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An exploratory study of the factors influencing the acceptability of indoor residual spraying (IRS) in upper western Ghana

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Despite the implementation and good coverage of the WHO recommended malaria control program IRS, malaria continues to be a very serious public health challenge in the upper west region compared to other regions of Ghana. We explored enablers and barriers of community uptake of this program in a highly malaria endemic region in Ghana. Between April and October 2016 we conducted a qualitative inquiry, focus group discussion and semi-structured interviews with program stakeholders. Participants included community members, program operators and health system officials in upper western Ghana. 105 participants were involved in the study. Findings identified significant barriers to program uptake by communities including religious beliefs, superstition, and fear of insecticides among others. Enablers of program uptake by the communities included malaria prevention, the efficacy of the intervention, and incidental benefits. Program providers and health system officials detailed the following as a necessity to improve implementation: effective collaboration between stakeholders and the need to intensify public education. Despite challenges from both the program recipient and operator ends, IRS is an accepted intervention in the region. In order to improve the uptake and effective implementation, strategies to improve community uptake and streamline operations will be needed. These findings have policy and practice significance to improve community uptake and service operations of this novel public health intervention.