THE PERCEPTION AND MANAGEMENT OF MALARIA IN A RURAL SETTING: THE CASE OF WOMEN IN THARAKA NORTH DIVISION OF THARAKA NITHI DISTRICT, KENYA.

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Sebastian Runguma Njagi

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ABSTRACT

This case study examines the perception and management of malaria among the women in Tharaka North Division, which is a malaria-prone area of Tharaka Nithi District. Specifically, the study set out to investigate how malaria is perceived by women; their knowledge of and attitudes towards modern malaria control technologies; the strategies women utilize in the management of malaria-related illnesses; and to find out how intrahousehold gender relations influence women's health seeking behaviour and efforts in malaria management.

The fieldwork for this study was carried out during the months of July and August 1997. The field data was collected mainly through structured interviews among 88 women who were randomly selected through a multi-stage sampling procedure. Additional data was obtained from 12 purposively selected key informants and also through direct observations. The obtained data was analyzed using quantitative and qualitative methods and the results interpreted on the basis of the socialization theory, which served as the main theoretical frame of reference for the study.

The findings revealed that women's perceptions about malaria are fairly consistent with the scientific facts about the disease. Their perception about the fatality and severity of Malaria was however found to be biomedically misplaced which in turn impacted negatively on their behaviours in malaria management. The findings revealed also that the local women have a fair knowledge of the existing modern malaria control technologies, which they also like and highly approve use of. They were, however, found

to have inconsistent and low use of some of these technologies mainly due to financial limitations.

The Tharaka women were also found to be users of various strategies in malaria management. These include use of both biomedical and ethnomedical resources simultaneously, subsequently or alternatively depending on the perceived severity of the experienced illness episode. They were also noted to rely more on the use of therapeutic resources based outside home (OTC drugs and professional health care services) than home remedies (mostly herbal medicine) in treatment of malaria-related illnesses.

Finally, the results of the study show that women's health seeking behaviour for malaria and their general control of the disease within households is constrained by many factors. These include unfavourable intrahousehold gender relations, inadequacy of health care services and limited finances among others.

The study recommends that the government and other agencies like the NGOs supporting malaria control intervention programmes, would be best placed to assist the local women in dealing with the malaria problem by providing them with health education on the disease and particularly on the appropriate management strategies. In addition, the women's efforts in malaria control should be enhanced by empowering them economically and also by minimising the negative impact of other factors acting as hindrances to their control efforts.