Letter to the Editor



Iranian J Publ Health, Vol. 42, No.5, May 2013, pp. 538-539

Evaluation of Communication for Behavioral Impact (COMBI) Program in Dengue Prevention: A Qualitative and Quantitative Study in Selangor, Malaysia

*Mohammed Nawi AZMAWATI¹, Ismail ANIZA¹, Munawar ALI²

Dept. of Community Health, UKM Medical Centre, W. Persekutuan, Malaysia
Medical Division, Ministry of Health, Putrajaya, Malaysia

*Corresponding Author: Tel: +03-91456670 Email: atienawi@yahoo.com

(Received 07 Feb 2013; accepted 11 Mar 2013)

Dear Editor-in-Chief

World Health Organization (WHO) has begun applying an approach known as Communication for Behavioural Impact (COMBI) in the design and implementation of behavioural-focused social mobilization and communication programmes for communicable diseases prevention and control as well as in Malaysia (1). A cross sectional study was carried out in Selangor, Malaysia to evaluate the effectiveness of the COMBI programme in preventing and controlling dengue. The study conducted had qualitative (in-depth interview and a Focus Group Discussion) and quantitative components which compared the perception (knowledge, attitude and practice) from the community with COMBI and community without COMBI in Selangor. The programme did influenced the KAP of the respondents but only during its implementation weeks. The result from qualitative study was corresponded with conclusion made during a discussion in Asia Pacific Dengue Forum in February 2006 in Chiang Mai which listed weaknesses in dengue prevention and control programme in Asia Pacific countries including Malaysia (2). Problems on human resources and fund had significantly affected the sustainability of COMBI Programme in long term (3). A study in two districts in Khamphaeng Phet, Thailand in 2004 showed the same finding (4) .The other study on KAP in Sao Paolo, Brazil in 1998 showed that urban residents with high economics and social status had a high level of knowledge on dengue (5).

Qualitative result, epidemiological and entomological evaluation showed that the programme failed to give the desired behavioral impact the programme concluded. Qualitative result also highlighted the problem of insufficient health care personnel, funding and lack of public campaign which need to be addressed by the stakeholders. Optimization of multi-agencies collaboration is one of the suggested solutions to overcome the problems faced by the programme. The health authorities should create more awareness and empower the community with the knowledge, attitude and practices on the dengue prevention and control.

Acknowledgement

The authors declare that there is no conflict of interests.

References

- Kementerian Kesihatan Malaysia (MOH) (2005). Garis Panduan Perlaksanaan Program Komunikasi untuk Perubahan Tingkah laku (COMBI), pp. 26-30.
- 2. Asia Pacific Dengue Forum (2006). *Partners meeting* on prevention and control of dengue fever. Chiang Mai.
- Rozhan S, Jamsiah M, Rahimah A, Ang KY (2006). The COMBI (Communication for Be-

Available at: <u>http://ijph.tums.ac.ir</u>

havioural Impact) in the Prevention and Control of Dengue-The Hulu Langat Experience. *Journal of Community Health*, 12(1):19-32.

4. Constantianus JMK, Wieteke T, Ratana S, Udom K, James WJ, Thomas WS(2006). Dengue Knowledge and Practices and Their Impact on Aedes Aegypti Population in Kamphaeng Phet, Thailand. Am J Trop Med, 74(4):692-700.

 Rosenbaum J, Natahan MB, Ragoonanansingh R, et al. (1995). Community participation in dengue prevention and control: a survey of knowledge, attitude and practice in Trinidad and Tobago. *Am J Trop Med Hyg*, 53: 111-117.