Is there any difference in opinions between urban and rural residents regarding control measures for dengue outbreak?

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ABSTRACT

Introduction: Control measures for dengue outbreaks require actions taken not only by the local health authorities but also the residents in the affected area. Often, we heard that public criticized about the control measures being inappropriate or unsuitable for some reasons. Our intention in this study is to determine whether these views/opinions are true and whether there is any difference in opinions between urban and rural communities. **Methods:** We conducted across-sectional study at a few health centres in urban and rural areas. Respondents were selected among the attendees using systematic random sampling method during data collection day. We used a structured questionnaire which consist 13 statements regarding dengue outbreak control measures and respondents were asked on a scale of 1 to 5 on their opinion whether the control measures were appropriate or not, where 1 being not appropriate at all and 5 being most appropriate. **Results:** A total of 748 adults (rural 440 and urban 308) were selected, with mean age of rural residents was 41±16 years and urban 38±14 years (significant different). Females was 61.5% andmen38.5%, most was Malays (83%). The medians for all 13 statements of opinions were between 4 and 5, indicating their opinions were all skewed toward good opinions. Using Mann-Whitney U test, there were no statistically significant difference between urban and rural residents except for 'destruction of larvae breeding sites at public places by local/health authority where rural residents scored median of 5 (IQR1) while urban 4 (IQR1). **Discussion:** Generally, both urban and rural residents have good opinions on the appropriateness of the dengue outbreak control measures and there was no different in most of the opinions between urban and rural residents.

Managing the human rabies outbreak in Sarawak, 1 July to 8 August 2017

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ABSTRACT

Sarawak was historically Rabies-free, until outbreak declared 1st July 2017. Up to 8th August 2017, six human Rabies have been confirmed, involving five children and an adult. Twenty-two localities, in the Divisions of Kuching, Serian, Samarahan and Sri Aman detected positive Rabies in human and animal samples. Educational efforts, community active case finding, strengthened dog bites surveillance and reporting from health facilities, administration of post-exposure prophylaxis for at-risk populations, together with source reduction and mass vaccination of dogs by Veterinary Services of Sarawak, were the main strategies in outbreak control. Total 1754 people in outbreak localities with history of animal bites starting 1st April 2017 were identified and 48% vaccinated based on risk of Rabies infection. Over 90% were category II and III wounds. Elderly above 60 years old (Incidence rate 2.14 per 1,000 population) and children below 10 years old (Incidence rate 1.99 per 1,000 population) have higher risk of animal bites, and male:female ratio was 1:1.04. Three-fifth of cases involved dog bites, 14% were strays. Ascending trend of bite incidences was anticipated from increased public awareness. Multiagency collaborations and surveillance were strengthened, aiming to prevent spread to Central and Northern Sarawak and preventing further deaths from the disease.