

**KNOWLEDGE, ATTITUDE AND PRACTICE ON
H5N1 INFLUENZA AMONG RURAL
COMMUNITY OF MAGWAY TOWNSHIP**

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ABSTRACT

H5N1 influenza is a potential threat for both animal and human health. Prevention and control measures largely depend on community awareness and behaviour. The present study aims to assess knowledge, attitude and practice on H5N1. A community based cross-sectional study was carried out by using structured questionnaires among 220 respondents in selected villages of Magway Township by face by face interview.

Mean age of the study was 43.29 years (standard deviation=12.91). Average duration of farming was 5.8 years (standard deviation=7.8). Among 220 respondents, 99% were aware of H5N1 influenza and requested more information about it. More than 90% of respondents knew chicken as H5N1 reservoir, and 85% answered H5N1 transmission from poultry to human. The most answered mode of transmission was ingestion of undercooked contaminated meat (58.7%) followed by contact with infected meat and eggs (43.6%). About 60% responded H5N1 as a fatal infection (56.9%) and hand washing as preventive measure (56.0%). There were 91.3% who answered burial method for dead poultry disposal. More than one third respondents gave correct answer for vaccine availability while 68% for correct answer of treatment. Wrong knowledge was found in human to human transmission (88.5%) , air borne transmission (3.2).

All respondents had positive attitude towards 50%, 58.7% to 75% but only 1.4% to 90% of attitude questions. More than 90% of respondents had 50%, 41.28% to 75% and 6.8% to 90% of preventive practice questions. In addition, there were 3.7% respondents who answered 100% of key practice. Main source of health education was television (45.9%). Respondents having primary school and above level and duration of farming 1-5 years were found high knowledge. Respondents with 1-5 years farming duration and receiving health education had positive attitude. Females and who receiving health education had better practice. Higher knowledge was associated with positive attitude and good practice on H5N1. Health education using most accessible and effective channel should be promoted to achieve and sustain good practice on H5N1.