

Problems of Malaria Menace and Behavioural Intervention for its Management in Sub-Saharan Africa

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ABSTRACT Malaria, the most prevalent and most pernicious parasitic disease of humans, is responsible for at least a million deaths each year with Africa bearing the brunt accounting for more than 90 percent of the whole cases. Thus, it is a prime etiologic factor of slowed economic growth in Africa as a result of lost productivity or income associated with illness or death and other damages associated with *falciparum* malaria. In Nigeria alone, over 50% outpatients' attendance and 40% of hospital admissions, 30% of child mortality and 10% of maternal mortality are due to malaria. The ugly burden of malaria is intensified by the demise of certain antimalarial therapeutic drugs. Antimalarial drug resistance, which is a major contributor to the global resurgence of malaria, is now generally acknowledged to be one of the greatest threats on our ability to "Roll Back Malaria", and this accounts for the ban of chloroquine (CQ) in first-line Malaria treatment in most African countries, and Nigeria. Malaria is usually defined, interpreted, and managed at home before being referred to other care sectors. Such management is conceived in terms of treatment and prevention of malaria. In line with the foregoing, the paper examines the problems malaria control and concludes that there is still the need to settle some discrepancies between perception, sick role and health seeking behaviour if the menace of malaria must be effectively controlled in Africa and Nigeria in Particular.