



# Chikungunya

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## Key facts

### Transmission: vector-borne (mosquito)

- Mosquitoes that spread chikungunya usually bite during the daytime (early morning – late afternoon)
- Other transmission modes exist but these rarely cause epidemics (for example during blood transfusion or vertical mother-child transmission)

### Most vulnerable to severe consequences

- Elderly
- Newborns
- People with other medical conditions (such as arthritis, high blood pressure, diabetes, heart disease, etc.)

### Symptoms

- Sudden onset of fever and chills
- Joint pain (usually)
- Headache (sometimes)
- Body aches and generalized pain (sometimes)
- Nausea (sometimes)
- Light sensitivity (sometimes)
- Rash (sometimes)

# What can you do to prevent and control an epidemic?

## Vector control and prevention

- Initiate elimination of mosquito breeding sites (for example, remove standing water and apply larvicides)
- Promote community clean-up campaigns to remove rubbish and cover water containers
- Prevent mosquito bites by advocating the use of:
  - Insect screens on windows and doors and
  - Personal protection (application of repellents, wearing long-sleeved clothes)
  - Bed nets for children and others who sleep during the day

## Monitoring the community and identifying sick people

- Identify people in the community with suspected Chikungunya

## Treatment and management

- Rapidly detect and refer serious cases to health facilities
- Refer all pregnant women with suspected infection to health facilities
- Provide psychosocial support to the sick person and their family members

## Social mobilization and health promotion

- Find out the specific advice being given by health and other relevant authorities
- Model following this advice and inform community members of current health practice advice
- Offer support and encouragement to follow the advice
  - Try to gain understanding about if and why health practice advice is not being followed
  - With the advice of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices
- Identify if there are any community spaces where women give birth and engage with traditional birth attendants to share information about the disease transmission and prevention modes

# Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
  - How many people have fallen sick with chikungunya? Where? When?
  - Who and where are the vulnerable people?
  - Where are the local health facilities and services? (include traditional healers)
  - Where do women give birth? (include traditional birth attendants)
- Record the following information on the back of the map:
  - When did people start to fall sick with chikungunya?
  - How many people live in the affected community? How many are children under five years of age?
  - Do people generally cover their water containers (inside and outside)? Who is responsible for the maintenance of containers for household drinking water and for vessels to do laundry; is it women or men?
  - How common is it for people to live in houses with insect screens on windows and doors?
  - How common is it for people who sleep during the daytime (for example, babies and small children) to sleep under bed nets?
  - Are children badly affected by chikungunya? Are there other groups (specific ages, occupations, geographic areas, etc.) that are badly affected?
  - What are the community's habits, practices and beliefs regarding use of repellents, sprays, etc.?
  - Have the authorities established a vector control programme?
  - Is a social mobilization or health promotion programme in place?
  - Which sources do people use/trust the most for information?
    - Are there rumours or misinformation about chikungunya? What are the rumours?
  - Who spends more time in the household during the day (and is more exposed to the mosquito bite)? Women, or men, or both?

## Other resources

Zika, dengue and chikungunya toolkit: [Zika, dengue and chikungunya toolkit | IFRC](#)