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Health and safety risks behavior among local and international tourists at Borobudur Temple before COVID-19 pandemic

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Tourists are vulnerable to certain diseases and health-related issues, including experiencing danger during their visit to a destination. This study aims to compare the health and safety behavior of local and foreign tourists during their visit to Borobudur Temple, Indonesia from September to November 2019. Additionally, it was carried out quantitatively with a cross-sectional approach. The sample consisted of 200 foreign and 200 local tourists visiting Borobudur Temple; they were selected using convenient sampling. The data were analyzed using the frequency distribution and the Chi-square test. The results showed that health risks related to food and beverage hygiene were the most experienced by foreign tourists (p-value 0.030), and solar radiation effects were experienced by both foreign and local tourists (p-value 0.006). Tourists' knowledge to prevent health and safety risks was categorized as moderately adequate, and foreign tourists have more understanding than their local counterparts. This study reported no difference in health and safety behaviors between foreign and local tourists. It was

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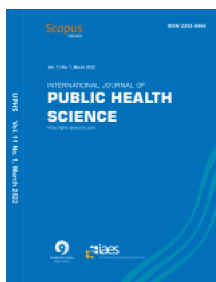
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Lessons learned from COVID-19 impact of pandemic on children with neurological disorders in Sfax, Tunisia

Salma Zouari Mallouli¹, Sahar Najjar², Fatma Kamoun Feki¹, Olfa Jallouli¹, Sihem Ben Nsir¹, Wafa Bouchaala¹, Mathilde Leonardi³, Chahnez Charfi Triki¹

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ABSTRACT

To record the experience of caregivers for neurologically impaired children during the lockdown periods. Data from 286 children's caregivers were collected through an administered questionnaire to record: access to care services during the lockdown periods, causes underlying loss of access to care, mitigations adopted by caregivers and patients' outcomes. The mean age of children was 8.11 years-old and sex ratio (F/M) was 0.66. They were mainly followed-up for epilepsy or epileptic encephalopathy (53%) and cerebral palsy (21%). During the lockdown periods, caregivers reported that 45% of children had no access to healthcare majorly for neurorehabilitation (76.7%) and medicines (70.7%). Most caregivers (36%) related limitations in access to fear from catching the virus. The majority resorted to continuation of the same treatment via primary healthcare facilities (41%) and postponement of their appointments (24%). Our results show that access to healthcare for children with neurological disorders was deeply disrupted during the COVID-19 pandemic. The already precarious health systems' infrastructures might have been the main causes for this and should be thus considered in the health policy and planning.

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1. INTRODUCTION

Healthcare system in Tunisia relies on two independent sectors, public and private sectors both under the dependence of the ministry of health. However, the distribution of material and human resources is inequitable between both sectors. The public health system financed from taxation run by the national health insurance Fund. It includes health centers providing primary care, district and regional hospitals, and university hospitals and ensures care for the majority of the population. The private health sector is concentrated in the cities and possesses 23.6% of the total bed capacity, 75% of the top range medical equipment, more than half the doctors (54%) and pharmacies (84.8%). This imbalanced resource supply makes the healthcare system a fragile structure whenever there is a health crisis [1], [2]. Since the beginning of the COVID-19 pandemic, several lockdowns were necessary, always depending on the levels of the pandemic situation. Tunisia experienced two main pandemic waves. The first spread from January to July 2020. The second one started around August 2021 and continued until the time of the study. Meanwhile,

Assessing six decades of rabies in the Philippines

Ralf Benjo Goder Morilla, Kathleen Laum Cabanlit, Angel Mae Frias Luga, Chin-Chin Jimenea

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ABSTRACT

Despite initiatives to address the disease, rabies remains a public health threat in the Philippines. To determine the trend of rabies infections in the country and provide possible interventions to reduce or eliminate deaths of the affected, we evaluated rabies morbidity and mortality statistics over sixty years. Over the last six decades, rabies mortality rates in the Philippines have steadily decreased. The Philippines' rabies sex-specific mortality rate trend from 1960 to 2019 showed that males account for higher rabies mortality than females. People aged 70 and up have the highest mortality rate, while children under the age of 1 have the lowest. The region with the highest mortality rate in the Philippines is region II (Cagayan Valley), with 39.5. The region with the highest morbidity rate is XI (Davao region), with 148.7. The correlation value was 0.197, indicating a weak correlation between regional morbidity and mortality rates in the Philippines over the years. Hence, those who have contracted rabies are less likely to die over time. Comprehensive control measures by both the national and local government units should be strengthened to eliminate rabies in the Philippines within the next few years.

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1. INTRODUCTION

Rabies is a fatal infectious and zoonotic disease caused by a virus from the genus *Lyssavirus* and the family *Rhabdoviridae* that affects domestic and wild animals and can be transmitted to humans. It is a disease that both affects and kills people worldwide [1]. The World Health Organization (WHO) envisioned that rabies kills 59,000 humans yearly in over 150 international locations, with 95% of cases in Africa and Asia [2]. Although the disease is 100% deadly, it is entirely avoidable through human and animal vaccination, the primary intervention strategy for canine rabies eradication [3], [4]. Despite attempts to deal with the issue, rabies remains a public health risk in the Philippines. The Philippines is one of the top ten countries globally with the highest rabies prevalence, with 200 to 300 deaths yearly [5]. In most human rabies cases worldwide, dogs and cats are the most prevalent reservoirs of the rabies virus [1]. Humans contract the virus through bites from infected animals or direct contact with virus-laden saliva on mucosal surfaces such as skin breaks, lips, mouths, and eyes [2].

Collaborations, such as United Against Rabies, have been formed to achieve zero human dog-mediated rabies deaths worldwide by 2030 [2]. In the Philippines, the Anti-Rabies Act of 2007 (R.A. 9482) (PAWS 2013) mandates that all dogs are fully vaccinated and registered by local government entities [6]. The

In vitro study of the preventive activity of fluoride varnish by X-ray diffraction

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ABSTRACT

In exogenous prophylaxis, fluoride is applied directly to the tooth surface through various gels, varnishes, foams, and toothpaste. According to the global burden of disease study conducted in 2017, more than 530 million children worldwide suffer from dental caries in their primary dentition. There are few developments in the selection of non-invasive methods in the application of mineralizing varnishes. The researchers investigated experimentally, in-vitro the preventive activity of the fluoride varnish Clinpro™ White Varnish with TCP 3M (CV), using a modern method of X-ray diffraction. The 20 temporary teeth were extracted due to physiological changes. Place of study was UMDC - city of Varna and Institute of Physical Chemistry "Academician Rostislav Kaishev" of the Bulgarian Academy of Sciences, Sofia. Demineralization is carried out with 37% phosphoric acid (i-gel – etching gel) and applied to the smooth temporary enamel surfaces for 30 seconds. The models were then washed and dried with a water and air jet. Remineralization was performed with CV. The formation of small globules of calcium fluoride. The coating is composed mainly of fluorapatite. With the modern method of X-ray diffraction, it was proved that exogenous fluoride prophylaxis and remineralization therapy are effective methods of prevention and treatment of initial caries lesions.

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1. INTRODUCTION

Fluorine prophylaxis is divided into endogenous and exogenous. It is important for endogenous prevention that fluoride enters the body through the digestive system and is subsequently transported to the bones and teeth through the blood. In exogenous prophylaxis, fluoride is applied directly to the tooth surface through various sources (gels, varnishes, foams, and toothpaste). The fluoride in all sources used for fluoride prophylaxis is not in the free state but is bound in chemical compounds such as NaF (sodium fluoride) and other compounds that give it stability. More in-vivo and in-vitro studies are needed to investigate this effect. According to Bonetti and Clarkson [1], many previous publications support fluoride varnish as a caries-inhibiting trace element. From our available literature, six Cochrane systematic reviews, including 200 studies and more than 80,000 participants, found the effectiveness of fluoride varnish applied in clinical settings two to four times a year to "arrest" and stop the development of dental caries and in the two functional dentitions. Success from fluoride varnish applications appears to be available regardless of high caries risk, initial dental status, fluoride exposure, prescription of fluoride toothpaste, and even prior patient prophylaxis. The efficacy of fluoride varnish is recognized in our clinical practice guidelines worldwide, but the application of these algorithms may still present some problems. Clinical use of fluoride varnish in the

Uniting hearts and minds: experiences from a pilot festival of youth creative expressions on mental health in India

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ABSTRACT

Mental-health-related social stigma prevents youth from seeking timely help for mental health problems. The purpose of this study is to assess the feasibility and acceptability of a pilot arts intervention to reduce such stigma among college youth in India. The intervention included three sessions, focused on i) mental health education, ii) developing mental-health-themed art, and iii) a mental-health-themed festival to display art for an invited audience. We assessed feasibility through creation of student-generated art and acceptability in post-intervention surveys and video recordings. The intervention was completed by 371 participants who created 86 works of art (paintings, puppet-shows, drama, dance, and poetry), which was displayed to 434 audience members at uniting hearts and minds: a festival of creative expressions on mental health. Participants self-reported understanding causes and symptoms of mental health problems, interpreting experiences and expressed empathy ($n = 194$). Our pilot intervention engaged youth, showing potential to reduce mental-health-related stigma and to address feasibility issues related to reaching all colleges uniformly.

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1. INTRODUCTION

Entertainment-education has been applied to various public health issues such as smoking, family planning, and human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) prevention as a strategy to enhance prosocial (behaviour) change [1], [2]. Although the effectiveness of art and creative media in improving mental health of populations has predominantly been established in therapy [3]–[7], such interventions indicate that art likely engages youth to freely share their opinions and emotions. Generally, visual and performing art have been used as a tool to improve the interactivity and relatability of mental health education to ultimately improve knowledge and attitudes related to mental health [8]–[10].

Globally, youth find it difficult to recognise mental health problems and are hesitant to seek help for such problems [11]–[13]. In India, the prevalence of mental disorders is 7.5% among 13-29 year olds and 83% of people across all ages experiencing mental health problems do not seek treatment for their problems [14]. Mental-health-related public stigma is a well-known factor that prevents people from seeking treatment, and it includes problems of knowledge (ignorance), attitude (prejudice), and intended or actual behaviour (discrimination) [15]. Studies among young adults (aged 18-21 years) in college settings in India indicate poor awareness about mental health and stigmatizing attitudes towards people with mental disorders, potentially leading to youth hiding their problems or lacking support for others to seek counseling/services [16]–[24].



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Reaserchers : 1. dr. Antono Suryoputro, MPH
2. Drs. Syamsulhuda BM, M. Kes

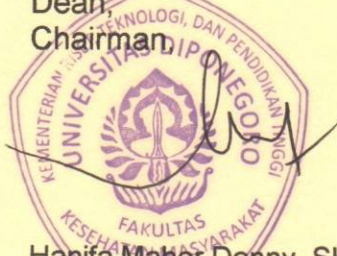
Site of Study : Central Java, Indonesia

Stated the research has met ethical requirements to be implemented, based on The Indonesian National Guideline on Health Research Ethics, Ministry of Health 2007.

Semarang, 14th July 2019

Commission on Health Research Ethics
Faculty of Public Health Diponegoro

Faculty of Public Health
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