

PERCEPTIONS, KNOWLEDGE, AND PREVENTION PRACTICES OF CHIKUNGUNYA IN A SMALL VILLAGE OF THE CENTRAL PACIFIC COAST OF COSTA RICA

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Chikungunya is an emerging mosquito-borne disease originating in Africa, but has since come to the Americas, first to the Caribbean in 2013. Chikungunya produces many debilitating, symptoms like severe fever, headache, and rash, and often chronic joint pain. This study elucidates the perceptions, knowledge, and prevention practices of Chikungunya in Quebrada Ganado, a small, rural village in the central Pacific coast of Costa Rica. Quebrada Ganado has one confirmed case of Chikungunya. Two hundred face-to-face interviews were conducted in various places around the village. The climate and location provides an efficient breeding ground for *Aedes* mosquitos, the vector of Chikungunya. No significant difference was found between gender and: a) perception of danger, b) K score, or c) frequency of insect repellent use; however, the means for the females were always slightly larger. While there was no significant difference between frequency of insect repellent use and education and occupation, there was a significant difference between perception of danger and knowledge score. Both older people, over the age of 66, and young people, 18-25, had a low perception of danger, and low K score. The majority of people (68.5%) did not know that joint pain was a symptom of Chikungunya. When asked about frequency of insect repellent use, the majority of people said never (100, 50%). The majority of people (91, 45.5%) said they emptied out containers of water daily. Most people (185, 92.5%) said they did not have containers of water. The majority of people received information about Chikungunya through the local clinic or on television news (60, 30%: 113, 56.5%, respectively) this is likely because television is the easiest, most accessible form of media. Rarely anyone uses insect repellent likely because it is expensive and often ineffective in humid climates, but most participate in prevention practices like emptying out containers of water to prevent possible breeding sites. This is most likely because the prevention practices for dengue, a similar but more widely known disease, are the same as for Chikungunya. People with easier access to information, like people with more education or a skilled job, know more and perceive a greater risk. It is important that the public continue to be educated about this disease and the prevention practices. This means increasing the number of segments of television as well as increasing information in local clinics.