

**Figure 1.** Reveals the respondent awareness of malaria infection

**Table 3.** Respondent Knowledge about Malaria Infection

Causes of Malaria	Frequency YES (%)	Frequency NO (%)
Mosquito bite	174(85.2)	34(24.8)
Contaminated food	2(1.0)	202(99)
Living in dirty environment	9(4.2)	195(95.8)
Too much heat and sunlight	1(0.5)	203(99.5)
Stress	2(1.0)	202(99.0)
Don't know	17(8.1)	187(91.9)

Symptoms of Malaria	Frequency NO (%)	Percentage (%)
Cold	70(34.5)	127(65.5)
Fever	92(45.1)	112(54.9)
Headache	87(42.8)	117(57.2)
Vomiting	19(9.2)	185(80.8)
Weakness	42(20.4)	162(79.6)
Dizziness	9(4.4)	195(95.6)
Nausea	1(0.7)	203(99.3)
Loss of appetite	10(5.1)	194(94.9)
Bitter mouth	14(6.8)	190(93.2)
Convulsion	2(0.9)	202(99.1)
Diarrhoea	1(0.7)	203(99.3)
Joint pain	13(6.3)	191(93.7)

Table 3 shows the distribution of variable related to the knowledge about malaria infection. Majority of the respondent did not have good knowledge as regards the causes of

malaria while a few among the respondent are able to identify at least 3 symptoms of malaria correctly.

**Table 4.** Respondent Knowledge on the Sypmtoms of Malaria

Knowledge of symptoms	Frequency (no)	Percentage (%)
Good knowledge	108	48.2
Poor Knowledge	116	51.8



**Figure 2.** Reveals the respondents' knowledge on symptoms of malaria.

**Table 5.** Preventive Seeking Behaviour of Malaria Among Respondents

Preventive Method	Yes (%)	No (%)
Spraying of insecticide	137 (67.3)	67 (32.7)
Chemoprophylaxis	168 (82.3)	36 (17.7)
Using insecticide treated net	11 (5.4)	193 (94.6)
Drinking traditional concoction	153 (75.0)	51 (25)
Keeping environment clean	157 (76.9)	47 (23.1)
Clearing of bushes around	167 (81.8)	37 (18.2)

Table 5 shows that only 5.4% of the respondent use of insecticide treated net as a preventive method for prevention of mosquito

while 75% of the respondent drink traditional concoction as a method of malaria prevention.

**Table 6.** Respondent Knowledge of Preventive Seeking Behaviour of Malaria

Knowledge of Preventive seeking behaviour	Frequency (n)	Percentage (%)
Good knowledge	123	60.4
Poor knowledge	81	39.6

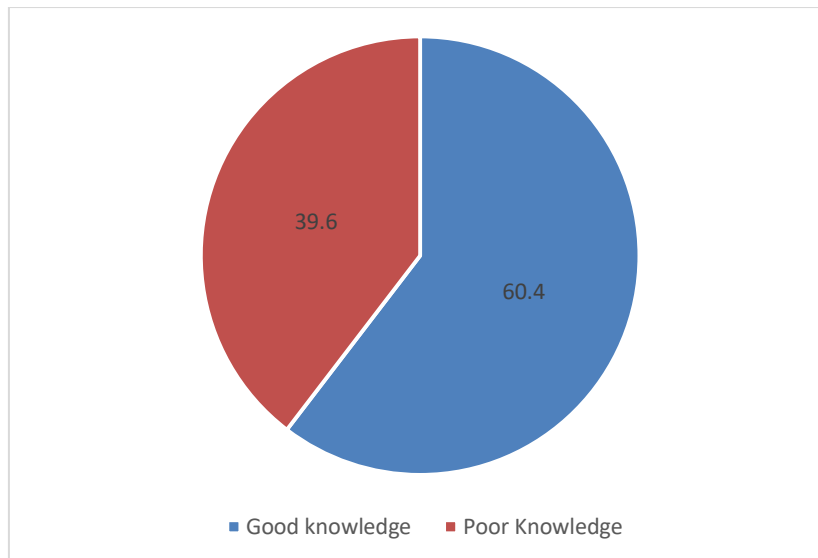


Figure reveals the respondents' preventive seeking behaviour towards malaria

## Discussion

This study is mainly concern with the assessment of the knowledge of malaria infection and preventive seeking behaviour among pregnant women towards malaria because malaria is one of the causes of maternal morbidity and mortality rate in which Nigeria contributes the highest global burden of 25% of global malaria cases with 24% of global malaria death [Kelechi E O et- al 2019].

This study revealed that majority of the respondent, 93% are aware of malaria infection which is agreement with [Ayodeji M et al 2015]. 85.2% respondent as revealed by this study accepted that mosquito bite is the major causes of malaria infection which was contrary to some studies in Nigeria which reported that the causes of malaria include living in a dirty environment, too much staying in the sun [Kelechi E O et al 2019]. 60.4% of the respondent seek preventive behaviour towards malaria in which only 5.4% of the respondent uses insecticide treated net as a preventive method which most of the respondent adopt the use, chemoprophylaxis keeping the environment clean, clearing of bushes around and method of prevention of malaria.

The preventive seeking behaviour towards malaria is good compared with previous study carried out in southwest Nigeria i.e. rural communities [Fawole A O et- al 2008]. The difference in the preventive seeking behaviour toward malaria might be due to better exposure to health education messages regarding malaria prevention.

The respondent socio demographic characteristics such as the educational status, employment status, marital stats, socio economic status were found to be statistically significantly associated with the preventive seeking behaviour towards malaria as supported by <sup>[15]</sup> ( $p < 0.05$ ) but age of the respondent was also found to be statistically not significantly associated preventive seeking behaviour towards malaria ( $p > 0.05$ ).

## Conclusion

The knowledge of malaria infection and preventive seeking behaviour among pregnant women in this study setting is good. However, a considerable percentage/number of respondents still demonstrate poor knowledge about malaria infection and preventive seeking behaviour such as to intensify in the educating pregnant women on the use of insecticide treated net and to avoid the use of traditional concoction as a preventive method which is highly dangerous and can result into Teratogen. However, socio demographic characteristics affect the knowledge of malaria infection and preventive seeking behaviour towards malaria among pregnant women.

## Recommendation

Consequent to the finding in this study, effort should be made to improve on the utilization of health promoting strategies and health education on malaria infection and prevention by steering up health educational intervention to upstage the knowledge of urban dwellers about malaria and its prevention with emphasis on the use of

insecticide treated net and the discouragement of drinking traditional concoction and also providing information by relevant health organization are needed to reduce incidence of malaria in the society which will serve as a catalyst to attain 2030 malaria goals.

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