CHAPTER I

INTRODUCTION

In mid-2001, the world population had increased up to over 6 billion people. The massive increase in population has led to urbanization and mass migration. Coupled with this are the problems associated with the environment and public health. Although the medical technology has progressed by leaps and bounds, and many diseases can be cured, it seems that we cannot prevent the mosquito's vectors epidemic which is a major factor of spreading tropical diseases and threaten the well being and quality of life of more than 2.5 billion people world-wide.

Dengue virus has many endemic areas in the world through four continents, Asia, America, Africa etc. Thailand is one of the DHF endemic countries in south-east Asia. During the 5 years from 1997-2001, 101,689, 129,954, 24,826, 18, 617 and 132,082 DHF cases occurred in Thailand each year.

The number of DHF incidence cases in Thailand during the past five years has shown that there is a trend of DHF increase except in 1999 and 2000, the number is much lower than other years because of the Dengue Haemorrhagic Fever prevention and control programme launched on the occasion of the His Majesty the King's 72 (six cycle) birthday. The result of this one year program intervention from October 1999-2000 in the whole of Thailand helped in decreasing of Dengue Haemorrhagic Fever incidence cases. Therefore, this situation has shown that the intervention program to reduce Dengue Haemorrhagic Fever is one of the key successes. However, after the end

of the programme, the incidence has increased because although the programme was successful and useful, attention was not given to sustaining the programme.

These days most of the countries in the world can treat Dengue Shock Syndrome (DSS) and, in time, the death rate has decreased or does not occur in some areas. However, the incidence of dengue Haemorrhagic fever (DHF) is still high or increases in many countries. Many organizations implement different programs to prevent and control the DHF, such as, community participation, and educational campaigns.

The success stories of preventing Dengue Haemorrhagic Fever encourage people in the endemic areas to protect themselves from Aedes mosquitoes bite and get rid of their larvae in their residences. One of the key successes is to persuade people in the endemic areas to get rid of Aedes mosquitoes before they become vectors of Dengue Haemorrhagic Fever. Therefore, the Persuasive Campaign Project Proposal in this thesis is an example (model) program to prevent Dengue Haemorrhagic Fever.

This thesis consists of 6 chapters, including this introduction chapter. The second chapter is an essay of review of information and literature on dengue fever and strategies in solving this problem. The chapter includes the situation of DHF in Southeast Asia, especially Thailand.

Chapter III is a Persuasive Campaign Project Proposal which is an intervention program to reduce Aedes mosquito larvae for preventing Dengue Haemorrhagic Fever in Tha Yai Village, Ratchaburi Province, Thailand. It describes the objective of the project, the campaign description, implementation and evolution.

Chapter IV is a survey of larval infestation and perception, awareness, behavior and knowledge of preventing Dengue Haemorrhagic Fever in Tha Yai village, Ban Phong district in Thailand. The data exercise of this chapter describes methodology used with quantitative and qualitative techniques to test instruments for further application in the part of evaluation in Persuasive Campaign Project. The results from data collection are used to improve the proposed project.

Chapter V contains the presentation for the thesis examination and Chapter V is the final chapter of annotated bibliography and description of some of the literature used as a guide for this thesis. Appendices and curriculum vitae are shown at the end of this thesis.