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Improving caregivers' home management of common childhood illnesses through community level interventions.

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Abstract

The study obtained information using quantitative and qualitative techniques, on key home management practices of common childhood illnesses in Community-Integrated Management of Childhood Illnesses (C-IMCI) and non-C-IMCI implemented local government areas (LGAs) in Osun state, to determine if any differences existed between them. Data analysis was done using Epi-info version 6.0 for the quantitative survey and content analysis method for the qualitative survey. Findings revealed better key home management practices in the C-IMCI compliant LGA than in the non-CIMCI compliant LGA. The proportion of caregivers who gave appropriate home treatment for malaria during their children's illnesses differed significantly ($p = 0.000$) between the two LGAs. Similarly, caregivers from the compliant LGA demonstrated better treatment practices for diarrhoea and cough. Community Resource Persons (CORPs) were the major source of information on these key practices in the compliant LGA; while in the non-compliant LGA, the traditional healers, elders, and to a lesser extent, health workers gave information. Findings showed that the C-IMCI strategy improved caregivers' home management of common childhood illnesses.

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MeSH Terms

LinkOut - more resources