## MINISTRY OF HEALTH

## DENGUE DISEASE CONTROL MANAGEMENT

### **Main Points**

# What we examined?

- Dengue disease arises from the interaction of four main components, namely humans, vectors (mosquitoes), the virus and the environment (climate).
- Dengue disease is listed in the First Schedule of the Infectious Disease Prevention and Control Act 1988 (Act 342), which was established to prevent and control the spread of infectious diseases.
- The audit focuses on the management of dengue disease control, including the duration of dengue control activities carried out.
- For the management of dengue disease control, output achievement is assessed based on the duration of dengue control activities. The outcome is measured through the reduction of disease incidents and the reduction of the number of deaths.
- The management of activities includes the teams of dengue prevention and control activities, the Wolbachia operation project, health promotion and education activities, dengue prevention and control equipment, the Communication for Behavioural Impact (COMBI) project and dengue research.

# Why is it important to audit?

Assessing whether the management of dengue disease control by the Ministry of Health (MOH) has been carried out efficiently and effectively in line with the set objectives, which are to reduce the incidence of disease and deaths caused by infectious diseases, so that it does not pose a threat to public health.

### Conclusion

Overall, based on the audit scope, it is concluded that dengue disease control management has achieved its objective of reducing the death rate and disease incidence rate. However, there are some weaknesses in the management aspects that affect the effectiveness of dengue disease control, such as the teams and equipment for carrying out prevention and control activities, as well as community cooperation in addressing dengue disease.

NO.	AUDIT ISSUES	IMPACT	RECOMMENDATION FOR SOLUTIONS
1.	A total of 20,199 PTP activities were not implemented.	Lack of achievement in control activities implementation.	<ul> <li>Enhancing prevention activities, especially in high-risk areas, through cooperation with the community, non-governmental organisations (NGOs), building management, private entities or corporate bodies, and local authorities.</li> </ul>
2.	A total of 1,747 PTP activities were implemented late, with a maximum delay period		
	ranging from 127 to 292 days.		Prioritising the allocation of resources, teams, and equipment to ensure that prevention and control activities can be carried out effectively.
3.	A total of 29,362 SRT activities were not implemented.		
4.	A total of 6,462 SRT activities were implemented late, with a maximum delay period ranging from 206 to 294 days.		Enhancing early awareness programmes in schools, higher education institutions and offices by disseminating promotions through electronic and social media.