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# Urbanization and Community Resilience in the Rio Grande Valley of South Texas

Volume 14 • Issue 15 | August (I) 2022



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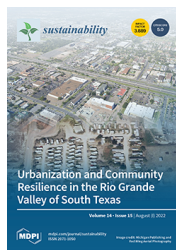
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**Romanian Dentists' Perception of Legal Liability Related to COVID-19 Infection during Dental Treatments in Times of the Pandemic Outbreak (/2071-1050/14/15/9744)**

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*Sustainability* **2022**, *14*(15), 9744; <https://doi.org/10.3390/su14159744> (<https://doi.org/10.3390/su14159744>) - 08 Aug 2022

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**Abstract** Our study aimed to describe and assess the impact of legal aspects on dentists' practices during the COVID-19 pandemic. The objectives were: (a) to explore dentists' and dental managers' knowledge about dental liability during the COVID-19 pandemic; (b) to inquire about the respondents' [...]. [Read more.](#)

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**An Empirical Study of the Factors Influencing User Behavior of Fitness Software in College Students Based on UTAUT (/2071-1050/14/15/9720)**

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*Sustainability* **2022**, *14*(15), 9720; <https://doi.org/10.3390/su14159720> (<https://doi.org/10.3390/su14159720>) - 07 Aug 2022

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**Abstract** Only one decade since the emergence of the first sports-related mobile app, although there is a large amount of fitness software, the quality is uneven, and some people still have concerns about whether to use fitness software. College students account for a large [...] [Read more.](#)

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**Abuse and Wellbeing of Long-Term Care Workers in the COVID-19 Era: Evidence from the UK** ([/2071-1050/14/15/9620](#))

by [Eirini-Christina Saloniki](#) (<https://sciprofiles.com/profile/author/OERFTHBnMzc2M0pzQIVIVGpDZWpUciVuSUIkK1pZWUxMRUIHdIF3MFN5az0=>),

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*Sustainability* **2022**, *14*(15), 9620; <https://doi.org/10.3390/su14159620> (<https://doi.org/10.3390/su14159620>) - 04 Aug 2022

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**Abstract** The UK long-term care workforce has endured difficult working conditions for many years. During the pandemic, the sector faced unprecedented challenges, which further exacerbated these conditions and brought concerns about workplace abuse and violence. Such experiences can vary by personal and work characteristics, [...] [Read more.](#)

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**Measuring the Self-Efficacy of Health Professionals for Practicing Hand Hygiene and Using Gloves: Development and Validation of an Instrument** ([/2071-1050/14/15/9486](#))

by [Eliana Borges Silva Pereira](#) (<https://sciprofiles.com/profile/author/SXJiNnZlBEdlRjI2aVM3ekFvd0JteHFSTTJ5OG50SGZpaDBtcmZsTDJ2VT0=>),

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[Evandro Watanabe](#) (<https://sciprofiles.com/profile/1157931>),

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[Alvaro Francisco Lopes de Sousa](#) (<https://sciprofiles.com/profile/421543>)

*Sustainability* **2022**, *14*(15), 9486; <https://doi.org/10.3390/su14159486> (<https://doi.org/10.3390/su14159486>) - 02 Aug 2022

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**Abstract** Adherence to hand hygiene procedures and the use of gloves is a problem that deserves to be analyzed from an individual and organizational point of view. For this, we aim to develop and validate an instrument for measuring the self-efficacy of health professionals [...] [Read more.](#)

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**Spatial Expansion and Correlation of Urban Agglomeration in the Yellow River Basin Based on Multi-Source Nighttime Light Data** ([/2071-1050/14/15/9359](#))

by [Zhongwu Zhang](#) (<https://sciprofiles.com/profile/1532292>) and

[Yuanfang Liu](#) (<https://sciprofiles.com/profile/author/K0VvdTVRvUdIRXo5VF10ZTlSbUZFUmRVaDR2aWYrZm1DYzJkeU1qNl0MD0=>)

*Sustainability* **2022**, *14*(15), 9359; <https://doi.org/10.3390/su14159359> (<https://doi.org/10.3390/su14159359>) - 30 Jul 2022

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**Abstract** The Chinese government proposed a major national strategy for ecological protection and high-quality development in the Yellow River Basin. The Framework of the Plan for Ecological Protection and High-Quality Development of the Yellow River Basin proposes building a dynamic development pattern characterized by [...] [Read more.](#)

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*Sustainability* **2022**, *14*(15), 9332; <https://doi.org/10.3390/su14159332> (<https://doi.org/10.3390/su14159332>) - 29 Jul 2022

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**Abstract** Almost two years after the beginning of the SARS-CoV-2 pandemic, the knowledge of which in the infectious and therapeutic spheres is constantly evolving, attention paid to the medicolegal aspects linked to this emergency phenomenon has mainly focused on the liability implications falling on [...] [Read more.](#)

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**Revisiting the Impact of Clean Water and Improved Sanitation on Child Mortality: Implications for Sustainable Development Goals (/2071-1050/14/15/9244)**

by  [Anh M. Ly](https://sciprofiles.com/profile/2306123) (<https://sciprofiles.com/profile/2306123>),  [Hayley Pierce](https://sciprofiles.com/profile/1708756) (<https://sciprofiles.com/profile/1708756>) and  [Michael R. Cope](https://sciprofiles.com/profile/278885) (<https://sciprofiles.com/profile/278885>)

*Sustainability* **2022**, *14*(15), 9244; <https://doi.org/10.3390/su14159244> (<https://doi.org/10.3390/su14159244>) - 28 Jul 2022  
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**Abstract** Using Demographic and Health Surveys, this study examined the impact of clean water and improved sanitation on child mortality in five South Asian countries. South Asia is the region with the second most public health crises due to the utilization of unsafe water [...] [Read more.](#)

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**Relevant Variables in the Stimulation of Psychological Well-Being in Physical Education: A Systematic Review (/2071-1050/14/15/9231)**

by  [Raquel Pérez-Ordás](https://sciprofiles.com/profile/1046636) (<https://sciprofiles.com/profile/1046636>),  [Javier Piñero-Cossio](https://sciprofiles.com/profile/1419512) (<https://sciprofiles.com/profile/1419512>),  [Óscar Díaz-Chica](https://sciprofiles.com/profile/2300635) (<https://sciprofiles.com/profile/2300635>) and  [Ester Ayllón-Negrillo](https://sciprofiles.com/profile/607994) (<https://sciprofiles.com/profile/607994>)

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**Abstract** This study is based on the need to explore the different strategies and interventions that seek to develop psychological well-being (PW) in scholars (children and adolescents aged 9–19 years) through physical education and school sports by bearing in mind other variables that can [...] [Read more.](#)

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**Assessment and Prediction of Grain Production Considering Climate Change and Air Pollution in China (/2071-1050/14/15/9088)**

by  [Hengli Wang](https://sciprofiles.com/profile/2204657) (<https://sciprofiles.com/profile/2204657>),  [Hong Liu](https://sciprofiles.com/profile/2137050) (<https://sciprofiles.com/profile/2137050>) and  [Rui Ma](https://sciprofiles.com/profile/2196877) (<https://sciprofiles.com/profile/2196877>)

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**Abstract** This study examines the spatial and temporal impacts of climate change on grain production in China. This is achieved by establishing a spatial error model consisting of four indicators: the climate, air pollution, economic behavior, and agricultural technology, covering 31 provinces in China [...] [Read more.](#)

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**Issue-Based Complexity: Digitally Supported Negotiation in Geodesign Linking Planning and Implementation (/2071-1050/14/15/9073)**

by  [Shlomit Flint Ashery](https://sciprofiles.com/profile/2282599) (<https://sciprofiles.com/profile/2282599>) and  [Carl Steinitz](https://sciprofiles.com/profile/112207) (<https://sciprofiles.com/profile/112207>)

*Sustainability* **2022**, *14*(15), 9073; <https://doi.org/10.3390/su14159073> (<https://doi.org/10.3390/su14159073>) - 25 Jul 2022  
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**Abstract** Research regarding the complex issues in planning negotiation is sparse. This article aims to shed light on the characteristics of “the negotiation issue” in planning and how to deal with negotiation-related complexity towards planning implementation. It conceptualizes processes of negotiation that are represented/implemented [...] [Read more](#).

(This article belongs to the Special Issue [Environmental Sustainability, Urban Planning, and Quality of Urban Life](#) ([/journal/sustainability/special\\_issues/Environmental\\_Sustainability\\_Urban\\_Planning\\_Quality\\_of\\_Urban\\_Life](#)))

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**Knowledge, Attitude and Practice towards the Use of Over-the-Counter Medicines: An Online Survey among Bruneian Adults amid the COVID-19 Pandemic** ([/2071-1050/14/15/9033](#))

by

👤 [Faiqah Batrisyia Syaza Bahrin Dzulkharnain](https://sciprofiles.com/profile/author/dndhVkdadml6aTAzeHJfCIRTYVlaciZVbkRpNDBjTzZQWEVOOG13M2xHTT0=) (<https://sciprofiles.com/profile/author/dndhVkdadml6aTAzeHJfCIRTYVlaciZVbkRpNDBjTzZQWEVOOG13M2xHTT0=>),

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*Sustainability* **2022**, *14*(15), 9033; <https://doi.org/10.3390/su14159033> (<https://doi.org/10.3390/su14159033>) - 23 Jul 2022

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**Abstract** Globally, self-medication has increased, where 25% of adults use OTC medicines. This research is intended to assess the knowledge, attitude and practice regarding OTC medicines among adults in Brunei Darussalam. An online cross-sectional survey was performed using a questionnaire adapted from similar research [...] [Read more](#).

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**Urbanization and Habitat Characteristics Associated with the Occurrence of Peste des Petits Ruminants in Africa** ([/2071-1050/14/15/8978](#))

by 👤 [Shanyong Zhang](https://sciprofiles.com/profile/2344700) (<https://sciprofiles.com/profile/2344700>), 👤 [Ning Li](https://sciprofiles.com/profile/2064767) (<https://sciprofiles.com/profile/2064767>),

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👤 [Shenglai Yin](https://sciprofiles.com/profile/2107604) (<https://sciprofiles.com/profile/2107604>)

*Sustainability* **2022**, *14*(15), 8978; <https://doi.org/10.3390/su14158978> (<https://doi.org/10.3390/su14158978>) - 22 Jul 2022

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**Abstract** As a highly contagious viral disease, peste des petits ruminants (PPR) can cause severe socio-economic impacts in developing countries due to its threat to sheep and goat production. Previous studies have identified several risk factors for PPR at the individual or herd level. [...] [Read more](#).

(This article belongs to the Special Issue [Land Use Change and Infectious Diseases](#) ([/journal/sustainability/special\\_issues/Land\\_Use\\_Change\\_and\\_Infectious\\_Diseases](#)))

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**Spatial Analysis of Mosquito-Borne Diseases in Europe: A Scoping Review** ([/2071-1050/14/15/8975](#))

by 👤 [Sandra Moutinho](https://sciprofiles.com/profile/2223650) (<https://sciprofiles.com/profile/2223650>), 👤 [Jorge Rocha](https://sciprofiles.com/profile/281435) (<https://sciprofiles.com/profile/281435>),

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


**Abstract** Mosquito-borne infections are increasing in endemic areas and previously unaffected regions. In 2020, the notification rate for Dengue was 0.5 cases per 100,000



population, and for Chikungunya <math>0.1/100,000</math>. In 2019, the rate for Malaria was  $1.3/100,000</math>, and for West Nile Virus,  $0.1/100,000</math>. Spatial [...] [Read more.](#)$$

(This article belongs to the Special Issue [Land Use Change and Infectious Diseases \(/journal/sustainability/special\\_issues/land\\_use\\_change\\_and\\_infectious\\_diseases\)](#))

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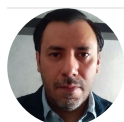
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## Article

# Knowledge, Attitude and Practice towards the Use of Over-the-Counter Medicines: An Online Survey among Bruneian Adults amid the COVID-19 Pandemic

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**Abstract:** Globally, self-medication has increased, where 25% of adults use OTC medicines. This research is intended to assess the knowledge, attitude and practice regarding OTC medicines among adults in Brunei Darussalam. An online cross-sectional survey was performed using a questionnaire adapted from similar research conducted among students in Brunei Darussalam. A total of 364 responses were collected, where the median age of the study participants was 23 years. The mean knowledge score was 7.3 out of 9, with most respondents (77.7%) having good knowledge of OTC medicines. Almost all (92.9%) showed a positive attitude towards OTC use. A statistically significant difference ( $p \leq 0.05$ ) was observed in attitude scores between age groups and education levels. Most of the study participants (88.2%) have practiced self-medication with OTC medicines, mainly due to their easy accessibility (79.4%). A small number practiced improper habits, such as consuming more than the recommended dose (6.0%) and not checking the expiry date (0.5%). The practice of self-medicating with OTC medicines can be advantageous when patients fully know the medications and nature of their disease. Knowledge of proper OTC medicine use among adults in Brunei Darussalam is essential to avoid improper user practices and potential health hazards associated with the misuse of medications.

**Keywords:** health system access; human medicine; health care; essential medicines access; medicine; health outcomes self-medication



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## 1. Introduction

According to the United States Food and Drug Administration (FDA) (2018), over-the-counter (OTC) medicines are medications that do not require a prescription from a healthcare professional but can be obtained off the shelf from places such as retail pharmacies and grocery stores. Purchasing OTC medicines without consulting healthcare personnel can be considered as self-medication [1,2]. Globally, self-medication to treat different ailments has been reported to increase, where 25% of people around the world self-medicate with OTC medicines [3]. OTC medicines can help relieve symptoms including fever, minor pain, constipation, sore throat and coughs. The practice of self-medicating with OTC medicines can be advantageous when patients have full knowledge of the medicines and the nature of their disease [2]. However, a lack of knowledge while self-medicating with OTC medicines can potentially lead to improper user practices and health hazards associated with the misuse of medications, e.g., experiencing adverse side effects and allergic reactions, drug interactions and even overdose [4].



Self-medication does not just involve taking OTC drugs; it can also mean sharing medications with other people or taking readily available medicines in their homes [2]. Nevertheless, in different studies, the majority prefer getting OTC drugs to treat minor ailments. For example, in several studies from Iran, Ethiopia, India and Nigeria involving self-medication among pharmacy or medical students, the source of the medicines used in self-medication were OTC medicines from medical stores or pharmacies [5–8]. Even healthcare workers from a study in Nigeria prefer self-medicating with OTC [9]. In a different study in India involving patients from a dental hospital, all participants bought their self-medication from medical stores or pharmacies [10]. These findings show that most studies conclude that using OTC medicines is the preferable way of self-medicating. The continuing use of OTC drugs has been cited as a significant barrier to the effective and safe use of medications [2].

Knowledge of OTC medicines is crucial as they could help avoid health hazards and increase the effectiveness of the medications. According to a study among college students in Kuwait, almost half of them purposely changed the dosage of their medications during their self-treatment course [11]. The consequences of incorrect dosage include greater resistance to some drugs and further deterioration in health status. Another study also states that the majority were unaware that OTC medicines are capable of causing side effects and interactions [3,12]. In a study by Saeed et al. (2014) [2], the data regarding the reported cases of self-medication among university students revealed that some participants were not knowledgeable about the names and drug classes of the medications they were taking. In a different study involving students in North India, half of the participants had no knowledge about the medicines [13]. This shows that the awareness regarding the dangers and misuse of OTC medicines among the participants in the different studies was very little.

Although several studies from varying countries have assessed the knowledge, attitude and practice of self-medication among students, to the researchers' best knowledge, no such study regarding the knowledge, attitude and practice of OTC medicines among adults in Brunei Darussalam is available. However, a study on the same topic among students has been done. There are still not many publications that address the issue of self-medication with OTC medicines among adults. Despite the fact that a similar study among students in Brunei Darussalam exists, it is still important to extend the study to the community [14]. According to a study in India, almost all the adults use OTC medicines to treat minor ailments [15]. From another study in Saudi Arabia, the misuse of OTC drugs among adults was high. Other than that, adults could consist of pregnant women, parents or guardians and elderly patients (60 years old and above). Knowledge regarding the dangers of misuse of OTC medicines is essential for adults. It could help prevent any potential health hazards and help in raising the awareness of misuse of OTC medicines in the community [16].

This study determined the perception and level of knowledge regarding OTC medicines and determined the effect of sociodemographic factors on the knowledge and attitude of OTC medicines among adults in Brunei Darussalam. This study also targeted to provide further insight regarding the issue of misuse of OTC medicines to fill the information gap of public health policy makers. The study was conducted amid the third wave of the COVID-19 pandemic in Brunei Darussalam with restricted travelling and outdoor activities, hence the findings could capture the views on OTC medicines among adults in Brunei Darussalam when the pandemic was at its peak, with a seven-day average of 4200 reported new COVID-19 cases.

## 2. Materials and Methods

### 2.1. Study Design and Distribution

This study was an online cross-sectional survey conducted from March 2022 until April 2022 involving adults in Brunei Darussalam. The eligibility criteria for the study were as follows: (i) an adult (18 to 65 years old), (ii) Bruneian citizens or permanent residents of

Brunei Darussalam and (iii) adults who were willing to participate voluntarily. Exclusion criteria included temporary residents of Brunei Darussalam.

The questionnaire, along with the participant information sheet and consent form, was distributed online by sharing the link to the survey and poster via social media and sent through the Universiti Brunei Darussalam (UBD) email to staff and students. The survey was mainly shared through WhatsApp, Instagram and Twitter. It was first shared with relatives and friends of the investigator, and later, they helped share the questionnaire through their means and their social media. It was distributed to several WhatsApp groups with different age ranges, e.g., family groups, work groups, etc. The questionnaire was open for one month, from March 2022 to April 2022. This was during the period of COVID-19 pandemic third wave with a strict border control and preventive standard operating procedure.

## 2.2. Study Instrument

The questionnaire used for this research project was adjusted from a survey conducted in Brunei Darussalam by Abdullah et al. (2022) [14] that explored the knowledge, attitude and practice of OTC medicines among college and university students in Brunei Darussalam. This questionnaire is preferred for the study because it contains a relevant topic that covers the use of OTC medicines. The questionnaire was provided in both English and Malay, as these are the two main languages used in Brunei Darussalam. Pilot testing of the questionnaire was already conducted by the study mentioned above which demonstrated good face and content validity.

The pilot testing, which involved face validity and pre-testing, was conducted by Abdullah et al. (2022) [14] to ensure the questions were suitable for the local setting. The face validity that involved assessing the readability, length and relevance of the online questionnaire was done by a pharmacist, a biostatistics lecturer and a physician from PAPRSB Institute of Health Sciences, Universiti Brunei Darussalam. Pre-testing was also conducted, where 38 students were involved. The internal consistency of the final questionnaire was determined using Cronbach's alpha coefficient. Cronbach's alpha values for the knowledge, attitude and practice sections were 0.74, 0.73 and 0.73, respectively [14].

The online questionnaire contained 4 sections with a total of 37 questions. There were 6 questions on sociodemographic data, which included gender, age, nationality, race, highest degree or level of education completed and monthly household income. It also consisted of 9 questions on knowledge, 8 questions on attitude and 14 questions on practice. The sections on knowledge and practice consisted of basic statements and general questions, while a five-point Likert scale of agreement was used in the attitude section.

For the knowledge section, correct responses were scored as one mark, while incorrect responses and "I do not know" were scored as zero. The total knowledge scores ranged from zero to nine, which were then categorized into "Good" ( $\geq 7$  correct answers), "Moderate" (4 to 6 correct answers) and "Poor" ( $< 4$  correct answers). For the attitude section, a score of 1 was given to strongly disagree, 2 to disagree, 3 to neither agree nor disagree, 4 to agree and 5 to strongly agree. The positive and negative attitude depends on the total attitude score, with a 20 and above considered a positive attitude [14].

## 2.3. Data Collation and Analysis

The data collected from Google Forms was exported to Microsoft Excel. All the data were statistically analysed using RStudio software and Microsoft Excel. The data collected were summarised using descriptive statistics for the frequencies, percentages, medians, means and standard deviation. Chi-square and Fisher's exact tests were used to analyse the association between variables of knowledge, attitude and sociodemographic characteristics. Fisher's exact test was preferred over the Chi-square test for data with 20% or more of the cells in the table with expected values of less than 5 or if any expected count was less than 2. RStudio version 2022.02.1 + 461 "Prairie Trillium" Release and Microsoft Excel version 16.60 were used for data analysis. A  $p$  value of  $< 0.05$  was considered statistically significant.

#### 2.4. Ethical Approval

Full ethical approval was obtained in March 2022 from the PAPRSB Institute of Health Sciences Research Ethics Committee (IHSREC), Universiti Brunei Darussalam (UBD/PAPRSBIH-SREC/2021/68). The data collected remained anonymous, so no participant-identifying information such as names and identification card numbers were collected. Confidentiality was also strictly maintained. Participants were asked to tick an option at the beginning of the online survey if they agreed to participate. In addition, participation was on a voluntary basis where the respondents had their own choice whether they chose to take part in the online questionnaire or not.

### 3. Results

#### 3.1. Demographic Data

A total of 364 responses were collected, where the median age of the study participants was 23 years (SD = 11.1, range between 18 and 62 years). The other sociodemographic characteristics of the study sample are displayed in Table 1 below.

**Table 1.** Sociodemographic characteristics of study sample ( $n = 364$ ).

Variable	<i>n</i> (%)
<b>Gender</b>	
Male	80 (22.0)
Female	284 (78.0)
<b>Nationality</b>	
Bruneian	353 (97.0)
Permanent Resident	11 (3.0)
<b>Level of Education *</b>	
Secondary education	119 (32.7)
Post-secondary non-Tertiary education	59 (16.2)
Tertiary education	186 (51.1)
<b>Household Income per month **</b>	
BND 900–5000	56 (46.7)
BND 5001–10,000	53 (44.2)
More than BND 10,000	11 (9.2)

\* Secondary education includes O Level, A Level and International Baccalaureate (IB), post-secondary non-tertiary education consists of Foundation, Certificate and Diploma qualifications while tertiary education includes Bachelor's degree, Master's degree and Doctor of Philosophy (PhD). \*\* BND: Brunei Dollar (according to currency exchange rate dated 4 April 2022: 1 BND = 0.73 USD).

#### 3.2. Knowledge and Attitudes towards the Use of OTC Medicines

The majority of the respondents (77.7%) obtained a cumulative “Knowledge Score” of 7 to 9, indicating good knowledge of OTC medicine use. The average percentage of correct responses was 80.9%. The mean total knowledge score is 7.3 out of 9 (Table 2). In terms of “Attitude Score”, most of the study participants (92.9%) showed a positive attitude towards OTC medicine use (Table 3). The mean attitude score of the respondents was 28.6 out of 40, where 8 was the lowest score and 40 was the highest score. More than half agreed that they should take OTC medicines when they have a minor illness (61.1%) and that pregnant and breastfeeding women may use OTC medicines with caution (56.6%). A majority agreed that OTC medicines are easily obtained (82.7%) and that self-medicating with OTC medicines is safe when used properly (84.7%). Respondents' attitudes towards OTC medicine use differed by age groups of below 40 years and 40 years and above ( $p \leq 0.05$ ), but not in nationality or monthly household income.

**Table 2.** Responses to knowledge of over-the-counter (OTC) medications ( $n = 364$ ).

Statement	Correct		Incorrect		Do Not Know	
	<i>n</i>	(%)	<i>n</i>	(%)	<i>n</i>	(%)
OTC medicines are medicines you can buy without a prescription.	314	(86.3)	14	(3.8)	36	(9.9)
We are allowed to use OTC medicines to improve our health.	327	(89.8)	6	(1.6)	31	(8.5)
OTC medicines are used to treat, prevent or relieve major illnesses (brain and heart diseases).	253	(69.5)	38	(10.4)	73	(20.1)
OTC medicines are used to treat, prevent or relieve minor illnesses (fever and mild headache).	336	(92.3)	2	(0.5)	26	(7.1)
Interactions involving OTC medicines can sometimes produce unwanted results or make medicines less effective.	247	(67.9)	22	(6.0)	95	(26.1)
Some OTC medicines can also interact with foods and beverages and health conditions (high blood sugar and high blood pressure).	251	(69.0)	13	(3.6)	100	(27.5)
Pregnant and breast-feeding women should be extra cautious while using OTC drugs.	317	(87.1)	5	(1.4)	42	(11.5)
Painkiller is an example of an OTC medicine.	312	(85.7)	23	(6.3)	29	(8.0)
Paracetamol (such as Panadol) is safe and effective when used correctly, but taking too much can lead to liver damage.	292	(80.2)	6	(1.6)	66	(18.1)

**Table 3.** Attitudes of respondents to the use of OTC medicines ( $n = 364$ ).

Statement	<i>n</i>	(%)
<b>Using OTC medicines as self-medication is safe when you use them correctly.</b>		
Strongly agree	172	(47.3)
Agree	136	(37.4)
Neither agree nor disagree	31	(8.5)
Disagree	3	(0.8)
Strongly disagree	22	(6.0)
<b>OTC medicines are convenient to obtain and use.</b>		
Strongly agree	161	(44.2)
Agree	141	(38.7)
Neither agree nor disagree	34	(9.3)
Disagree	6	(1.6)
Strongly disagree	22	(6.0)
<b>OTC medicines can be used in pregnancy and breastfeeding but with caution unless stated on the label to avoid.</b>		
Strongly agree	63	(17.3)
Agree	143	(39.3)
Neither agree nor disagree	97	(26.6)
Disagree	35	(9.6)
Strongly disagree	26	(7.1)

Table 3. Cont.

Statement	<i>n</i>	(%)
<b>I should take OTC medicines when I have a minor illness.</b>		
Strongly agree	55	(15.1)
Agree	167	(45.9)
Neither agree nor disagree	94	(25.8)
Disagree	30	(8.2)
Strongly disagree	18	(4.9)
<b>OTC medicines are safe, but I would seek a pharmacist's advice if I am not sure about my minor illness and which is suitable for it.</b>		
Strongly agree	168	(46.2)
Agree	122	(33.5)
Neither agree nor disagree	40	(11.0)
Disagree	10	(2.7)
Strongly disagree	24	(6.6)

In this study, no significant differences were observed when comparing knowledge scores among those with different demographic characteristics. On the contrary, there was a statistically significant difference in attitude scores between academic degree levels ( $p \leq 0.05$ ), as shown in Table 4.

Table 4. Association of sociodemographic characteristics with level of “Knowledge Score” and “Attitude Score” ( $n = 364$ ).

Characteristics	Good <sup>1</sup>		Moderate <sup>2</sup>		Poor <sup>3</sup>		<i>p</i> Value	
	<i>n</i>	(%)	<i>n</i>	(%)	<i>n</i>	(%)	<i>n</i>	(%)
<b>Knowledge Score <sup>1</sup></b>								
<b>Gender</b>								
Male	59	(73.8)	12	(15.0)	9	(11.3)	0.086 <sup>b</sup>	
Female	224	(78.9)	47	(16.6)	13	(4.6)		
<b>Age group</b>								
Below 40 years	231	(79.7)	42	(14.5)	17	(5.9)	0.186 <sup>b</sup>	
40 years and above	52	(70.3)	17	(23.0)	5	(6.8)		
<b>Level of Education</b>								
Secondary Education	95	(79.8)	16	(13.5)	8	(6.7)	0.250 <sup>b</sup>	
Post-secondary Non-tertiary Education	40	(67.8)	13	(22.0)	6	(10.2)		
Tertiary Education	148	(79.6)	30	(16.1)	8	(4.3)		
<b>Household Income per Month</b>								
Less than BND 5000	31	(73.8)	7	(16.7)	4	(9.5)	0.502 <sup>a</sup>	
BND 5000–10,000	54	(80.6)	11	(16.4)	2	(3.0)		
More than BND 10,000	8	(72.7)	3	(27.3)	0			
<b>Attitude Score <sup>4</sup></b>								
<b>Gender</b>								
Male	76	(95.0)	4	(5.0)	0.399 <sup>b</sup>			
Female	262	(92.3)	22	(7.8)				
<b>Age group</b>								
Below 40 years	274	(94.5)	16	(5.5)	0.017 <sup>b*</sup>			
40 years and above	64	(86.5)	10	(13.5)				



Table 4. Cont.

Characteristics	Good <sup>1</sup>	Moderate <sup>2</sup>	Poor <sup>3</sup>	<i>p</i> Value	
<b>Nationality</b>					
Bruneian	328	(92.9)	25	(7.1)	0.563 <sup>a</sup>
Permanent Resident	10	(90.9)	1	(9.1)	
<b>Level of Education</b>					
Secondary Education	112	(94.1)	7	(5.9)	0.030 <sup>b*</sup>
Post-secondary Non-tertiary Education	50	(84.8)	9	(15.3)	
Tertiary Education	176	(94.6)	10	(5.4)	
<b>Household Income per Month</b>					
Less than BND 5000	40	(95.2)	2	(4.8)	0.753 <sup>a</sup>
BND 5000–10,000	62	(92.5)	5	(7.5)	
More than BND 10,000	10	(90.9)	1	(9.1)	

<sup>a</sup> Fisher's exact test. <sup>b</sup> Chi-square test for independence. \* Statistically significant *p* value. <sup>1</sup> Good = 7–9 marks; <sup>2</sup> Moderate = 4–6 marks; <sup>3</sup> Poor = < 4 marks. <sup>4</sup> Positive attitude = score of 20 and above; Negative attitude = score of below 20.

### 3.3. Respondents' Practices Regarding the Use of OTC Medicines

A large number of the study participants (88.2%) have practiced self-medication with OTC medicines, and half of the respondents (50.3%) normally consume them when they experience manageable or minor symptoms. A majority of them (79.4%) use OTC medicines due to the convenience and easy accessibility (Table 5). When using OTC medicines, more than half (56.9%) consult with their family members beforehand. They also get information from the internet (51.1%), pharmacists (41.8%), doctors (41.8%), friends (37.6%), patient information leaflets (18.4%) and social media (13.7%) (Figure 1).

Table 5. Respondents' actions on the use of OTC medicine (*n* = 364).

Statements	<i>n</i>	(%)
<b>Have you ever practiced self-medication with OTC medicine(s)?</b>		
Yes	321	(88.2)
No	43	(11.8)
<b>When do you usually consume OTC medicine(s)?</b>		
Symptoms are minor or manageable	183	(50.3)
Whenever I feel sick	88	(24.2)
Whenever I cannot visit a doctor	45	(12.4)
When pain or discomfort is unbearable	8	(2.2)
<b>Common reason(s) for using OTC medicines is:</b>		
Time-saving	228	(62.6)
Low cost	150	(41.2)
Safe and well tolerable	128	(35.2)
Easy accessibility (access to OTC products)	289	(79.4)
Effectiveness	3	(0.8)
<b>Have you experienced adverse effects from the OTC medicine(s)?</b>		
Yes	24	(6.6)
No	246	(67.6)
Do not know	51	(14.0)
Have never self-medicated with OTC medicine	43	(11.8)

Table 5. Cont.

Statements	<i>n</i>	(%)
<b>Have you ever taken more than the recommended dose for the OTC medicine(s)?</b>		
Yes	22	(6.0)
No	294	(80.8)
Do not know	5	(1.4)
Have never self-medicated with OTC medicine	43	(11.8)
<b>How often do you read the instructions on the medicine's label before use?</b>		
Always	203	(55.8)
Often	63	(17.3)
Sometimes	39	(10.7)
Rarely	15	(4.1)
Never	1	(0.3)
Have never self-medicated with OTC medicine	43	(11.8)
<b>How often do you check the expiry date?</b>		
Always	216	(59.3)
Often	51	(14.0)
Sometimes	41	(11.3)
Rarely	11	(3.0)
Never	2	(0.5)
Have never self-medicated with OTC medicine	43	(11.8)
<b>How often do you store your OTC medicine(s) in a cool, dry place or as stated on the label?</b>		
Always	218	(59.9)
Often	81	(22.3)
Sometimes	13	(3.6)
Rarely	8	(2.2)
Never	1	(0.3)
Have never self-medicated with OTC medicine	43	(11.8)
<b>If the OTC medicine showed a change in shape, colour, or odour, I would immediately discard the medicine.</b>		
Yes	309	(84.9)
No	4	(1.1)
Do not know	8	(2.2)
Have never self-medicated with OTC medicine	43	(11.8)

The most common ailment for self-medicating with OTC medicines among the adults was headache (81.9%). Other minor illnesses included fever (77.2%), cold and flu (75.8%), diarrhoea (37.9%), constipation (28.0%), allergies (25.8%), eczema (0.5%), sore throat (0.3%), eye infections (0.3%), rashes (0.3%) and mouth ulcers (0.3%). About half reported that they used OTC medicines for pain (53.6%), and some of the respondents specified the different kinds of pain they self-medicate for; gastric pain ( $n = 3$ , 0.8%), menstrual pain ( $n = 2$ , 0.5%), muscle pain ( $n = 2$ , 0.5%) and joint pain ( $n = 1$ , 0.3%) (Figure 2). The categories of OTC medicines mainly used were cold and flu drugs (66.8%), painkillers (64.3%), vitamins (59.3%), antipyretics (46.7%), antacids (31.3%), anti-allergy medications (16.8%), anti-diarrhoeal medications (13.5%), skin emollients like creams and ointments (1.4%) and mouth gel (0.3%) (Figure 3).

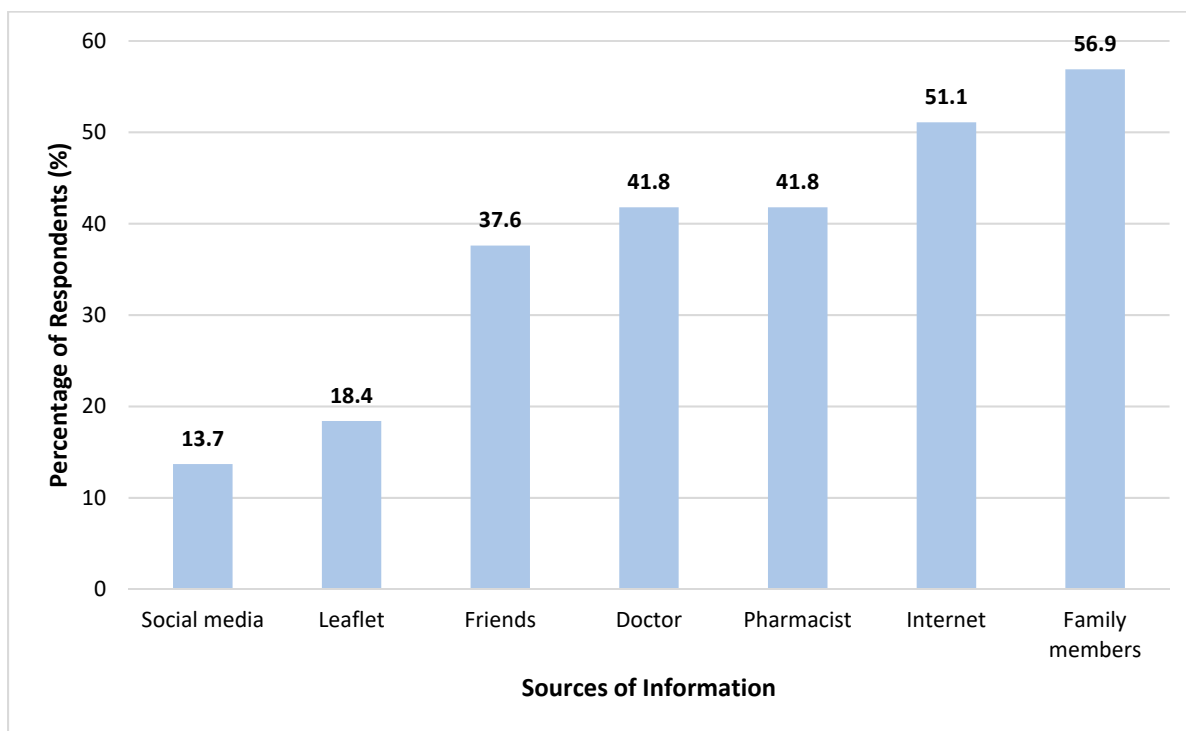


Figure 1. Sources of information considered by respondents before using OTC medicines.

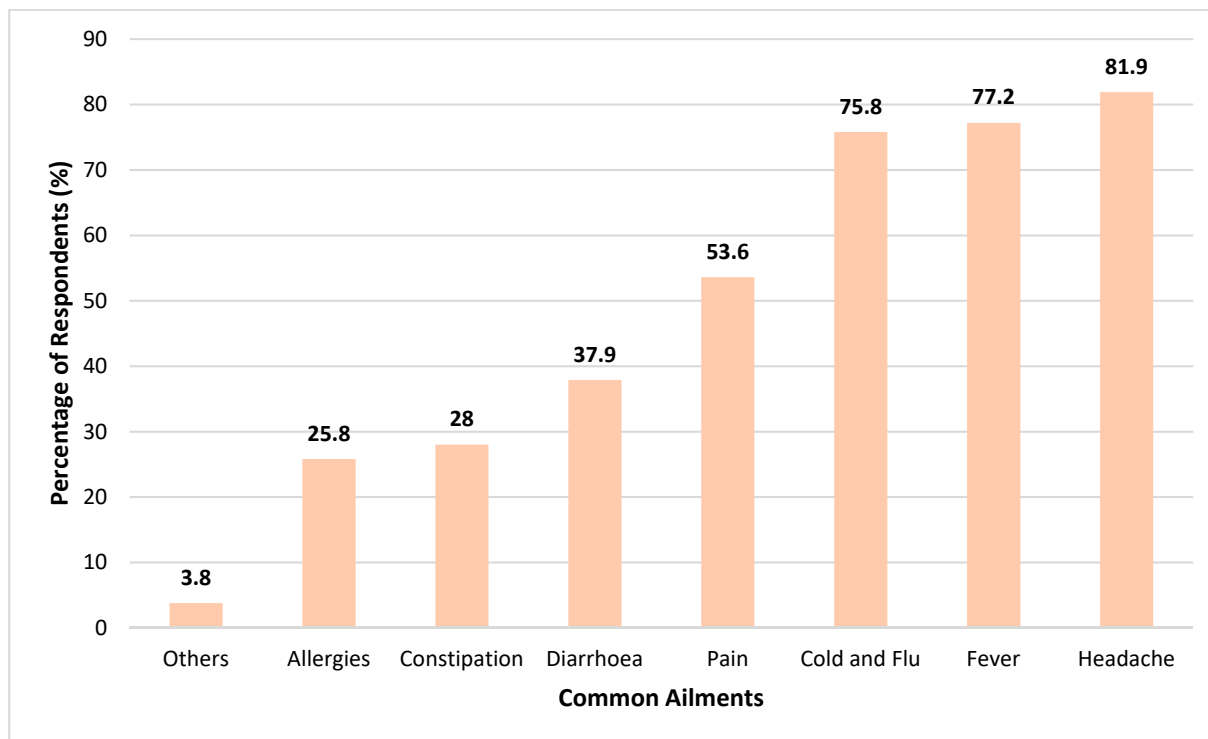
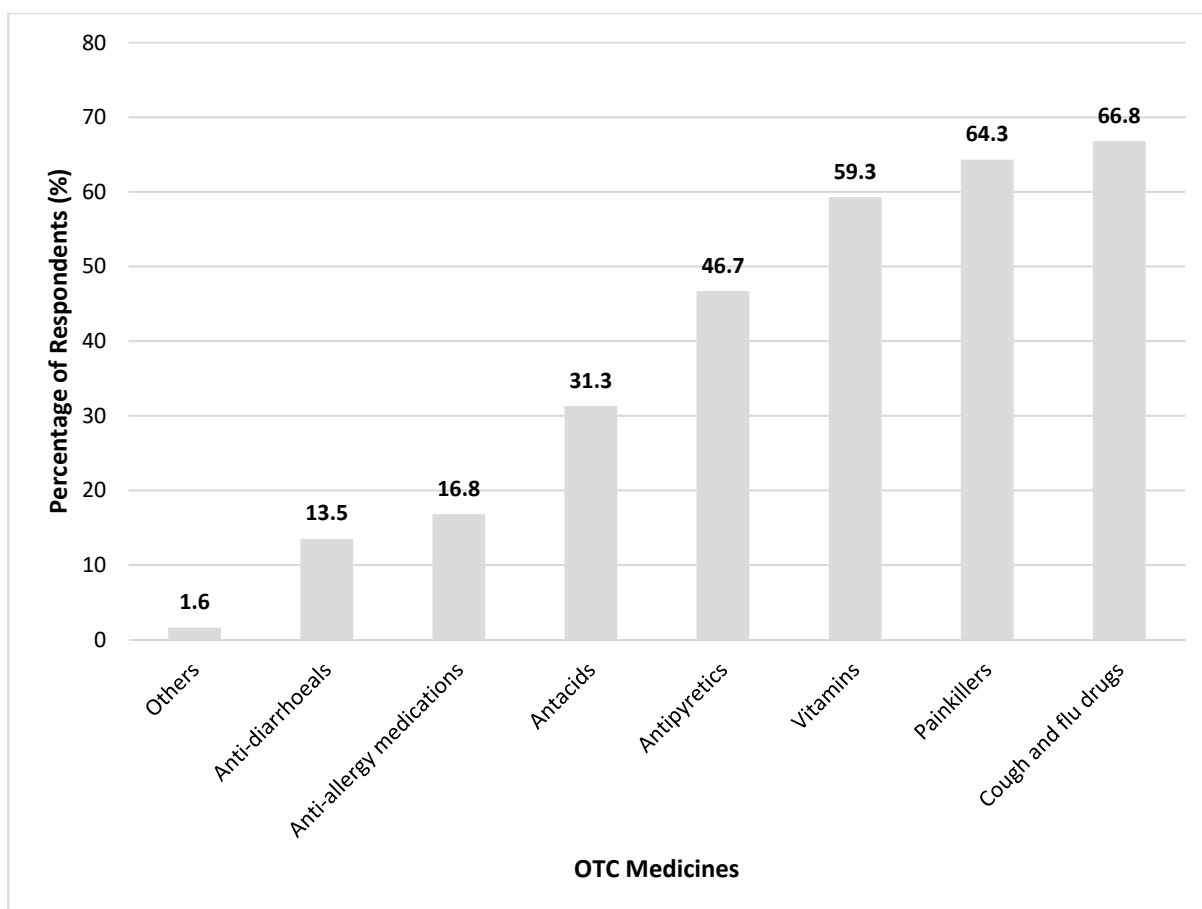


Figure 2. Respondents' common ailments for self-medication with OTC medicines.



**Figure 3.** Most-used OTC medicines by respondents for self-medication.

A small number of the respondents have experienced adverse effects from self-medicating with OTC medicines (6.6%), while 14% were unsure if they have. Out of the 24 participants that experienced side effects, a few have specified that they had an allergic reaction (16.7%), diarrhoea (12.5%), drowsiness (8.3%) and nausea (8.3%). Moreover, some mentioned what they did after they experienced the side effects, which included taking a rest (25.0%), stopping taking the medication (12.5%), going to the hospital (12.5%) and drinking a lot of water (4.2%).

In addition, a few of them have also consumed more than the recommended dose ( $n = 22$ , 6.0%). Most reported that they took more to get a better or stronger effect ( $n = 8$ , 36.4%) or a faster effect ( $n = 4$ , 18.2%). Other reasons included taking them by accident, e.g., misreading instructions or forgetting how many they have taken ( $n = 5$ , 22.7%), being unable to tolerate the pain ( $n = 3$ , 13.6%) and even a few cases of intentional overdose ( $n = 2$ , 9.1%).

Most of the study participants always read the instructions on the packaging or leaflet before use (55.8%), check the expiry date (59.3%) as well as store the OTC medicines in a cool and dry place (59.9%). A majority (84.9%) also reported that they would immediately throw away the medicine if it showed alterations in shape, colour and odour (Table 5).

#### 4. Discussion

The level of knowledge of OTC use in this present study was good for the majority, as more than half of the respondents (77.7%) obtained a good knowledge score of 7 to 9. Compared to a similar study by Abdullah et al. (2022) that assessed the knowledge, attitude and practice of OTC medicine among students from public institutions of higher learning in Brunei Darussalam, this study showed no observations of significant differences when comparing knowledge scores among those with different sociodemographic characteristics.

In the aforementioned study, a statistical significance was observed between knowledge of OTC medicines depending on the academic degree. It was reported that students studying health science-related courses had a higher percentage of good knowledge than students taking other courses [14]. Education seems to play a massive role in influencing self-medication, as demonstrated by one study conducted among 200 junior medical students in India [13]. Their findings reported that most medical students become more careful towards self-medication after learning about possible adverse drug reactions and drug resistance [13].

Another study among 170 medical and pharmacy students at the Zabol University of Medical Sciences, Iran states that self-medication is higher among students than in the general population due to more knowledge and better access to the Internet [17]. In a few studies among university students, the reason for the practice of self-medication could be due to self-confidence and knowledge learnt about the medications [3,5,17]. Having a good level of knowledge on self-medication with OTC medicines and understanding of the proper utilisation of medications may help improve one's health and may even reduce the economic burden on the government.

While considering the attitude toward self-medicating with OTC medicine, our study obtained results where a majority of the study participants (92.9%) showed a positive attitude towards OTC medicine use. This is supported by findings from a study from Saudi Arabia that assessed the knowledge, attitude, and practices on OTC oral analgesics among 440 female university students from medical/computer science or arts programmes. That particular study reported that a positive attitude towards the use of analgesics was more common among medical students [12]. In our study, we found a significant difference between the cumulative attitude score and age groups and level of education. A total of 338 respondents obtained a positive attitude score, where 81.1% were aged below 40 years, and about half (52.2%) have completed tertiary education. Interestingly, in comparison to the study among students in Brunei Darussalam, they did not observe any significant differences when comparing attitude scores among those with different demographic characteristics [14].

Regarding the practice of self-medicating with OTC medicines, most of our study participants (88.2%) have practiced self-medication. A study from North India also reported a high number of respondents (86.5%) who have practiced self-medication, despite the attitude of being against it [13]. Most of the respondents from this study (79.4%) use OTC medicines due to their convenience and easy accessibility. Sivasakthi et al. (2020) [18] state that most people prefer self-medication due to the health facilities being far from home, making OTC medicines convenient and easily accessible. Most studies have reported that the reasons for self-medication were often due to saving time and quick relief. However, in a cross-sectional study done among a rural population in India, no participant took OTC medicines due to the time-saving reason. Instead, a majority of them take them due to the low cost [19]. OTC medicines being low cost is also another common reason, according to the different studies [20,21]. On the other hand, only less than half of our study participants (41.2%) consume OTC medicines due to their low cost. This may be due to the different prices of OTC medicines in retail stores and pharmacies worldwide.

The most common ailments for self-medicating with OTC medicines were headache (81.9%), fever (77.2%) and cold and flu (75.8%). A study in Yemen also reported similar findings where most of the self-medication was to treat headaches, flus or colds followed by fevers [20]. According to other studies on self-medication, the most common ailments for practising self-medication were fever, headache, cough and the common cold, which is also in tandem with our findings [3,5,10,18]. About half of our respondents (53.6%) reported that they treat pain with OTC medicines. Pain is also one of the most common symptoms being self-treated using OTC medicines, and it can be of different nature [11,12,18,19]. A few have specified in our questionnaire the nature of their pain, including gastric pain, joint pain, muscle pain and menstrual pain. In two studies from Saudi Arabia, one of the most common indications for using OTC painkillers was dysmenorrhea [12,21].



In our study, from 364 study participants, we observed that 24 (6.6%) of them experienced side effects after consuming OTC medicines. Out of the 24 participants, a few have specified that they had an allergic reaction (16.7%), diarrhoea (12.5%), drowsiness (8.3%) and nausea (8.3%). A study from Kuwait reports a similar result where only a small number (14.2%) experienced adverse effects while self-medicating [11].

A majority of the respondents (80.8%) from our study have never taken over the recommended dose, but a small number (6%) have. The reasons for doing so were to get a better or stronger effect ( $n = 8$ , 36.4%), by accident which included misreading instructions or unaware or forgotten how many they have taken ( $n = 5$ , 22.7%), to get a faster effect ( $n = 4$ , 18.2%), the pain being unendurable ( $n = 3$ , 13.6%) and even intentional overdose ( $n = 2$ , 9.1%). Goyal et al. (2018) [19] also report that only 6% have consumed more than the recommended dose.

Another study reported more than half (52.9%) alter the dose of their medications [3]. These findings suggest that there is the presence of irrational usage and malpractices of OTC medicines, which may potentially lead to accidental drug poisoning and may increase the risk of health-threatening complications.

We found that most respondents read the instructions on the medicine's label or packaging and checked the expiry date before use. In the study by Abdullah et al. (2022) [14], only a small number of the participants rarely or never read the instructions on the medicine labels before taking it. However, in one study involving a rural population in India, only a few participants read the instructions on the medicines and always checked the expiry date before using them [19]. Interestingly, in a different study of another rural area in India, the majority of the people read the given information, but only less than half of them understand it completely [18]. This shows that general knowledge regarding medicines is required to grasp the information fully.

When adopted effectively and appropriately, self-medication with OTC medicines can be advantageous to both the patients and the healthcare system. It may help relieve minor illnesses and lessen treatment costs for patients. It can also reduce physician interaction time as well as waiting time in hospitals or clinics.

### *Limitations*

The results of this study should be interpreted while considering these limitations. Firstly, the main limitation of the study is the cross-sectional design, where the findings are determined by the participants' self-rated responses. Thus, inference and cause-effect are not achievable and response bias is likely to occur. The answers may also affect the knowledge scores if the respondents looked for answers through books or the internet. Secondly, recall bias could also potentially occur as the survey's practice section contained recall questions on OTC medicine use. Thirdly, the online questionnaire was shared and collected after only a month. This was due to the time constraint when conducting the research. Finally, there is an oversampling of females in our study and this could be due to the non-responsiveness of male adults. However, due to the large sample size and sharing the online questionnaires using social media that could reach out to larger audience, our findings presented the current pattern of knowledge and attitudes of Bruneian adult population.

### **5. Conclusions**

Generally, adults in Brunei Darussalam have a good level of knowledge and a positive attitude towards the use of OTC medicines. There are still some inappropriate habits and practices, especially concerning taking more than the recommended dose and not reading the label and packaging of the medication. However, only a small number were observed that showed these improper practices. Increased awareness and knowledge on the appropriate use of OTC medicines among adults in Brunei Darussalam is essential in preventing improper practices in OTC medicine use.

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Universities and research institutions in Switzerland



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Renewable Energy, Sustainability and the Environment

Environmental Science

Environmental Science (miscellaneous)  
Management, Monitoring, Policy and Law

Social Sciences

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**H-INDEX**

**109**



JOURNAL  
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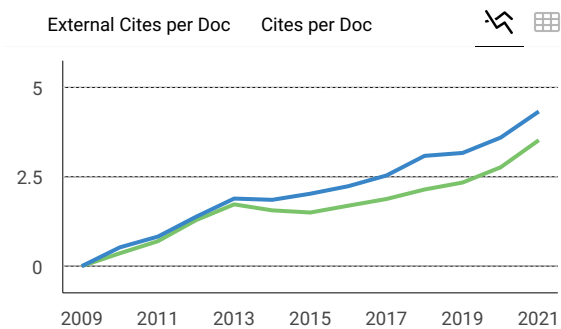
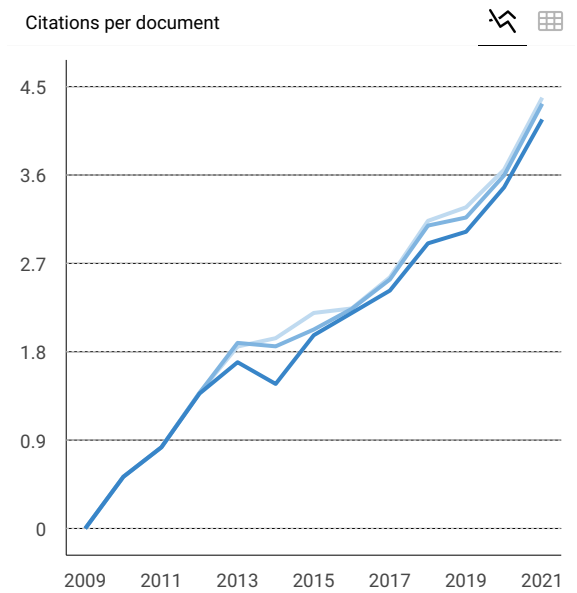
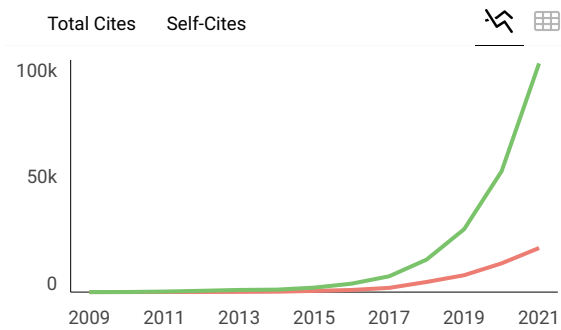
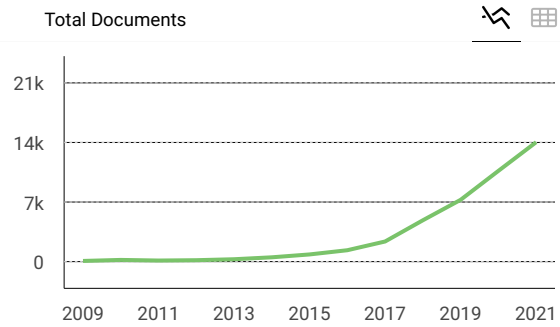
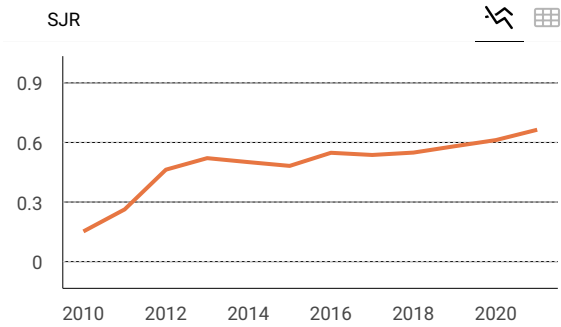


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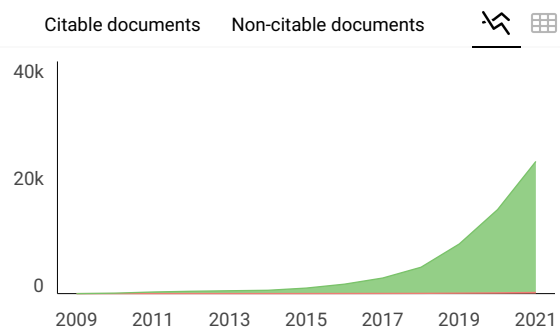
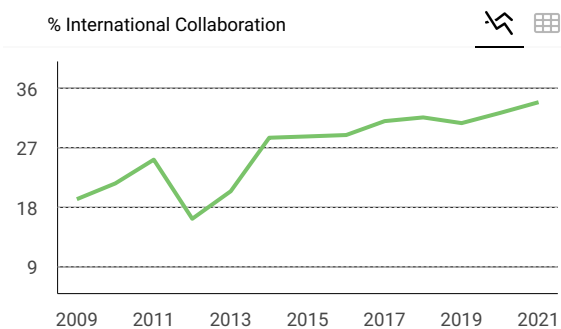


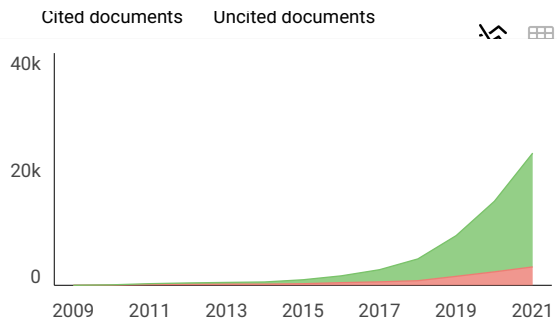
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**Sustainability**

Q1

Geography,  
Planning and  
Development

best quartile

**SJR 2021**

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**B Bara**

Is this journal still indexed by scopus?



**Melanie Ortiz**

SCImago Team

Dear Bara, thank you very much for your comment. We suggest you consult the Scopus database directly. Keep in mind that the SJR is a static image (the update is made one time per year) of a database (Scopus) which is changing every day.

The Scopus' update list can also be consulted here:

<https://www.elsevier.com/solutions/scopus/how-scopus-works/content>

Best Regards, SCImago Team

**K Krishnan s iyer**

is journals publication fee mentioned in scimagojr website?



**Melanie Ortiz**

SCImago Team

Dear Krishnan,  
Thank you for contacting us.  
We suggest you visit the journal's homepage or contact the journal's editorial staff , so they could inform you more deeply.  
Best Regards, SCImago Team

M **majid**

Dear Editors of Sustainability Journal  
Can I send my article entitled "Forecasting the transformation of the activity system of rural areas in the post-covid19 in Iran" to your Journal?

With best regards  
majid



**Nistoreanu**

You can send the article to  
[https://www.mdpi.com/journal/sustainability/special\\_issues/XL7769IG4N](https://www.mdpi.com/journal/sustainability/special_issues/XL7769IG4N)  
or  
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Success!



**Melanie Ortiz**

SCImago Team

Dear Majid,  
Thank you for contacting us.  
We are sorry to tell you that SCImago Journal & Country Rank is not a journal. SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus.  
We suggest you visit the journal's homepage (See submission/author guidelines) or contact the journal's editorial staff , so they could inform you more deeply.  
Best Regards, SCImago Team

D **Derartu Wodajo Sedata**

Dear sir can I sent a paper



**Melanie Ortiz**

SCImago Team

Dear Derartu, thank you very much for your comment, we suggest you look for the author's instructions/submission guidelines in the journal's website. Best Regards, SCImago Team

**K kamelia chaichi**

May I know why the website show coverage from 2009-2021? what about 2022?

Because according to the Scopus website it is Scopus till present.

Can you kindly update this part?

<https://www.scopus.com/sourceid/21100240100>



**Melanie Ortiz**

SCImago Team

Dear Kamelia,  
Thank you very much for your comment.  
All the metadata have been provided by Scopus /Elsevier in their last update sent to SCImago, including the Coverage's period data. SCImago is updated only once a year (latest update May 2022), after receiving the Scopus'annual update.  
For this reason, we always recommend to consult the Scopus database directly to see the current index status of a journal.  
Best Regards, SCImago Team

**M Muhammad Ali**

Hi i am Ali

I have a paper accepted in special issue related to sustainability in Manufacturing and 3D printing process . I want to know that my paper will be considered in Q1 category or not?



**Melanie Ortiz**

SCImago Team

Dear Muhammad,  
thank you for contacting us.  
All the articles published in a journal that has been listed in different categories and has



different quartile data inherit all the subject categories of the journal of the selected year.  
Best Regards, SCImago Team

A **Alice**

Dear, this journal it is Wos or Scopus?

Thank you.

Best regards



**Melanie Ortiz**

SCImago Team

Dear Alice,

Thank you for contacting us.

SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus. Unfortunately, we cannot help you with your request referring to the index status. We suggest you consult Scopus database (see the current status of the journal) or the mentioned database for further information.

Best Regards, SCImago Team

B **Bassam Dalal**

Dear sirs.

Could you please tell me the rating now of this journal in Scopus and Web of science?

Thank you very much.



**Melanie Ortiz**

SCImago Team

Dear Bassam,

Thank you for contacting us. Please check both databases for further information.

Best Regards, SCImago Team

N **Nouf Naser Al Tamimi**

Hello.

I would like to publish a paper

Is the journal still rating in Scopus (Q2) in 2021?

Thank you

**E Enzo Rainiero Ferrari Lagos**

Dear Nouf Naser Al Tamimi:

I am editor in this journal, I am taken a issues,

[https://www.mdpi.com/journal/sustainability/special\\_issues/The\\_Climate\\_Competence\\_in\\_Education](https://www.mdpi.com/journal/sustainability/special_issues/The_Climate_Competence_in_Education) You can publish with us.



**Melanie Ortiz**

SCImago Team

Dear Nouf,

Thank you very much for your comment.

All the metadata have been provided by Scopus /Elsevier in their last update sent to SCImago, including the Coverage's period data. The SJR for 2020 has been released on 17 May 2021. We suggest you consult the Scopus database directly SJR is a static image of Scopus, which is changing every day.

Best Regards, SCImago Team

**J Jame Bellata**

In category Energy Engineering and Power Technology, this journal is ranked 87 of 497 = 82.5%. Thus, it should be in quartile 1. Could you please revise?

Thanks



**Melanie Ortiz**

SCImago Team

Dear Jame,

Thank you for contacting us.

The distribution by Quartiles cannot be considered over the journals' total amount within a Category. In the case of SCImago, the distribution has to be considered with the formula Highest-SJR minus Lowest-SJR divided into four.

Best Regards, SCImago Team

**S sam**

Unfortunately, the journal of sustainability has not a good reputation and do not care about

plagiarism. In 2019 they published a paper which was a copy of my article in the journal of Energy. Although the fake paper had obviously copied several figures as his own findings, contacting the journal several times was not successful and after 14 months, the fake paper is still online.

**M Mag. Sc. Bendezu**

Estimado Sam, creo que tu comentario debería fundamentarse no puedes desprestigiar una revista tan valiosa y cuyos investigadores nos esforzamos por contribuir en ella, tampoco colocas tu apellido lo cual más parece spam. Creo que debes hacer tu reclamo o incomodidad pero no es este el lugar apropiado, debes contactarte directamente para que obtengas una respuesta. No me parece tu prodecer colega es poco profesional de tu parte

**E Eddie Cheng**

It's sad to know that you have such an experience with the journal. However, even for other well-known publishers, plagiarism is still an issue. Besides plagiarism, wrong calculations, questionable concepts, and false methodologies are all commonly found in well-received journals. For example, once I found a paper with false methodology in JAP, and the journal would continue to publish that paper without my complaint. I think the most important is that if anyone finds a "major" mistake in a paper, s/he should contact the journal. With good reasons, I am sure that the journal will take care of any complaint. I am now a special issue editor of the journal of Sustainability. My experience is that the journal requests a quick review of a paper, but it does not force us to accept any paper. That being said, there are still rooms for improvement. I am sure that the journal will look for improvement because it is not easier to obtain both SCI-E and SSCI in JCR and Q1 in CiteScore.

**R Rick Jones**

Well this seems to be a pretty common theme of this journal. I've personally read some of the papers published to it and they're suspicious to say that least. Some of the methodologies followed seem to be very flawed and it seems like the research that they're publishing there is mostly meaningless.

**E Emily**

I saw a lot of questionable publications in all the journals belonging to MDPI publisher. Very low quality results, papers with 15 authors, articles with evident deficient referencing an so on. I wonder how this journal can be a Q1 in SCIMAGO. It is not only a concern for me, it is a big topic of discussion among my colleagues as well.



**Melanie Ortiz**

Dear Emily,

SCImago Team

Thank you for contacting us.

As you probably already know, SCImago calculates the scientometric indicators based on the data sent by Scopus. The SJR indicator is calculated equally with a recursive algorithm that takes into account the data sent by Scopus.

The SJR indicator is performed on the calculation of citations received by journals over a period of 3 years, giving greater weight to citations from highly prestigious journals (those with high citation rates and low self-citation) using the Google PageRank algorithm.

The SJR indicator is a very sophisticated indicator, to know more about it, click here:

<https://www.scimagojr.com/files/SJR2.pdf>

Best Regards, SCImago Team

J **Jeevan Jyoti**

Is this journal listed in ABDC ranking list

S **Siddharth**

Hi Jyoti, this is not yet on the ABDC list. Probably because this is an open-access journal.



**Melanie Ortiz**

SCImago Team

Dear Jeevan,

Thank you for contacting us.

SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus.

Unfortunately, we cannot help you with your request, we suggest you consult the mentioned list for further information.

Best Regards, SCImago Team



**Muhammad Wadud**

dear sustainability

i am interested in this journal, how can sign in, thanks

from Indonesian

E **Enzo Ferrari**

I am editor in this journal, I am taken a issues,

[https://www.mdpi.com/journal/sustainability/special\\_issues/The\\_Climate\\_Competence\\_in\\_Education](https://www.mdpi.com/journal/sustainability/special_issues/The_Climate_Competence_in_Education). You can publish with us.



**Melanie Ortiz**

SCImago Team

Dear Muhammad,  
thank you for contacting us.  
We suggest you visit the journal's homepage or contact the journal's editorial staff , so they could inform you more deeply.  
Best Regards, SCImago Team

**N Айнур**

Уважаемые редакторы журнала Sustainability Journal,  
Я бы хотела узнать ваш журнал входят базы данных Web of Science (WoS) или базы данных Scopus?

**B Boris Chigarev**

Info from WoS:  
SUSTAINABILITY  
JCR® Category Quartile in Category  
ENVIRONMENTAL SCIENCES Q2  
ENVIRONMENTAL STUDIES Q2  
GREEN



**Melanie Ortiz**

SCImago Team

Dear Айнур,  
Thank you for contacting us. SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus. Unfortunately, we cannot help you with your request referring to the index status. We suggest you to consult Scopus database (see the current status of the journal) or other databases (like WoS) for further information. You can also check that information in the journal's website or contact directly with the editorial staff. Best Regards, SCImago Team

**P Pedro Jacome Onofre**

Good morning, I am a reader and I plan to publish in MDPI, sustainability, I need to know if they belong to the JCR and what quartile is the magazine.

Thank you



**Melanie Ortiz**

SCImago Team

Dear Pedro, thank you very much for your comment.  
SCImago Journal and Country Rank uses Scopus data, our impact indicator is the SJR.  
Check out our web to localize the journal. We suggest you to consult the Journal Citation Report for other indicators (like Impact Factor) with a Web of Science data source. Best Regards, SCImago Team

T

**Tahir Saeed**

Is there any discount for developing countries because publication charges of 2000 CHF are too much and every one can't afford especially people living in developing countries.



**Melanie Ortiz**

SCImago Team

Dear Tahir,  
thank you for contacting us.  
We are sorry to tell you that SCImago Journal & Country Rank is not a journal. SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus.  
Unfortunately, we cannot help you with your request, we suggest you to contact the journal's editorial staff , so they could inform you more deeply. Best Regards, SCImago Team

A

**Ansari**

Dear Scimago team

I checked the percentile of Sustainability in scopus and I found that this journal has 91 percentile which I think is the first quartile. But in scimago this journal is in Q2. Why it is different?



**Melanie Ortiz**

SCImago Team

Dear Ansari, thank you for contacting us. Our data come from Scopus, they annually send us an update of the data. This update is sent to us around April / May each year.  
Remember that the SJR is a static image of the Scopus database, which grows daily. The calculation of the indicators is performed with a copy of the Scopus database provided to

us annually. The calculation of the indicators is also different. Best Regards, SCImago Team

H **Harold**

M **Madhusudhan Adhikari**

Dear Sir/Madam,

Happy New Year 2020 to you.

I have done a research in energy policy and writtern an article in the topic "Identification, Classification, and Prioritization of Barriers to Rural Electrification in Nepal using Analytical Hierarchy Process" and would like to publish it in your esteemed Journal " Sustainability", I would like to have your suggestion on the article processing time and fee for publishin article.

With best regards

Madhusudhan Adhikari  
Nepal.



**Melanie Ortiz**

SCImago Team

Dear Madhusudhan,  
thank you for contacting us.

Sorry to tell you that SCImago Journal & Country Rank is not a journal. SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus.

Unfortunately, we cannot help you with your request, we suggest you to visit the journal's homepage or contact the journal's editorial staff , so they could inform you more deeply.

Best Regards, SCImago Team

A **Abdul Bashiru Jibril**

Dear Editors of Sustainability Journal,

Please do you accept paper on marketing or consumer behaviour field?

Thank you.



**M Massoud Moslehpour**

Contact the journal directly.

**Melanie Ortiz**

SCImago Team

Dear Abdul,  
thank you for contacting us.

Sorry to tell you that SCImago Journal & Country Rank is not a journal. SJR is a portal with scientometric indicators of journals indexed in Elsevier/Scopus.

Unfortunately, we cannot help you with your request, we suggest you to visit the journal's homepage or contact the journal's editorial staff , so they could inform you more deeply.

Best Regards, SCImago Team

**S safin**

Dears in Sustainability Journal  
Greetings,

I have a research on soil stabilization using sustainable materials could you please guaid me to publish it in your journal?

Thanks in advance.

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The users of Scimago Journal & Country Rank have the possibility to dialogue through comments linked to a specific journal. The purpose is to have a forum in which general doubts about the processes of publication in the journal, experiences and other issues derived from the publication of papers are resolved. For topics on particular articles, maintain the dialogue through the usual channels with your editor.

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## Prof. Long Chiau Ming

---

**From:** IHS Research Ethic Committee <rec.ihs@ubd.edu.bn>  
**Sent:** Wednesday, 2 March, 2022 11:32 AM  
**To:** Dk Faiqah Batrisyia Binti Pg Hj Bahrin Dzulkharnain  
**Cc:** Dr Sheikh Shafqat; Dr Long Chiau Ming; Long Ming; Nurathirah Salihah binti Haji Mohd Salleh; Noriah binti Jumaat  
**Subject:** Re: HP-4283: Research Project 2021/22

**Dear Researchers,**

Your research resubmission was reviewed for your responses to the comments/conditions placed upon the ethical approval for your research. Your proposal is now deemed to meet the requirements, and **full ethical approval has been granted**. The approval letter will be ready for collection from the IHS Administrative Office in seven (7) working days. Please ensure to follow the conditions from PJSC as outlined in the permission letter.

**Dear Admin,**

Please find below the details for the Ethics approval letter:

<b>Ethics Reference Number</b>	<b>UBD/PAPRSBIHSREC/2021/68</b>
<b>Name</b>	Dk Faiqah Batrisyia @Dk Syaza binti Pg Hj Bahrin Dzulkharnain
<b>Registration number</b>	18B3069
<b>Programme</b>	BHSc Pharmacy
<b>Title of Project</b>	Knowledge, Attitude and Practice of Over-the-counter (OTC) Medicines among Adults in Brunei Darussalam: A Cross-sectional Survey
<b>Committee</b>	IHSREC
<b>Validity Period</b>	March 2022 - May 2022

Congratulations on the successful application!

**NOTES:** (a) Given the current outbreak, it is entirely the researchers' duty to follow to the SOP in place. (b) The ethics approval and permission granted by UBD do not constitute an automatic clearance for the research activity to proceed. Researcher discretion is advised. (c) **If changes are made to the approved research protocol, further ethics approval will be required.**

Best Wishes,

**Dr Siti Hanna Muharram,**  
Co-Chair of IHS Research Ethics Committee

on behalf of  
Chair IHS Research Ethics Committee