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THE DETERMINANTS OF THE HELP SEEKING BEHAVIOUR OF PARENTS HAVING CHILDREN WITH FUNGAL SKIN INFECTIONS IN FRANCISTOWN, BOTSWANA

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OBJECTIVE: While working at the Francistown City Council clinics in Botswana in 2006, the research observed that about 50% of children brought in by their parents/guardians presented with fungal skin infections. In the advent of HIV/AIDS, the incidence was increasing – especially in the rural areas. The researcher observed that the majority of those parents/guardians who presented their children to the clinician with any other complaint as the reason for encounter, did not include the fungal skin conditions in the list of the complaints. The study sought to explore the parents/guardians' knowledge, attitudes and behaviour about the skin fungal infections which determined their help seeking behaviour in that regard.

METHODS: Eight participants were purposefully selected among the Francistown City Council clinics. They were interviewed, using the same exploratory question for each respondent: **“How much do you know about this skin infection?”** The Setswana translation was **“O itse go le kae ka bolwetsi jone jo jwa letlalo?”** Follow-up clarification questions were used to encourage further elaboration on issues raised. The interviews were held in Setswana language, and were audio-taped. The recordings were then transcribed verbatim and translated into English. The ideas that emerged were developed into themes through the “cut-and-paste” method.

RESULTS: The following themes emerged:

- **The skin condition was regarded common**

It was not something of particular concern since every child in the community had it

- **The skin condition was regarded normal**

The community had come to accept it as a normal colour change in childhood

- **The skin condition was known to be infectious**

Through contact and sharing of clothes with an infected person

- **There were home remedies for the skin condition**

They used brake fluid, potassium permanganate, crushed charcoal in oil and herbs from traditional healers.

- **The skin condition did not have to be presented as a complaint to the doctor**

It was seen as not a serious health problem, having alternative home remedies, the child was not complaining about it, it was normal for a child to have it, it had previously been treated at the clinic but kept on recurring

- **The skin condition was difficult to treat**

It was difficult to treat, even with home remedies. It showed poor response to all forms of treatment

CONCLUSION: The help seeking behaviour of parents/guardians of children with fungal skin infections was determined by their acceptance that the condition was normal and common. Although difficult to treat, home remedies that could be used were available. It was therefore not to be presented to a clinician as one of the presenting complaints. The skin condition was known to be infectious.

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