

An evaluation of home management of malaria by caregivers of under-five children in Calabar South Local Government area of Cross River State, Nigeria

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Introduction & Objective: Home Management of Malaria (HMM) by caregivers of under-five children is an important intervention strategy in the control of malaria infection in this population sub-group since treatment delay in the vulnerable groups such as pregnant women and under-five children has some serious consequences. The objective is to evaluate HMM by caregivers of under-five children in Calabar South LGA, Cross River State, Nigeria and the level of practice of HMM in under-five children by mothers of these children.

Methods: A simple descriptive-cross sectional survey involving the administration of questionnaire to 400 mothers or caregivers of under-five children and two health centers used for this study were selected through a multi-stage sampling and simple random sampling techniques. The administration of the questionnaire to the respondents and malaria cases review in the health centers selected were used to determine the level of practice of HMM in under-five children and to ascertain malaria incidence in this LGA respectively in the last five years since the implementation of presumptive treatment of malaria cases in under-five children became a national policy for malaria treatment in under-five children in Nigeria.

Results: The socio-demographic variables of respondents are as follows: 35.3% of respondents were 26-31 years, 85% are married, 56.3% had at least, secondary school education, 35.8% are traders, 98.5% are Christians, 40.8% are medium income earners, 56.3% have 3-5 persons per household. The perception of caregivers of under-five children following the use of antimalarial drugs on their under-five children after detection of fever showed a beneficial outcome as seen in the Fisher Exact test=0.0012. Secondly, following the review of a 5-year malaria cases in under-five in the two health centers used for the study in the LGA, it was observed that there was a remarkable progressive decrease in the incidence of malaria in under-five children from 2007-2011 records of the two health centers. These results showed a beneficial outcome as seen in the Fisher Exact test=0.0012.

Conclusion: HMM in under-five children in Calabar South LGA has morbidity and mortality benefits in under-five children resident in that community, practice of HMM in under-five children in this community still falls short of the Abuja target for RBM 2005, which is to see 60% of caregivers of under-five children practice presumptive malaria treatment of all fever cases detected in under-five children within 24-48 hours as this is one of the nation strategies to RBM in Nigeria.

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