

# Investigating factors affecting coverage and acceptability of perennial malaria chemoprevention with sulfadoxine-pyrimethamine in Osun state, Nigeria: Evidence from a qualitative process evaluation

Chinazo Ujuju,<sup>1</sup> Michael Ekholuenetale,<sup>1</sup> Nnenna Ogbuluor,<sup>2</sup> Olufemi Oroge,<sup>3</sup> Rufai Ahmed,<sup>4</sup> Semiu Rahman,<sup>1</sup> Kolawole Maxwell,<sup>1</sup> Mary Adekola,<sup>1</sup> Benjamin Ilesanmi,<sup>1</sup> Adekemi Ajayi,<sup>1</sup> Olusola Oresanya,<sup>1</sup> James Tibenderana<sup>5</sup>

<sup>1</sup>Malaria Consortium, Nigeria  
<sup>2</sup>National Malaria Elimination Programme, Nigeria  
<sup>3</sup>Osun State Ministry of Health, Oshogbo, Osun State, Nigeria  
<sup>4</sup>National Primary Health Care Development Agency, Nigeria  
<sup>5</sup>Malaria Consortium, United Kingdom

Our findings will refine SP-PMC implementation strategies and help to develop targeted messages for caregivers, community members and healthcare workers

## Introduction

Delivering perennial malaria chemoprevention (PMC) with sulfadoxine-pyrimethamine (SP) has been judged to be safe and cost-effective, and is well accepted by health workers and communities. An analysis of several trials in sub-Saharan Africa showed that the intervention reduced cases of malaria illness by 30 percent, hospital admissions by 23 percent and anaemia by 21 percent in the first year of life.

The World Health Organization recommends that PMC be administered to children under five; however, PMC is currently not a recommended policy in Nigeria. We are implementing a study in Nigeria to investigate the effects of PMC on malaria morbidity and mortality, hospitalisation rates and anaemia outcomes in children aged 2–18 months, as well as to define country-level policy and operational feasibility indicators. To help inform policy, we assessed potential challenges and barriers to the acceptability of PMC in Nigeria.

## Methods

- We employed a qualitative approach to collect and analyse primary data, using focus group discussions (FGDs) and key informant interviews (KIIs).
- The study participants were caregivers, community leaders, fathers of children <24 months, and health workers at sentinel health facilities in the SP-PMC project sites.
- We conducted the study in November 2023 in eight local government areas (LGAs) in Osun state, Nigeria, where PMC is being implemented.
- We held a total of 18 FGDs and six KIIs among the various groups.
- Recorded interviews were transcribed and where the interviews were conducted in local language, the transcripts were translated to English.
- Thematic analysis was done using ATLAS.ti version 23 software.

## Results

- The majority of respondents reported acceptance of PMC as an intervention.
- Caregivers identified several factors that facilitated acceptability of PMC, including perceived effectiveness and child-friendliness of the drug, availability of free services and SP drugs, participation of health workers and respondents' knowledge of drug efficacy.
- Conversely, some potential barriers to acceptability and coverage of SP-PMC were beliefs in traditional medicine by some caregivers, health workers' attitudes or lack of availability at health facilities, partners' refusals to support their wives in giving PMC to their children, financial difficulties for transportation to health facilities, and the perception that tablets are meant for adults and not children, who should take syrups.

## Conclusion

PMC is an acceptable intervention; however, steps should be taken to address the potential barriers identified in this study to encourage the uptake of the intervention when scaled up. A robust advocacy, communication and social mobilisation strategy should be considered in areas targeted for PMC implementation.

## Acknowledgements

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Figure 1. Network of factors facilitating acceptability of the Essential Programme on Immunisation and perennial malaria chemoprevention

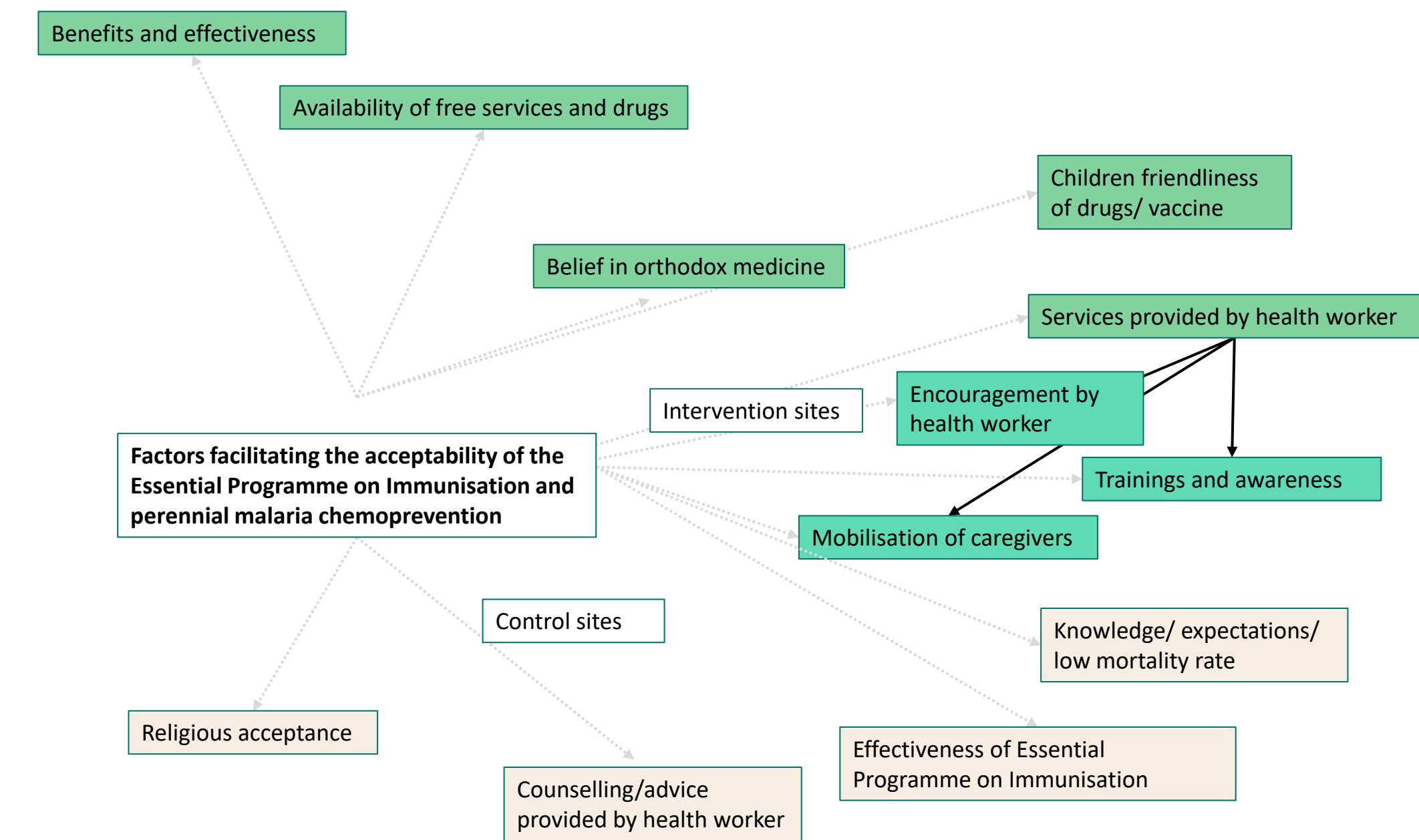


Figure 2. Challenges of accessing perennial malaria chemoprevention

