Health care-seeking behavior for child illnesses in western Kenya: Qualitative findings from the Child Health and Mortality Prevention Surveillance (CHAMPS) Study

Introduction

• Globally, under-five mortalities (U5M) by 60%, from 93 deaths per 1000 live births in 1990 to 37 in 2020
• In Kenya, U5M dropped during the same period from 102 per 1000 live births in 1990 to 42 per 1000 live births in 2020
• Many children still die as a result of ‘inappropriate’ health care-seeking by caregivers
• Understanding factors that guide caregivers’ health seeking decisions for child illness is essential to understanding the formal and informal health seeking behavior

Methods

• Urban Kisumu and rural Siaya Counties, Kenya
• Key informant in-depth interviews (KIIs), focus group discussions (FGDs), and semi-structured interviews (SSIs)
• Purposive sampling of religious leaders, community leaders, parents, healthcare workers and traditional healers
• NVivo 11 was used to organize the data and code themes from the transcribed discussions
• Quotes were selected based on emerging themes

Results

• 88 participants
• Cultural norms, religious beliefs, and economic factors all influence caregivers’ health care-seeking behaviors
• Community attributes illness to events, for instance an ill child may be ill due to the mother’s wrongdoing or doing something considered a taboo by the community
• Some illnesses require traditional medicine; if conventional medicine is sought then dire consequences such as death may occur
• Caregivers believe that illnesses which do not respond to conventional medicine have supernatural causes and need traditional medicine

Conclusions

• To improve timely health care seeking behavior, it is important to increase health literacy in caregivers and improve their ability to accurately assess the timing and importance of clinical health care.
• Education should include a focus on danger signals in childhood illness which should prompt immediate clinical healthcare-seeking

“There are illnesses that can ail a child called ‘chira’ (illness caused to punish wrongdoing). The child can get it from the mother if she does something (taboo) then they would look for ‘manayasi’ (herbal concoction that remedies the effects of doing something wrong against cultural norms)”

Male, Siaya

“Our community has a disease called the small disease [measles]. They believe that if a child who has contracted the disease is injected (as they would usually do in hospitals), then the child will not recover. So they believe that they must be given ‘medicine of the pot’ (herbal medicine prepared by boiling in a pot).”

Female, Siaya

“When they go to a health facility to test for malaria they don’t find it so you may think that there is something earthly troubling him so you take him to the faith healers.”

Female, Kisumu

“Maybe when a person comes here and you refer her/him and then he/she thinks that she will not be able to afford to pay at the county referral, he will choose to stay and seek herbal treatment.”

Female, Siaya

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