

Sociocultural Perspectives on Malaria

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Goals for today

- Understand why sociocultural perspectives are important for developing effective malaria intervention programs
- Recognize sociocultural factors that influence behavior and decision making within the context of malaria
- Describe the “sick role” and how it can vary with social conditions
- Understand how attitudes and beliefs of malaria can vary
- Identify sociocultural issues that can impact malaria interventions

Perspectives on the burden of malaria

- Biomedical- enlarged spleen, anemia
- Epidemiological- morbidity and mortality
- Economic- costs, levels of productivity, growth and development
- Sociocultural-?

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THE SOCIAL BURDEN OF MALARIA: WHAT ARE WE MEASURING?

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“Perceptions of social burden vary among societies, cultures, individuals, and even within an individual over time.

Understanding the social burden of malaria

“anthropologists are generally concerned with meanings rather than measurements”

How do these factors influence behavior and the biomedical outcome of disease:

- local perceptions of disease
- cultural norms
- beliefs



The “sick role”

How people should behave when they are sick

Attitudes of malaria

- Uncomplicated malaria is often considered a mild everyday illness that is treatable
- Socially acceptable -not associated with stigma as with HIV/AIDS
- Low pressure to seek treatment or comply with completing treatment
- Gender differences



Attitudes of malaria

- Severe malaria – convulsions is rarely associated with “malaria”
- Of supernatural or spiritual origin signals a warning -something is wrong in the community – if not fixed others will be at risk
- Social consequences of acting unexpectedly (ex. Taking child to hospital)

Social vulnerability

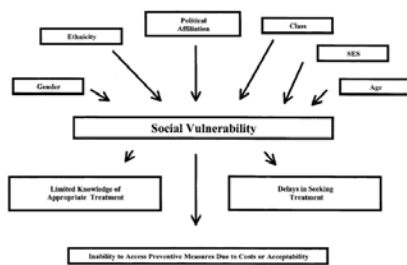


FIGURE 2. Social vulnerability. SES = socioeconomic status.

Attitudes and beliefs

People have a “native logic and rationality” that makes sense within the realities and limitations of their personal situation

Effective malaria programs must be aware of the local explanations of the “how” and “why” of contracting disease

Attitudes and beliefs - *ndege-ndege*



cerebral malaria convulsions in western Africa
 the convulsions are associated with witchcraft or sorcery
 It is fatal to administer an injection to someone with *ndege-ndege*

Dual beliefs

It is possible to have a biomedical explanation for disease causation AND another cultural explanation

can be related to the “how” and “why”

victims may be preoccupied with the “why” (witchcraft or the result of immoral or illegal actions)

Malaria perceptions

Local definitions of malaria may vary among cultures

In Africa there are many different words for malaria-like illness that doesn't translate to malaria

Choice of terminology is essential for effective health communication

Beliefs about antimalarial drugs

In Sudan, a high prop. of women believe chloroquine causes abortion – due to bitter taste affecting compliance



Beliefs about antimalarial drugs

Balance of "hot" and "cold" is important belief in many areas of the tropics

One doesn't treat malaria with a "hot" medication as proper cold balance is required

Traditional Medicine Clinic / Centre

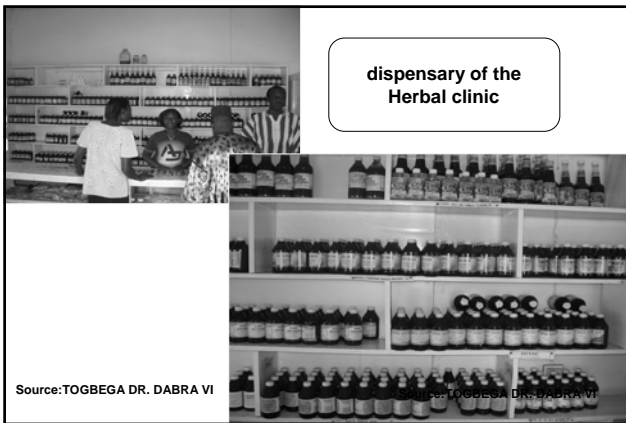
In Ghana, Traditional Medicine practice has come of age especially in the big towns and cities. One can easily walk into Herbal Clinics/Centers' which are well equipped with modern laboratories and very hygienic environment and get treatment comparable to Orthodox treatment.



**Modern Traditional
Medicine Clinic in
Accra**

Source: TOGBEGA DR. DABRA VI

**dispensary of the
Herbal clinic**



THE INDEPENDENT

Wayne Hemminger: Don't 'tip the scales' - they're still making 'alibis'

Aid workers teach Sierra Leone's poor to shun witch doctors' malaria remedies

By Katrina Manson in Malley, Sierra Leone

Friday, 25 April 2008



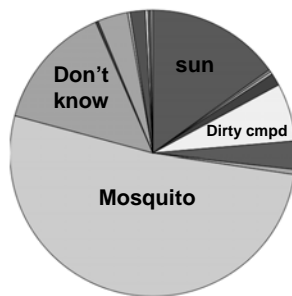
Perceptions and beliefs about malaria

- Too much exertion while working under the hot sun
- drinking lots of sour milk during the rainy season
- eating too much palm oil
- standing in the sun
- eating sweet and oily foods
- poor environmental sanitation
- consumption of unripe fruits
- witchcraft

Perceptions and malaria treatment

- drinking coconut juice
- applying regular enema
- drinking liquid from boiled pineapple peels
- boiled neem tree leaves.
- taking in large amounts of concoctions of herbs

ENTOM 4100- KAP in Ghana



- MALARIA SOURCE**
- Working in the sun (01):
 - Diet, Malnutrition (02):
 - Working too hard (03):
 - Dirty water (04):
 - Dirty compound (05):
 - Food (06): FOOD
 - Working near fire (07):
 - Mosquitoes (08): MOSQ
 - Don't know (09): DK
 - Other (10):
 - Children put hands in sand and get malaria (11)
 - Diet, specific foods (ie too much oil) (12)
 - Bush (13)
 - Not sleeping under mnet (14)
 - Lack of personal hygiene (15)
 - Flies (16)
 - Stagnant water (17)
 - Head Ache (18)

Incorporating local healers

Some malaria intervention programs in Tanzania have incorporated local healers into malaria project activities and local advisory groups



Issues with compliance

If people believe that malaria is contracted by other means, then it is hard to get them to commit to a control program

One solution - formal recognition of differences and negotiation of mutually agreeable solutions (through cultural accommodation)

Gender roles in malaria

- poorly studied area in malariology
- women are predominantly the first to detect illness in a child
- decision making depends social structure and who, "owns" the child
- male children may be more likely to be taken to clinics and to receive proper care



Use of bed nets for malaria prevention

- 1986 1st groundbreaking report from the Gambia correlating bed net usage and decreased mortality
- Some debate about the actual efficacy of bed nets
- Have been incorporated into many national and international programs

Factors influencing bed net usage

- Lifestyle (pastoral vs. agricultural)
- Local vector biting times
- Rural vs. urban
- Proximity to rivers, standing water and etc.

Factors influencing bed net usage

- Social structure (co-wives sleep in one room, bed nets serve as privacy walls)
- Gender (girls preferring to sleep under nets more than boys)
- Adult desire for privacy

Factors influencing bed net usage



- Perception of ownership, in some cultures only for adults
- Whether researchers are present in community
- End of harvest season when family has money

Social targeting for malaria intervention

- Selling bed nets? Target those who have financial control
- Will the intervention be successfully integrated into cultural norms of people?