

Transmission

- Direct or indirect contact with the blood or organs of infected animals, including inhalation
- Mosquito bite
- Eating or drinking the unpasteurized (unheated) or uncooked milk of infected animals

Symptoms

- Starts with fever, headache, joint and muscle pain
- Sometimes neck stiffness, sensitivity to light, and diarrhoea
- Can cause changes in eyesight and sometimes permanent loss of eyesight
- Some patients suffer from loss of memory, hallucinations or delusions, confusion, dizziness, seizures, and tiredness and may become unconscious
- The most severe form includes a rash, yellowing of the skin and eyes (jaundice), and bleeding from nose and inside mouth

Prevention

- Animal vaccination
- Restrict or ban the movement of livestock
- Handle and slaughter animals safely (for example, practise hand hygiene, and wear gloves and appropriate personal protective equipment)
- Cook animal products thoroughly (meat, milk, blood)
- Control vectors (larval and adult mosquitoes)
- Protect against mosquito bites (use a bed net, wear long sleeves and trousers, apply repellents, etc.)
- Wash hands with soap
- Employ social mobilization and behaviour change communication
- Keep animals under disease surveillance

Vulnerable people

- Mostly people who are in contact with the blood or organs of infected animals (e.g. herders, farmers, slaughterhouse workers, and veterinarians)

If an epidemic occurs

- Detect sick people rapidly and refer them to health facilities
- Increase social mobilization and behaviour change communication
- Advise people how to slaughter animals safely
- Advise people how to handle sick animals safely
- Safely disinfect and dispose of animal carcasses and aborted fetuses

- Restrict or ban the movement of livestock
- Make sure people cook animal products thoroughly (meat, milk, blood)
- Promote handwashing with soap
- Control vectors (larval and adult mosquitoes)
- Promote protection from mosquito bites (use a bed net, wear long sleeves and trousers, apply repellents, etc.)
- Keep animals under disease surveillance
- Give psychosocial support

Community-based assessment - questions

Make a map of the community and mark the information you gather on the map. Record other details.

- When did people start to fall sick with Rift Valley fever?
- How many people have fallen sick with Rift Valley fever? Where?
- How many have died? Where?
- How many people live in the affected community or area? How many children under five years of age live in the area?
- Who and where are the vulnerable people?
- Who is most affected by Rift Valley fever?
- Are areas or markets with animals known to be infected by Rift Valley fever? Where are they?
- What are the community's habits, practices and beliefs about handling and slaughtering animals, especially sick or dead animals?
- Do people cook milk and meat thoroughly before eating them?
- Are there handwashing facilities in the community, at animal markets or other areas where livestock gather? Are soap and water always available?
- Have the authorities established a vector control programme?
- What are the community's habits, practices and beliefs about use of repellents, sprays, etc.
- How many houses have insect screens on the windows and doors?
- How many people sleep under a bed net at night? Are the nets hung up and maintained properly? If people do not use them, why not?
- How does the community dispose of rubbish and solid waste?
- Where are the local health facilities and services? (Include traditional and community carers from whom people seek advice.)
- What are the community's habits, practices and beliefs about caring for and feeding sick people?
- Is a social mobilization or health promotion programme in place?
- Which sources of information do people use most?
- Are rumours or is misinformation about Rift Valley fever spreading in the community?

Volunteer actions

See the following action tools for more information on what actions to take against rift valley fever:

- 1 - Community-based surveillance
- 2 - Community mapping
- 3 - Communicating with the community

- 4 - Referral to health facilities
- 5 - Volunteer protection and safety
- 19 - Psychosocial support (Psychological first aid (PFA))
- 34 - Handwashing with soap
- 36 - Vector control
- 37 - Mosquito nets
- 38 - Waste disposal and clean-up campaigns
- 41 - Handling and slaughtering animals
- 43 - Social mobilization and behaviour change