Abstract

HEALTH-SEEKING BEHAVIOUR FOR FEBRILE ILLNESS AMONG CAREGIVERS OF CHILDREN UNDER FIVE YEARS ACROSS MALARIA ENDEMICITY ZONES IN KENYA

Background: Health seeking behaviour for febrile illness amongst caregivers of children aged under five in Kenya is a key issue of public health concern. Fever is one of the most reported symptoms and most common reasons for seeking healthcare, especially in low resource settings like Kenya. Febrile illness-related health seeking behaviour is fundamental for decreasing negative outcomes from febrile illness. Delayed presentation to hospitals in the event of febrile illness results in difficulties with diagnosis and subsequently with appropriate and timely treatment. Given how quickly fever can escalate to severity resulting in death, it is pertinent and urgent to seek appropriate healthcare immediately in newborns, and when fever is persistent for 24 hours in children aged under five. This study examines the various factors associated with appropriate health seeking behaviour for febrile illness in this demographic.

Methods: This study was a secondary data analysis of the Kenya Malaria Indicator Survey which was conducted in 2020 in all regions of Kenya. Data analysis and management was done using STATA 17 software. The study participants were described using frequencies and percentages. The prevalence of appropriate health seeking behaviour was estimated using Chi-Square tests for categorical variables, and the Independent Samples T-test and Mann Whitney test for continuous variables. The factors associated with appropriate health seeking behaviour were determined using univariable and multivariable binary logistic regression at a 0.05 significance level. A total of 744 child-caregiver pairs were included in the study and a weighted total of 562 pairs were used in the analysis.

Results: Of the 562 participants, 35.4% had appropriate health seeking behaviour. The prevalence of appropriate health seeking behaviour was highest in the low-risk malaria endemicity zones (43.63%). The odds of appropriate health seeking behaviour were significantly lower in femaleheaded households (aOR:0.54, 95% CI: 0.32, 0.90) than in male-headed households, and in caregivers with primary level education (aOR:0.46, 95% CI: 0.27, 0.78) compared to those with no education.

Conclusion: Only about a third of women exhibited appropriate health seeking behaviour. The factors associated with appropriate health seeking behaviour were the sex of the household head

and the highest level of education attained by the caregiver. Thus, strategies must be put in place to ensure that decision making where children's health is concerned is prioritised regardless of the

sex of the household head, and that the correct education about febrile illness is delivered at alllevels of the education system.

Keywords: Health Seeking Behaviour, Caregivers, Children, Kenya