

**PERCEPTION TOWARDS THE LYMPHATIC FILARIASIS MASS DRUG
ADMINISTRATION PROGRAMME IN USING KNOWLEDGE,
ATTITUDE AND BELIEFS AMONGST THE POPULATION
OF KAMPUNG KERAMAT, BELURAN, SABAH**

ABSTRACT

This is a cross-sectional study on knowledge, attitudes and beliefs on Lymphatic Filariasis (LF) Mass Drug Administration (MDA) Program among residents of Keramat Village, Beluran, Sabah. Duration of study was from July to December 2013. This study aims to determine the level of knowledge, attitudes and beliefs on disease, treatment, preventive measures and MDA Program. All houses in the area were involved with respondents aged above 18 years old and have lived more than five years represents each households. Information collected through direct interview method using questionnaire containing demographic information, knowledge on disease, MDA program, attitudes and beliefs. This study involved 86 respondents with number of males and females alike. Malaysians are 97.7% and 69.8% Sabah indigenous. Only 17.4% are aware that LF as public health problem. 79.1% agreed LF is dangerous but only 32.4% knew it is dangerous because it is an incurable disease. 68.6% knew this disease cause by mosquitos and 87.2% chose debris as environmental condition causes infection. 69.8% choose adults are susceptible and 58.8% knew early symptom is fever. 73.3% had taken medication but only 2.3% took medication seven times equal to the rounds of MDA Program conducted by the Beluran Health Office. 88.4% knew about MDA Program from the Ministry of Health. Overall, 94.2% were less knowledgeable. A survey on attitudes found that 82.6% are still negative. 73.3% have negative perception on benefits and barriers and 68.6% on risk of being infected. 67.4% respondents have positive beliefs. Household income showed significant differences for attitude ($p=0.008$) and duration of stay in the belief comparison also significant ($P=0.017$). In conclusion, the level of knowledge, attitudes and beliefs indirectly affect individual perceptions. Awareness and knowledge of community needs to be improved. Communities need adequate exposure on the importance of their roles and responsibilities in controlling infectious diseases.