

**MAKING DECISIONS ON HEALTH CARE**  
**Household Management of Malaria**  
**and Visceral**  
**Leishmaniasis Kalaazar**  
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**ABSTRACT**

When confronted with illness, households have to make decisions on the type of health care to look for. Studies in social medicine have attempted to delineate the factors which influence illness behaviour (health seeking behaviour). In medical anthropology, the focus has been on the role of aetiological beliefs and cultural factors while sociologists have identified enabling and predisposing factors as the reasons behind health seeking behaviour. This paper discusses from these two perspectives, household management and decision making on: malaria and visceral leishmaniasis (Kala-azar).

Data from this study shows what influences illness behaviour in relation to the two diseases are: cost, perceived efficacy of treatment, quality of care, accesibility and symptom identification. Gender and social networks also play an important role in influencing household decisons onhealth care. Multiple use of therapies was identified in the treatment of malaria and kala-azar. The decision to use more than one health resource (provider) seemed to be due to the failure of an earlier treatment and the perception that the resource used as an alternative would be able to cure the disease. Households utilised various health resources either simultaneously or sequentially during a single illness episode.

The study argues that constraints to seeking health care can be traced to the structural organisation of the health care system and to some extent households' social conditions. The paper concludes with policy suggestions whose implementation could lead to better maximisation of health care resources by households.