

SELF MEDICATION FOR MALARIA TREATMENT IN KOROGWE DISTRICT, NORTH-EASTERN TANZANIA

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Communities are not prohibited from seeking for malaria treatments from various sources they would prefer but are advised to comply with the standard treatment guidelines and this can be achieved by contacting a qualified provider. Enhancement of community compliance with medical treatment guidelines may retard or slow the currently increasing trend of parasite resistance to antimalarial drugs. Traditionally, sub-Saharan African communities have been contacting alternative providers for the treatment of malaria and other illnesses, as literature can evidence. Efforts have been underway to find out cost-effective and sustainable strategies for the treatment of malaria in Tanzania. Previous studies in Tanzania have found a substantial inadequate community compliance to standard prescriptions (Mnyika and Kilewo 1991; Mnyika *et al.* 1995; Ongore and Nyabola 1996). Poor compliance to drug use is reported to have a contribution to drug resistance (W.H.O 1996).

This article presents findings from a recent cross-sectional survey made in Korogwe district, Tanzania, to assess, among other things, the residents' treatment seeking behaviour in relation to malaria.

A multistage random sampling approach was primarily used towards determining a sample of 30 villages, 451 heads of households, 442 exit patients or their caretakers/escorts and 50 health staff at private and public health facilities, 261 FGD participant village residents, 39 community leaders, 20 retail drug sellers, and 17 traditional healers, were covered in this study aspect. Data was collected using structured interviews to exit patients and heads of households and semistructured interviews to drug sellers at retail shops/kiosks and pharmacies and key informant interviews with health staff and community leaders, indepth interviews with traditional healers and focus group discussion schedules.

It was found that self-medication using antimalarial drugs bought from retail commercial sources (sometimes without appropriate prescriptions) and local plant leaves or barks were used. Of the 20 respondents on what types of drugs that were frequently bought from their outlets, 90% mentioned chloroquine, 40% fansidar, 30% metakelfin, 25% amodiaquine and 20% quinine. Quinine was reported by drug sellers found at retail pharmacies

but not those found at ordinary shop/kiosk outlets. Individual respondents mentioned more than one type of drug to have been sold at their outlets. It was also found that 90% of antimalarial buyers from retail shops/kiosks were children, who seemed to do so on behalf of their parents/caretakers who might have been busy with other domestic responsibilities. In response to whether antimalarial drug buyers from retail outlets show to drug sellers prescriptions from authorized practitioners, the following answers were obtained from the drug sellers interviewed: All of them (45%), a few of them (25%), most of them (20%). It was not known whether or not those who did not show appropriate medical prescriptions and those who sold such drugs were knowledgeable of the right doses of the drugs they bought. Report from a similar study in the neighboring (Same) District shows that 10% of the kiosk owners and shopkeepers, and 17% of the clients knew the right doses of chloroquine for children (Alilio *et al.* 1997). Answers from key informants and FGD participants showed that trees such as *mwarobaini*, *mzugwa*, *mvumbasha*, *mkaritusi* (eucalyptus tree) and *fevi* were relatively more frequently mentioned local plants to have traditionally been used in the treatment of malaria. Ignorantly, traditional healers were also contacted for severe malaria although it was associated with witchcraft. Also according to these informants, poverty contributed to delayed or low people's contact of modern health facilities. However, some poor people ended up paying

highly such as disposing chicken or chicken eggs to traditional healers for the reported severe illness such as those associated with malaria although the patients or their caretakers were unaware of this and instead they believed they have been bewitched by their enemies.

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