

Community awareness of Dengue and Chikungunya in Bharat Vihar , New Delhi

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Introduction

Background: Mosquito-borne diseases specially Dengue fever and Chikungunya are most prevalent in India and have become a serious health problem. Recurring outbreaks of dengue have been reported in various states and UT's. In 2016 Delhi alone carried a burden of 3.5% of total confirmed cases.

In 2016 a big upsurge had been observed in the cases of Chikungunya. Total 64057 positive cases had been recorded out of which 19% of confirmed cases were from Delhi alone.

Rapid urbanization, environmental changes and neglected (rural and slums) areas results in vector breeding causes rise in dengue and chikungunya outbreaks.

Objective

The main objective of the study is to assess community's knowledge and awareness regarding dengue and chikungunya practices in relation to prevention and control of the diseases.

Significance of the study

Improved Programmes

- Study finding can be used to improve the pre-exist framework of Dengue and Chikungunya Control Programmes.

Effective Campaigns

- Findings of the study can be used to enable more effective BCC campaigns.

Methodology

Study Design: Cross sectional study

Study Area: Bharat Vihar Community, Dwarka, New Delhi

Study Population: Residents of the community, age group between (15-65 years)

Sampling: Non-probability purposive sampling

Sample size: 151 household in the community

Data Collection Tool: Semi-structured questionnaire

Data Collection Technique: Face to face interview

Data Analysis: Descriptive statistics is used to tabulate the observed data.

Analytical statistic (Chi-square Test) is used to compare observed data with expect to obtain according to specific hypothesis.

Participant's Demographic Characteristics

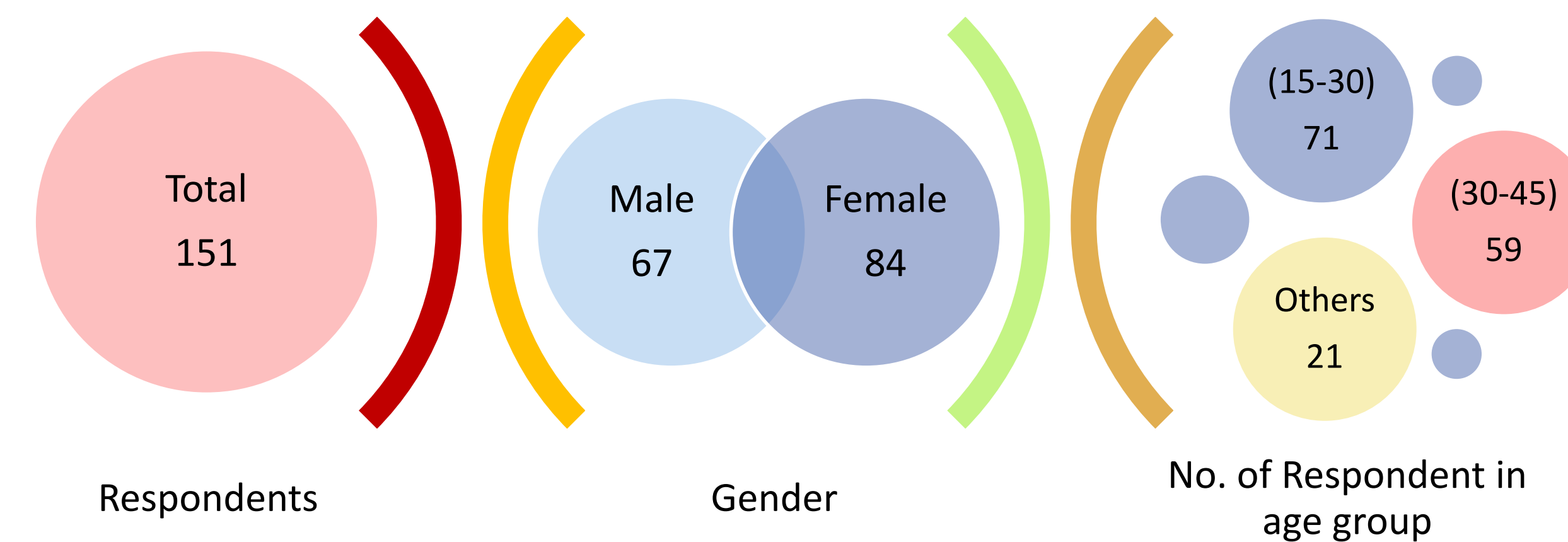
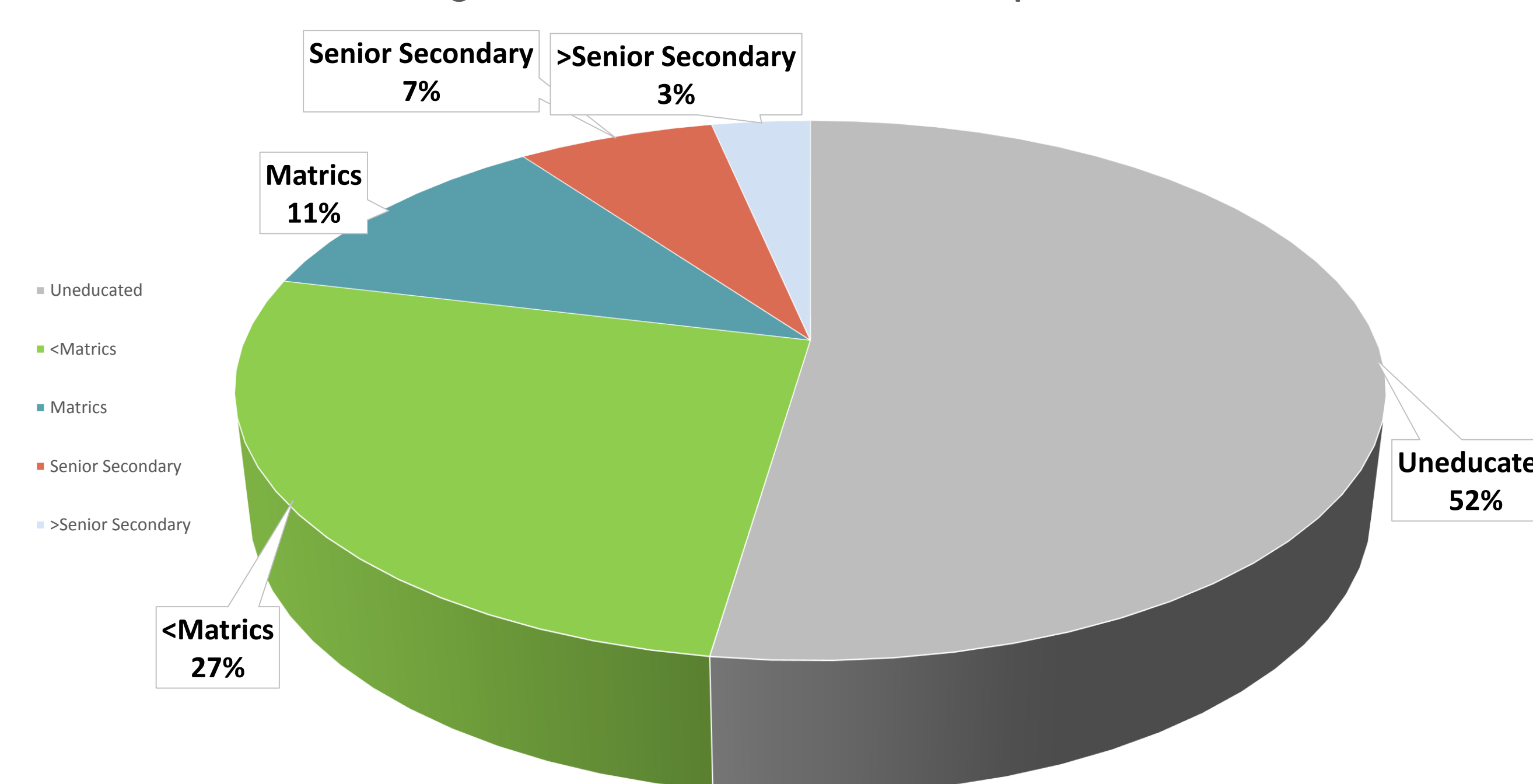


Fig 1. Demographic characteristics of respondents

- 20.6% of the respondents were daily wage workers.
- 34.4% of participants were housewife.
- 14% were self employed.
- 2% of the participants were unemployed or aged and 22% were students.
- More than 80% of respondents have 4-9 family members.

Fig.2 Education Distribution Of the respondents

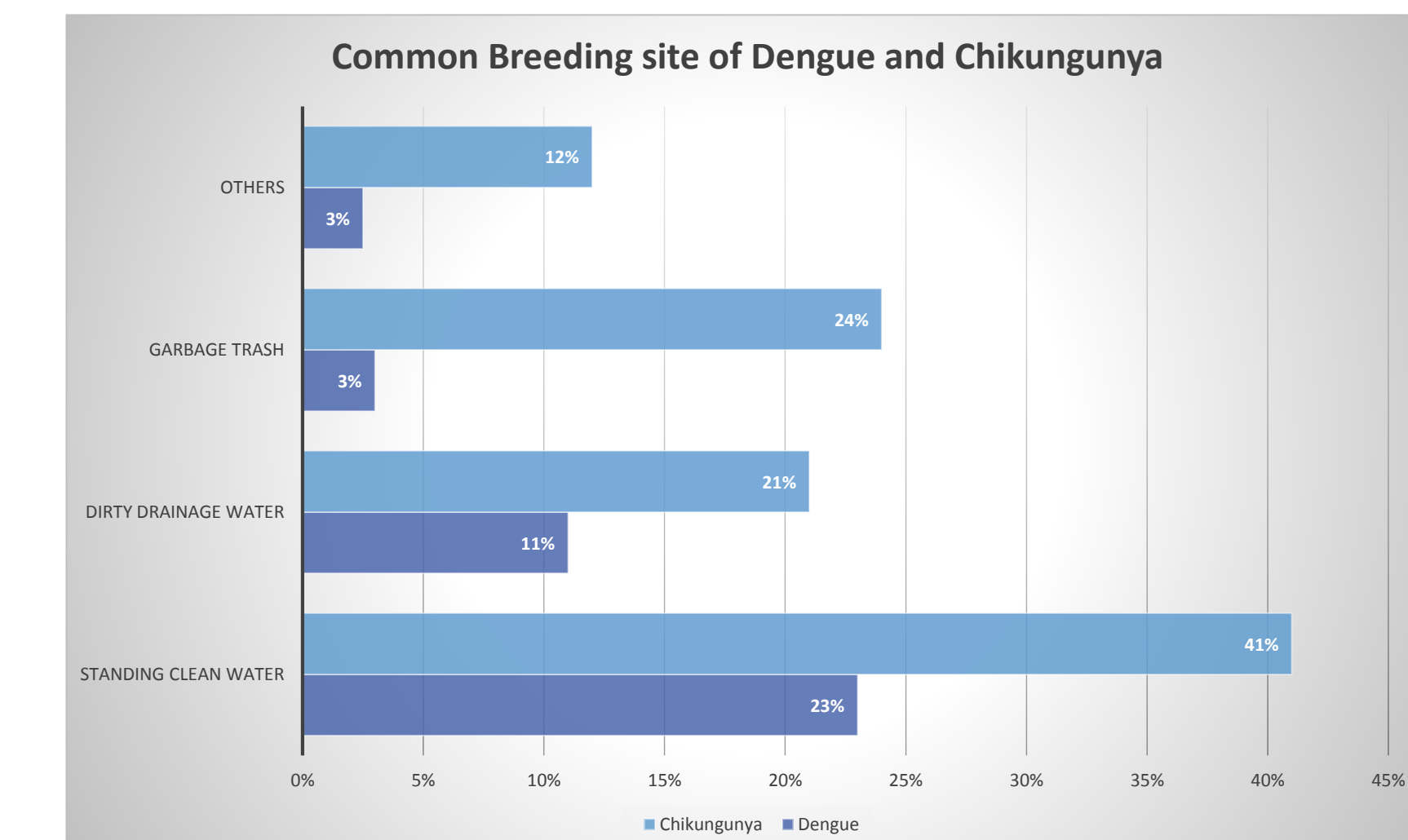


Survey Findings

Table 1. Knowledge of Dengue and Chikungunya

Knowledge of Dengue and chikungunya	Dengue (in %)	Chikungunya (in %)
Knowledge of respondents of knowing dengue and chikungunya as a disease.	95.3%	80.8%
Percent of respondent who knows the cause of Dengue and Chikungunya.	92.05%	72.5%
Percent of respondent who knows the symptoms of Dengue and Chikungunya.	41.7%	48.3%
Percent of respondent who are aware with the common breeding site of mosquito.	57.6%	42.3%

Survey Findings

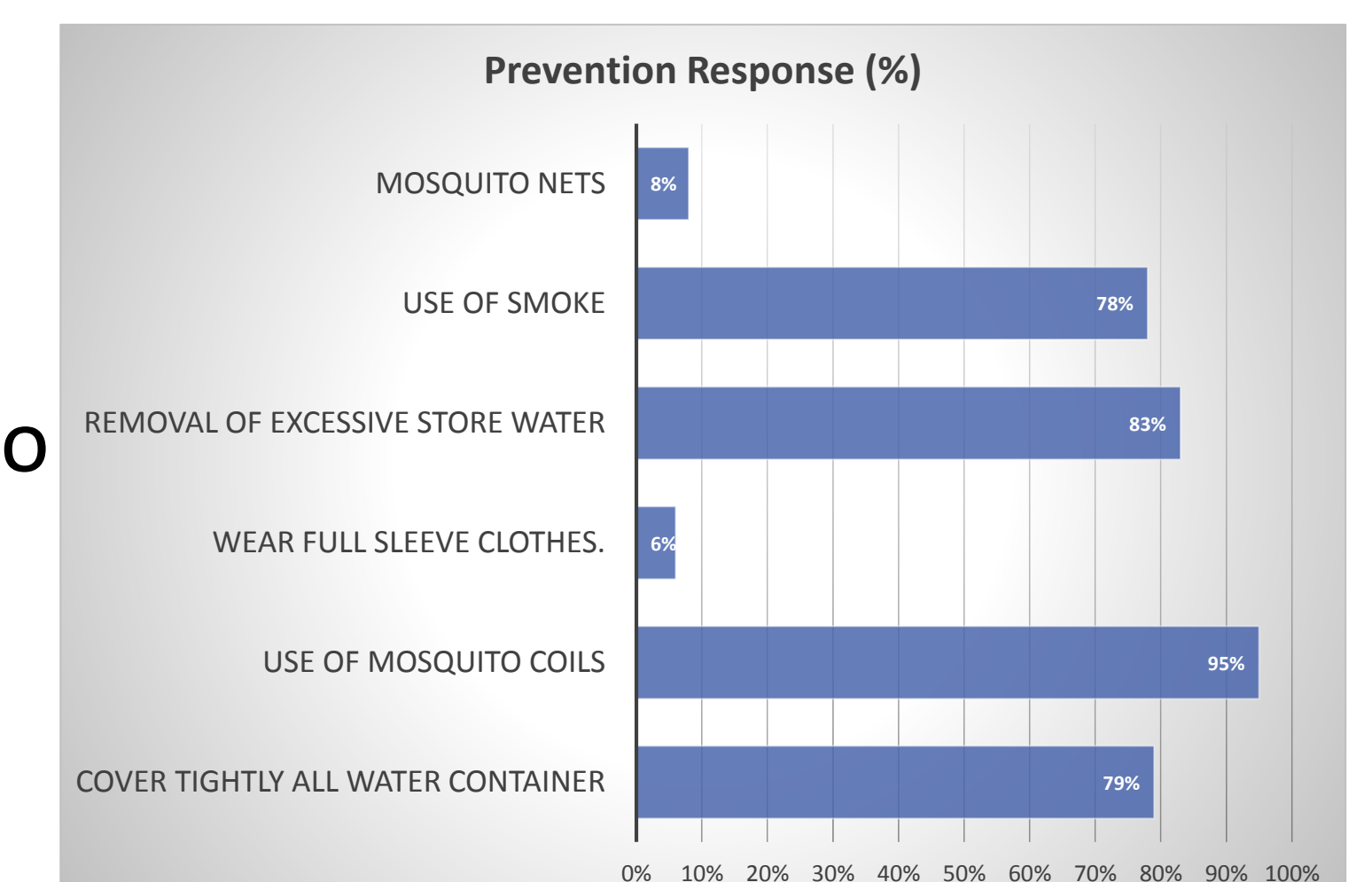


Though Majority of the respondents were aware about dengue and chikungunya. In contrast only 41% respondents knew the symptoms of

Dengue and whereas in the case of chikungunya only 48% knew the symptoms indicating knowledge gap that need to be filled and can be done by effective community campaign

- 86% respondents said no educational health campaign had setup by local authority to educate people regarding these diseases.
- Fumigation had done in the community during the seasonal outbreak but people remained spectacle about it, as respondent had observed less or no effect in the prevalence of both the diseases.

Majority uses the mosquito coils followed by the use of smoke (neem leaves, egg tray) to prevent from the mosquito bites. It is clearly observed that there is no practise of using mosquito nets which is better source of prevention from the previous one.



Recommendations

- The knowledge gaps which has been highlighted in the survey finding can be used as a measure to design effective behavior change communications.
- Seasonal health campaign can be setup in community to educate people about both the disease.
- School going children can play an important factor in preventing dengue and chikungunya in the community. Government can utilize the mass communication method for educating the children about mosquito borne diseases.