

Factors Influencing Uptake of Intermittent Preventive Treatment for Malaria Among Pregnant Women Attending Antenatal Clinics at Igbeti, Oyo State, Nigeria

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In Partial Fulfilment of the Requirements for the Award of Master of Public Health Degree (MPH)

Certification

This is to certify that **Ayilara Olabode Paul** with matriculation number LCU/PG/004016 carried out this research work titled “Factors Influencing the Uptake of Intermittent Preventive Treatment Among Pregnant Women Attending Antenatal Clinics at Igbeti, Oyo State” in the Department of Public Health, Faculty of Basic Medical and Health Sciences, Lead City University, Ibadan, Oyo State, Nigeria for the award of Master’s degree in Public Health (MPH) and this has not been previously submitted.

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Head of Department

Date

Dedication

I dedicate my research to the Almighty God for the grace to embark on this journey from the beginning to the end.

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Acknowledgement

I wish to convey my appreciation to Lead University, Ibadan, for their indispensable support and resources that facilitated the successful completion of this study. I extend my sincere gratitude to Lead City University, Ibadan for supplying the necessary resources for the effective completion of this research endeavor.

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Even if the above-mentioned institutions and persons have assisted in the course of this research study, I alone stand responsible for the faults, if any, found in the work.

ABSTRACT

The study aimed to assess the level of knowledge and factors influencing the uptake of intermittent preventive treatment of malaria in pregnancy (IPTp) among pregnant women.

Despite the proven effectiveness of IPTp, there is limited empirical evidence on how knowledge levels and socio-demographic factors influence its uptake among pregnant women in Nigeria. This study was anchored on the Health Belief Model, which explains health-seeking behaviors based on perceived benefits and barriers.

A descriptive cross-sectional research design was employed. The study population comprised pregnant women attending antenatal care, with a sample of 404 selected using simple random sampling technique. Data were collected through structured questionnaires covering socio-demographics, awareness, knowledge, attitude, perception and factors influencing uptake of IPTp. Analysis was carried out using descriptive and inferential statistics, with significance set at $p < 0.05$.

Findings showed that the mean knowledge score of respondents was 3.4, with 45.3% having moderate knowledge, 40.6% high knowledge, and 14.1% low knowledge. Factors significantly associated with IPTp uptake included distance to facility (AOR=2.1, $p=0.012$), transport availability (AOR=1.65, $p=0.045$), and family support (AOR=2.85, $p<0.001$).

Pregnant women in the study area demonstrated a moderate level of knowledge about IPTp, with family support emerging as the strongest predictor of uptake.

Health interventions should focus on strengthening family and community support systems while addressing transport and accessibility barriers to improve IPTp uptake among pregnant women.

Keywords: Intermittent Preventive Treatment in pregnancy (IPTp), Antenatal Clinics (ANC), Malaria.

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List of Acronyms

Abbreviation	Meaning
ACT:	Artemisinin-based combination therapy
ANC:	Antenatal Clinic
DHIS:	District Health Information System
IPT:	Intermittent preventive treatment
IRS:	Indoor residual spraying
ITN:	Insecticide-treated nets
MiP:	Malaria in Pregnancy
NHMIS:	National Health Management Information System
RDT:	Rapid Diagnostic Test
SP:	Sulphadoxine Pyrimethamine
WHO:	World Health Organization

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