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Local illness concepts--implications for management of childhood pneumonia in eastern Uganda.

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Abstract

BACKGROUND: Pneumonia is one of the major killers of children under 5 years. Prompt and appropriate management is crucial; yet, the care a sick child receives depends on caretakers' perception of illness and action taken. Hence, understanding of local illness concepts on pneumonia and caretakers' response is crucial for interventions aimed at improved management.

OBJECTIVE: To elucidate local illness concepts involving childhood fever, cough and difficult/fast breathing and how these concepts' influence management of children with potential pneumonia.

METHODS: Key informant interviews with eight health workers and eight traditional healers and five focus group discussions, including presentation of a DVD showing children suffering from respiratory problems, with mothers of children under 5 years old in Iganga/Mayuge Demographic Surveillance Site (DSS) in eastern Uganda.

RESULTS: Many terminologies were used to refer to symptoms of pneumonia. Difficult/fast breathing was considered severe but was not presented among common childhood illnesses. Mothers were likely to interpret any condition involving fever as malaria and had different preferred actions for difficult/fast breathing in their children. Although mothers mentioned using drugs at home for pneumonia related symptoms, they gave examples only of antipyretics. Health workers said mothers would use antimalarials and sometimes antibiotics to treat breathing problems.

CONCLUSIONS: There is a community knowledge gap on symptoms and biomedical treatment for pneumonia. To promote appropriate management of childhood fever, pneumonia and malaria as two separate illnesses should be highlighted, the role of antibiotics must be emphasized and local illness concepts should be addressed in behaviour change communication.

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MeSH Terms, Substances

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