preferred instead of ‘social distancing’ to emphasize the need for continued social interaction and support, albeit without physical interaction. Early in the implementation of social distancing, WHO announced that the term ‘physical distancing’ better captured the essence of the guidelines, such that people should remain physically distant but not socially distant from others [8]. In this article, physical and social distance is being simultaneously used as carrying same meaning. Recommended preventive measures must include physical distancing, wearing a face mask in public, hand washing, covering one’s mouth when sneezing or coughing, disinfecting surfaces, monitoring and self-isolation for people exposed and symptomatic.

Preventive measures to reduce the chances of infection include getting vaccinated, staying at home, wearing a face mask in public, avoiding crowded places, keeping distance from others, ventilating indoor spaces, managing potential exposure durations, washing hands with soap and water often and for at least twenty seconds, practising good respiratory hygiene, and avoiding touching the eyes, nose, or mouth with unwashed hands [9].

On 25th March 2020, Prime Minister of India announced countrywide lockdown with physical distancing restriction over the majority of commercial activities and mass gathering including educational and public institutions. On 22nd March, Prime Minister Narendra Modi encouraged people to follow 14 h. of Janata curfew in India. On 24th March first phase of 21 days lockdown started in India. Due to the infestation from COVID-19, on 14th April, Indian government declared an extended 2nd phase lockdown till 3rd May which was further lengthened till 17th May and later imposed till 31st May. To make the lockdown and physical distancing effective, India also levied the quarantine law under the Epidemic Disease Act, 1897.

IV. EXPERIENCING NEW NORMAL

The best way to fight the Covid-19 pandemic before a vaccine is reached to the whole populace, is to adopt a normal lifestyle in a new (new normal) way. The underlying fear and tensions in the social structure along with the human survival instincts set up the New-Normal. It is the new social and behavioural norms i.e., ‘physical distancing’, ‘wearing masks’, ‘maintaining hygiene’, etc., and countries have to adjust with such new normal amid the pandemic. Coronavirus has completely changed the lives, people are now caged indoors. People now began to adapt, and a new way of living has emerged. There is a ‘normal’ beyond the habitual actions of human daily lives; life during COVID-19 is the new normal, where people have fulfilled their day to day needs with the help of technological devices.

WHO Director-General Dr. Tedros, in his regular media, cautioned that “we have a long way to go. This virus will be with us for a long time”. He added that “the world cannot go back to the way things were. There must be a ‘new normal’ – a world that is healthier, safer and better prepared” [10].

Now people have started to like their lockdown habits. In India too, people (53 per cent, 56 per cent Millennial, 61 per cent - 35+ year olds) likely to maintain behaviours adopted during the pandemic. Increased hygiene, healthier eating, spending time with the family and personal development are most likely to be maintained [11]. These changes lead to different needs and spending patterns, and with more than half of the world are also feeling financial pressure, brands need to ensure their products on online mode, is considered vital in the new rhythms of life. This is amplified by the increase in willingness to switch. 45 per cent (rising to 50 per cent + of households with kids) of consumers say that they are prepared to keep using products from online stores in lockdown. These are the findings from the fourth wave of Kantar’s COVID-19 Barometer, the leading global study tracking people’s attitudes, behaviours and expectations across more than 50 markets. Kantar has identified three major trends that will remain sticky to shape consumers’ post-pandemic behaviour, i.e., a new wave of e-commerce shoppers, an era of value-consciousness and a move toward local consumption [12].

During the pandemic crisis, people have able to know how to keep physical distance with a mask and work from home. Society is experiencing that digital technology is rapidly changing every aspect of life. Technology is increasingly playing a predominant role in life. Everything from Google docs, Hangouts, Zoom, and Skype for communication, as well as cloud-based process management tools make life significantly easier. Volatility, uncertainty, complexity and ambiguity of COVID-19 lie at hidden opportunities for learning, reinvention and evolution - at the individual, organisational and societal levels. The responses to COVID-19 are accelerating the move from the physical to the virtual - work from home with virtual work, business travel with Zoom meetings, global supply chains with more flexible approaches, possible growth in e-learning, and classes to providing online content and self-exercises, lastly overall the technology dependence in every sphere of day to day activities. This pandemic has seen a huge boost to existing trends towards greater online work, business, commerce, health, education, culture, entertainment and leisure. Now there is increasing insecurity regarding the

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relationship between people and advanced technology, where society need to learn to cope with the consequences of omnipresent machines and networks of a completely new kind. Human beings, in spite of being a social creature, had to embrace and adapt to this new normal of reduced social interaction with their fellow mates. People live increasingly in a human-machine world. Anyone who doesn’t understand this, and who is not adapting to the new normal - whether they like that environment or not - is already being left behind. Adapting to the new, fast-changing, technologically enhanced context is one of the major challenges of recent times.

V. OBJECTIVES

The focus of the present study is to explore lifestyle and newly emerged experiences in times of prescribed behaviour with restricted social intercourses due to COVID-19 in India. It provides insights into the effect of home confinement on individuals’ daily habits such as hygiene awareness, social media use, work from home, shopping behaviour, online education and few more selected experiences. It was also intended to assess the adjustment made by people about the crisis and how they are maintaining their daily routine through technology dependence in this new normal era.

VI. METHODOLOGY

Data and information presented in this study are collected from various reports prepared by national and international agencies including papers in scientific and professional journals, published first person accounts, media articles, and publications by governments, charities and professional associations on COVID-19 pandemic. Information is collected from various authentic websites. Some journals and e-contents relating to impact of COVID-19 on day to day human experiences are referred.

VII. UPSHOTS OF COVID-19

The upshots of the novel coronavirus outbreak depend not only on the nature of the virus but also in the manner in which society reacts to disruptions caused by it. The COVID-19 pandemic is not only just a medical phenomenon; it affects the individuals and society on many levels, causing series of disorders. Focus has mostly been on testing, treatment and prevention of COVID-19 but society is going through various social problems as well as in adjusting to the current lifestyles and fear of the disease across nations. The current COVID-19 outbreak is spurring fear and panic on a societal level. On an individual level, it differentially exacerbates anxiety, tension and psychosis-like symptoms as well as lead to non-specific mental issues (as for example, mood problems, sleep issues, phobia-like behaviours, panic-like symptoms). The absence of a definitive treatment for coronavirus exacerbates anxiety. While quarantine is a necessary preventive measure to curb the spread of infectious disease, individuals who are kept in isolation and quarantine, experience significant distress in the form of anxiety, anger, fear, frustration, confusion and post-traumatic stress symptoms [13]. The risk is associated with COVID-19 pandemic has both extensive and intensive in character. The risk is extensive in the sense that the coronavirus and its social and economic impacts have spread out in expansive territorial waves from the initial outbreak in Wuhan, China, to affect most of the countries and territories in the world. The risk is manifested intensively, affecting whole part, i.e., economic, social, cultural and so many of the population and severely stressing or collapsing public health systems.

New normal is certainly a stressful event, with impacts already visible in the daily lives of individuals and institutions, imposing the need to reorganize the social life, the educational system and routines, work environments and work routines, and hygiene activities, changes in the spheres of behaviour of the person, in social, material, and symbolic terms. New goals, orientations, (im) possibilities of action, losses, and gains are to set. These relocations/replacements mobilize new social, cognitive, and specialized forms of knowledge and skills (e.g., learning of new tasks, developing with new everyday activities). Also, in these reallocations and encounters with other people and learning, the person is led to engage in new processes of meaning, continuously building meanings and attributing meaning to the phenomena around them, to the events they experience. In such an exceptional situation due to COVID-19 outbreak, people are living in; it is the need to understand and explore the different dimensions of new normal experiences faced by them.

7.1 Hygiene Awareness

Throughout the pandemic era, people have all fought the war against COVID-19 on the strength of good hygiene practices. Now personal hygiene is no longer a choice, but a necessity to stop coronavirus spread. It is essential for safety of self and for the well-being of the masses around. There are some major personal hygiene lessons that emerged in 2020, have formed the bedrock of health and wellness, and are living in the years ahead.

In this pandemic era, people have started taking personal hygiene more seriously, people are now aware of how important it is to keep own self clean. The new normal have made the masses aware of being hygienic is no longer just a good habit, but the very skill, people need for survival. Now people are going to remember to cover
their mouths when they cough, to sanitize their hands after touching anything else because they know what can happen if they don’t. People are advised to have hand sanitizer with them when they go out and cough or sneeze into their elbow, always wash their own hands before leave home and as soon as return home. Hand washing remains one of the best ways to prevent the spread of Coronavirus (COVID-19). It has received considerable attention during the COVID-19 pandemic. Health and hygiene have started massive campaigns to spread awareness on cleanliness. There has been a proliferation of public health messages through various media sites about the importance of hand washing, and the correct techniques for hand washing. Short videos, mainstream television, radio, print ads and billboards are all in use and with the same message that effective hand washing is crucial to stopping the spread of COVID-19. Also the importance of hand washing is now frequently seen on daily news reports, as the initiatives are taken on by service users, politicians, public figures and many others. It is recommended to wash own hands often frequently with soap and water for at least 20 seconds. If soap and water are not readily available, people can use an alcohol-based hand sanitizer that contains at least 60% alcohol [14]. The practice of washing hands, sanitizing things before use started as a compulsion, is now becoming a habit. From shaking hands to ‘namaste’, people have had a lifestyle change for the good. Although handshakes and hugs might not be appropriate behaviour with this new normal, it is found the other ways to acknowledge the peers and show care and respect towards them. Bowing, nodding the heads, or waving hands seem to be suitable alternatives.

It has become a routine work of households to sanitize regularly the high-touch surfaces especially front doors, tables, chairs, kitchen, bathroom surfaces, mobile phones, etc. to lower the risk of infection. It is so uncertain how long the COVID-19 virus can survive on fabric, but many items of goods have plastic and metal elements on which it might live for a few hours to several days. People sincerely to maintain such good practices to consider include removing their shoes when they enter home and changing into clean clothes when they return home after being in crowded places. Habits like regular change of daily wears, washing them in good quality detergents and using soap as well as disinfectants while taking bath are the norm nowadays. The greater risk also comes from being in close contact with other people through outside food shopping or receiving a food delivery. They are now cautious in handling of buying items, either using it through properly sanitized or keeping it aside for few days. People prefer to get seats sanitised before occupying them and they have all learned to become extra cautious about the hygiene and sanitation of their surroundings. There is also the increasing emphasis on regular cleaning and disinfecting the public spaces. Public spitting is now a criminal offence liable to fine.

7.2 Use of face mask

Reducing this virus spread requires two things: limiting contacts of infected individuals via physical distancing and reducing transmission of infected respiratory particle through wearing of face mask. A primary route of transmission of COVID-19 virus is via respiratory particles, and it is known to be transmissible from presymptomatic, paucisymptomatic, and asymptomatic individuals. Here the use of mask is part of a comprehensive package of prevention and control measure that can limit the spread of this respiratory viral disease, i.e., COVID-19. Mask usage is filtering the virus from an infected wearer, or protecting the wearer from infectious people around them, or both. By the end of June 2020, nearly 90% of the global population lived in regions that had nearly universal mask use, or had laws requiring mask use in some public locations [15]. However, mask usage in the community had fallen out of favour, until the impact of COVID-19 was felt throughout the world, when the discarded practice was rapidly readopted. Community mask use has been recommended by nearly all major public health bodies. This is a radical change from the early days of the pandemic, when masks were infrequently recommended or mandatory used. As governments exit lockdowns, with widespread testing, contact tracing, quarantining of anyone that may be infected, hand washing, and physical distancing, face masks are a valuable tool to reduce community transmission especially when other physical distancing measure is difficult to maintain.

WHO advised to make wearing a mask a normal part of being around other people. The appropriate use, storage and cleaning or disposals of masks are essential to make them as effective as possible. WHO advised the basics of how to wear a mask [16]: ‘clean your hands before you put your mask on, as well as before and after you take it off, and after you touch it at any time; make sure it covers both your nose, mouth and chin; when you take off a mask, store it in a clean plastic bag, and every day either wash it if it’s a fabric mask, or dispose of a medical mask in a trash bin, don’t use masks with valves’.

WHO in its updated advice dated 5th June, 2020 recommends that the general public should wear non-medical fabric masks where there is known or suspected widespread transmission and where physical distancing is not possible, and that vulnerable people (60 and over, or with underlying health risks) and people with any symptoms suggestive of COVID-19 as well as caregivers and healthcare workers should wear medical masks (defined as surgical or procedure masks). The WHO also advises that non-medical fabric masks should comprise a minimum of three layers, suggesting an inner layer made of absorbent material (such as cotton), a

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middle layer made of non-woven material (such as polypropylene) which may enhance filtration or retain droplets, and an outer layer made of non-absorbent material (such as polyester or its blends) which may limit external contamination from penetration [17].

The usage of masks is seen as a collective responsibility to reduce the transmission of the COVID-19 virus and as an act of solidarity to each other. The need for mask-wearing is still often seen from an individual perspective where masks only serve to protect oneself and his/her fellows. It has been called a pro-social behaviour where one protects others within their community. It is gradually shifting to become a new social norm. On different social media, there has been an effort with administrative and also others’ campaign to encourage people to use masks. As the pandemic progressed people have began making use of face masks as accessories, matching them to their outfits and so on. Designers also have started making of masks that matched other pieces of clothing and accessories, a trend which may have begun unintentionally as even fabric remnants were repurposed [18].

7.3 Restricted mobility

Restricting movements means staying at home as much as possible to avoid contact with other people. People must avoid social interactions and contact with other people, stay at home or in own accommodation as much as possible. It has included limiting public gatherings, closing schools and public services. Due to this global outbreak, governments across the countries have been forced to take swift and protective measures in various forms of restricted movement such as lockdown, stay at home advice, quarantine etc. as a means of limiting people’s exposure to the virus. Large scale movement restrictions often referred to as ‘lockdown’, can slow COVID-19 transmission by limiting contact between people. Citing concerns with the alarming levels of spread and severity of the virus, public health experts’ urgent recommendations to limit outside movement and restrictions on social gatherings (group sports and walking or exercise classes), availability (sports and gym facilities) and accessibility (public recreational spaces such as community centres, parks and sports grounds) is linked to decrease in active participation in exercise and normal leisure related activities such as walking, shopping, formal and informal gatherings etc. Globally, policy responses have also been restricted to people’s movements and mobility, including surveillance and monitoring, border closures, visa restrictions, domestic travel restrictions, additional health requirements upon arrival at ports of entry, and curfews. With some exceptions, countries have declared partial or full lockdowns at the national or state levels. Approaches of restricted movements are also associated with physical distancing by keeping a distance of 2 metres from other people; quarantine by separating people and limiting movement of people who have or may have been exposed to the disease to see if they become ill; and isolation by separating people who are ill, from others who are not ill, to keep the disease from spreading.

This restricted mobility is also related to the violation of human rights in terms of freedom of movement. Simultaneously, Governments are responsible for the protection and promotion of rights, relating to the right to health.

7.4 Going digital

The increase in loneliness during the COVID-19 pandemic has been attributed to increased physical isolation because of lockdowns, absence of face to face contact, self-isolation, and quarantine measures aimed at reducing the spread of coronavirus. Therefore, the COVID-19 pandemic era is also being labelled as the new normal of loneliness. The current COVID-19 crisis has profoundly affected physical cum social connections, and digital technology is playing an important role by providing virtual opportunities not only for businesses and health care delivery but also for social connection and networking in this new normal. For tackling social isolation and loneliness during the COVID-19 pandemic, the WHO has recommended maintaining social networks and staying connected with family, friends, colleagues, and community members via digital means [19]. Digital technology is already a main feature of health systems and social care delivery [20]. By end of April 2020, 70% of countries globally were faced with some level of stay-at-home requirements, a majority of which were strict lockdowns. During this period, internet use grew by as much as 70%, the use of remote desktop by 40% and the use of virtual collaboration tools by more than 600% [21].

Now people are getting together and even celebrating occasions such as birthdays and weddings, via video-conferencing services such as Zoom, Google Meet and Facebook Messenger Rooms. Many other daily activities have shifted to the Internet. In shopping and banking, people especially seniors are adopting new habits, such as ordering groceries online instead of going to the supermarket. Some are even using online banking for the first time. Banks are also helping seniors to make the transaction with phone support and online videos. Telemedicine is also being encouraged. Patients now connect with medical professionals without leaving their homes, thereby ensuring the avoidance of non-essential travel to healthcare facilities. Guidelines for practising telemedicine have been issued [22]. In addition, many recreational and educational activities are now being offered virtually, including fitness classes, seminars, conferences, meditation sessions, arts events, choir
practices, music lessons, fundraisers and more. Popular platforms for these events include the video-chat apps, as well as Instagram Live, Facebook Live and other streaming services.

While people are self-isolating and studying/working remotely, are also rediscovering the need of social ties in this new normal - sometimes with more people than before. It is the high time to make the social bond where people are participating in virtual gigs, drinks and dinner parties, more calls to friends and family, and sharing more personal stories at video call. Physical distancing leads to a different and regular ‘social intimacy’. Social interaction is a fundamental human need. People naturally turn to available existing social platforms to satisfy this most basic of human need.

7.5 Work from Home

Reducing face-to-face contact is an important strategy to mitigate the impact of COVID-19. In this context, Work from Home (WFH) is used to refer uniquely to home-based teleworking as an alternative working arrangement in which a worker fulfills the required responsibilities of his/her job using information and communications technology (ICT), while remaining at home. It is the major change that has become a part this new normal era. But it was never a new concept. Before the pandemic scenario, many IT companies in the West and even in India has been plasticising it with perfection. COVID-19 has taken it to another level with almost all companies asking its employees to WFH. It is associated with the shared responsibility and commitment by both employers and workers to ensure business continuity and employment. Workers have the duty to protect themselves and others and to cooperate with their employers in the implementation of preventive and control measures, with adopting safe work behaviours, complying with instructions, ensuring good hygiene practices, and using safety devices and protective equipments.

The workplace is undergoing transformative changes due to physical distancing. During the initial days of this pandemic outbreak in India, work from home was recommended for employees who could do so. Companies working in the Information Technology are early adopters in this regard. As the virus spread in the country, work from home became a preferred practice for employers, even for those who had not exercised this choice earlier. The lockdowns and quarantine have made this unavoidable. As the Indian economy faces a crisis, organisations must look to rationalise their operations in order to be efficient and survive in the difficult times. Allowing employees to work from home is being expected to be a favoured option in order to cut down on establishment costs, while enhancing productivity at the same time. There is also the change at the workplace in other ways. In a recent order issued by the Ministry of Home Affairs, Government of India, physical distancing has been made mandatory while easing the lockdown. Standard Operating Procedures for social distancing have been laid down for ‘offices, workplace, factories and establishments’. These include staggered shifts, discouragement of gatherings or meetings of 10 or more people, and sitting ‘at least 6 feet away from others on job sites and in gatherings’. Violations attract penal provisions [23].

There are multiple benefits associated with WFH, including the reduction in commuting times; greater autonomy and flexibility in the organization of work; reduced travel associated with WFH leads to a reduction in carbon emissions. However, in such an unexpected and emergency situation as the COVID-19 pandemic, both employers and workers may be unprepared physically, mentally or infrastructure-wise to meet all challenges posed by WFH. While they are also isolated from their co-workers, friends and sometimes even from family due to heavy work pressure, their daily living routines have been disrupted.

7.6 Online learning

UNESCO estimates that over 160 countries have implemented nationwide closures, impacting over 87% of world’s student population [24]. With an increasing number of states, provinces and even whole countries’ closing institutions of learning, over 91% of the world’s students population are not attending schools/colleges [25]. The outbreak impact is far reaching and has affected learning during this academic year or even more in the coming days. Lockdown and physical distancing measures in new normal have led to closures of schools, training institutes and higher education facilities across the countries. Schools, colleges and universities have bound to discontinue the face-to-face teaching due to the virus spread. There is a pressing need to incorporate and implement alternative educational and assessment strategies. Online learning platforms are being used by educational institutes ranging from primary schools to higher education centres such as universities. The COVID-19 outbreak has provided the teachers and learners with an opportunity to pave the way for introducing digital learning. There is a paradigm shift in the way educators to deliver the quality education - through various online platforms. Transitioning from traditional face-to-face learning to online learning is an entirely different experience for the learners and the educators, which they must adapt to with little or no other alternatives available. The education system and the educators have adopted ‘Education in Emergency’ through various online platforms and are compelled to adopt this new system that they are not prepared for. The purpose of such virtual classrooms is not only to transact curriculum but also to ‘exhibit care and build an effective relationship with the students’ [26]. Though educational institutes (including training and
coaching centres) were to remain closed during the lockdown period, they were ‘expected to maintain the academic schedule through online teaching’ [27]. In the primary stage, the educators and the students were quite confused and didn’t understand how to cope up with the situation of this sudden crisis that compelled closure of the educational institutes. But latter on all realized that the pandemic has taught so many lessons to manage with this sudden emergency. The significance of virtual learning is rising as the academic year has been radically disrupted due to pandemic. Here the journey is from the traditional classroom system to the technology-aided competency-based educational system.

Education worldwide has increasingly shifted from physical attendance to virtual attendance through video different conferencing apps such as Google Meet, Google Classroom, Zoom, Skype, YouTube Live, FaceBook Live, Uber Conference, Lark, TrueConf Online, Lifesize Go, Webex, Slack, Cisco, Elias, Moodle, BigBlueButton etc. This virtual classroom platforms like videoconferencing and customizable cloud-based learning management platforms are increasingly being used. Student assessments are also carried out through online, with a lot of trial and error, uncertainty and confusion among the teachers, students and parents. This new normal has forged a strong connection between teachers, students and parents than ever before. The homeschooling requires parents to support the students’ learning academically. The use of online platforms such as Google Classroom, Zoom, virtual learning environment and social media and various group forums like Telegram, Messenger, WhatsApp and WeChat are being explored and have tried for teaching and learning for the first time ever to continue education. Throughout the pandemic era, the presence of the teacher, colleagues, and other professionals involved in the face-to-face learning process is replaced by the image, the voice and the idea of what these subjects are doing, or even by other people such as the parents, which were not formerly part of that network of interactions.

In India, the Ministry of Human Resources Development (MHRD), through its department of school literacy and education is proactive in ensuring access to education through various online platforms and initiatives like e-Pathshala, National Repository of Open Educational Resources (NROER), Digital Infrastructure for Knowledge Sharing (DIKSHA), SWAYAM platforms (including DTH channels), E-textbooks through accessed using e-Pathshala web portal and mobile app. etc. to enable online learning for students. UGC in consultation with the Ministry of Human Resource Development (MHRD) has advised all higher educational institutes in the nonfiction dated 11th April, 2020 to take preventive and precautionary measures for maintaining physical distancing, staying in the confines homes/hostels and utilise the time productively by engaging in on-line learning during the lockdown period for Covid-19. To ensure that there is no break in the course curriculum and students get full-access to classes, like before, MHRD advises students to carry on their studies using the online learning platforms.

7.7 Tele Shopping

Also, there is a significant upshot in new normal on activity-travel behaviour change. It means that people who perceive the COVID-19 as a serious problem, and people with positive protective behaviours such as physical distancing, washing hands with soap or sanitizer, etc., have tended to increase their nonparticipation in out-of-home activities during the pandemic. People with such protective behaviours toward COVID-19 have tended to increase their participation in teleshopping. Technology advancement, improved logistics, and safe payment system, coupled with increasing internet and mobile access and consumer demand for convenience, have boosted the increase in the purchase of household goods through cashless.

The virus spreads primarily through the contact with an infected person (when they cough or sneeze) or when a person touches a surface or a good that has the virus on it, the best way to guard against it is to stay at home. In countries that imposed a shutdown lingering and due to the closure of stationary retail stores in this phase, tele-shopping has become the only means for consumers to satisfy their consumption needs. Consumers are unable and hesitate to purchase goods at stationary retailers due to government restrictions and fears of infection. Such measure has increased online shopping behaviour, across the world. On 25th March, 2020, BigBasket - a key online grocery player in India had put the following message that ‘they will be back soon! They are currently experiencing unprecedented demand. In light of this, they are restricting access to their website to existing customers only. Please try again in a few hours.’ So overwhelming was the response that it faced a breakdown due to a steep increase in demand amid COVID-19. Grofers - a rival of popular online shoppers had a similar kind of message which said ‘Due to the sudden rush, we have stopped servicing many locations, but we are working to increase capacity and will be resuming operations shortly.’ Amazon - one of the leading e-commerce players in the country, and the world, has announced on its site that the customers are relying on them like never before in their social distancing and self-quarantine efforts. Hence Amazon is temporarily prioritizing its available fulfilment and logistics capacity to serve essentials such as household staples, packaged food, health care, hygiene, personal safety and other high priority products [28]. Nowadays retailers have put much effort into building, improving, and promoting their online stores. Retailers have started promotion campaigns and offered discounts through different social media, e.g., by posting products on social
media sites and by offering product pick-up or delivery services. E-commerce has been predominant during the COVID-19 outbreak, and retailers have put much effort into building, improving, and promoting their online stores. Some small and local retailers also manage door to door services when the lockdown developed, their attempt to sell their things through telephone calling from the consumers. In lockdown period, the importance of tele-shopping has thus increased since it has provided the only means for consumers to satisfy their consumption needs.

As the outbreak continues and consumer’s payment behaviour continues to change, covid-19 is already reinforcing existing trends towards increased digitisation of payments. Sectors that are boosting digital payments include grocery stores, online money transfer, OTT (over-the-top), online education, ATM withdrawals and broadband usage. Because, there is the rising number of contactless transactions due to the fear of infection spread. There is the direct impact of people’s perception on viral transmission risk associated with touching banknotes and coins. Notwithstanding these reservations, WHO has recommended that people have to wash their hands after coming in contact with notes and coins [29]. Fear of catching the virus kept the masses from touching many things. The vast majority of transactions conducted online or via mobile banking also do not require contact with potentially contaminated surfaces. Consequently, it is established that changing one’s payment habits may reduce the risk of infection.

7.8 Social media usage

With the advent of the pandemic crisis, people have turned to social media platforms to utilize their time as these platforms offer an opportunity to nullify the effect of stay at home. The online streaming apps like Netflix/Amazon prime video experienced an increase in the number of their users as watching series/movies have become a time pass mechanism for people. Netflix gained an overwhelming 15.8 million subscribers in March, 2020 [30].

In addition the boredom, hearing or reading continuously about the COVID-19 reports from news media, people are being stressful. Due to the lockdown conditions, the work dependency for the majority of masses had shifted to online sources which are well supported by the increase in usage of various applications and software for formal purposes. Amidst all this, people who are away from their families and friends used apps like WhatsApp, Google Duo, Zoom, House party etc. to remain in contact with close person. One of the apps that tripled their market digits in the pandemic was Zoom [31] being popularly used for formal meetings and online classes. The main reasons for its win in the cloud video conferencing are providing of free service to host and join meetings, easy accessibility on all platforms, good bandwidth and easy to use interface. As the schools, institutes and universities are closed, the concept of online learning in education has come into play which explains the increased use of apps like zoom, Google classroom, Skype, Google Duo etc. by the students.

Tracking people’s whereabouts through the location information provided by their mobile phones has possibly been the most accepted used technology by governments which are crucial in identifying infected individuals and the people in proximity to them. The government of India launched ‘Aarogya Setu,’ an open-source Indian COVID-19 ‘Contact tracing, Syndromic mapping and Self-assessment’ digital service [32], a mobile app, which is becoming a key player in the following period.

VIII. CONCLUSION

It’s no secret that the virus has caused societies worldwide to rethink the way people experience throughout the pandemic. During these challenging times, technology has made it possible for people to stay connected and receive healthcare in innovative ways in spite of practising indoor stay behaviour. Cloud-powered platforms, tools and devices are connecting neighbours across the street, families across the country and friends all around the world.

There has been some good news on the COVID-19 therapy front. Clinicians have gotten much better at treating hospitalized COVID-19 patients leading to a drop in the death rate. In addition, there are a number of new drugs that significantly alter the course of the illness. Simultaneously, the bad news is that the continued global outbreak has resulted in the spread of many new strains of the virus. Some are more infectious and some more virulent than previous one. It is a big question to know for sure how effective existing vaccines will be in halting transmission of the virus.

Almost all the countries are being prepared for the lingering uncertainty of the future. Now humankind has made adaptations to social interactions to balance the human need for connection with the adherence to pandemic guidelines. People are adapting to the new reality, which includes the fear of viral spread and contagion, self-quarantine. Adaptations tend to fall physically apart, digitally together. Humankind will need to respond in kind in a more humane way. While disease such as COVID-19 spread easily by human contact, it is important to be mindful that the enemy remains in the virus and not among peers. To rebuild new normal with its favourable outcome, people have to create a plan of action, highlighting the delivery of three priorities: trust, safety, and connection. A new human being is emerging in the new normal era where everyone, as a
community of shared future for mankind, is working with urgent need collectively and quickly as strong emergency responses to win the battle against this common enemy. As people is still in the mode of surviving or sustaining their life, it is a hope that very soon human being will enable to rebuild more resilient societies in the goal of making the healthiest and safest world.

REFERENCES


[27]. Ibid. 23.


