Transmission

- Mosquito bite
- Mosquitoes that spread dengue fever usually bite during the day, especially in early morning and late afternoon and evening.
- · During pregnancy, from mother to child
- Organ transplants and blood transfusions from infected donors

Symptoms

- Starts with sudden fever.
- Can be accompanied by severe headache, muscle and joint pain, pain behind the eyes, nausea, vomiting, swollen glands and a rash.
- In some very severe cases, the disease can cause severe stomach pain, difficulty breathing and bleeding (known as 'dengue haemorrhagic fever'), and even death.

Prevention

- Prevention of mosquito bites by placing insect screens on windows and doors and wearing personal protection (apply repellents, wear long sleeved clothes, etc.)
- Community clean up campaigns to remove rubbish and cover water containers
- Destruction of mosquito breeding sites by removing standing water, fogging, and applying larvicides
- Routine vaccination
- Social mobilization and behaviour change communication

Vulnerable people

- Any person in the community can get dengue fever; but babies and young children are at higher risk of severe dengue fever
- Dengue fever is important for pregnant women because they can pass the disease to their unborn baby

If an epidemic occurs

- Increase community-based surveillance
- Rapidly detect and refer serious cases to health facilities
- Increase social mobilization and behaviour change communication
- Promote community clean up campaigns to remove rubbish and cover water containers
- Support mass vaccination campaigns and encourage social mobilization to support them
- Promote the prevention of mosquito bites by placing insect screens on windows and doors and wearing personal protection (apply repellents, wear long sleeved clothes, etc.)
- Eliminate mosquito breeding sites by removing standing water, fogging, and applying larvicides

 Encourage young children and people who sleep during the day to sleep under a mosquito net (if windows and doors are not screened)

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 dengue?
- · How many people have fallen sick with dengue? Where?
- · How many people are severely ill with dengue haemorrhagic fever?
- · 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?
- Are children under five most affected? Or are other age groups, occupations, etc., more affected?
- Do people usually cover their water containers (inside and outside)?
- How many houses have insect screens on the windows and doors?
- What are the community's habits, practices and beliefs regarding use of repellents, sprays, etc.?
- How do people in the community usually dispose of rubbish and solid waste?
- Have the authorities established a vector control programme?
- Where are the local health facilities and services? (Include traditional and community carers.)
- What are the community's habits, practices and beliefs about caring for and feeding sick people? When babies and infants are sick, do women continue to breastfeed them?
- Is a social mobilization or health promotion programme in place?
- Which sources of information do people use most?
- Are rumours or is misinformation about the disease spreading in the community?

Volunteer actions

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

- 1 Community-based surveillance
- 2 Community mapping
- 3 Communicating with the community
- 4 Referral to health facilities
- 5 Volunteer protection and safety
- 12 Managing fever
- 19 Psychosocial support (Psychological first aid (PFA))
- 24 Routine vaccinations
- 25 Mass vaccination campaigns
- 36 Vector control
- 37 Mosquito nets
- 38 Waste disposal and clean-up campaigns
- 43 Social mobilization and behaviour change