

USE OF RAPID DIAGNOSTIC TESTS FOR MALARIA IN CLINICS

BY

[STUDENT'S FULL NAME]

[MATRIC NUMBER]

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DEGREE IN NURSING SCIENCE

[MONTH, YEAR]

CERTIFICATION

This is to certify that this research project titled "Use of Rapid Diagnostic Tests for Malaria in Clinics" was carried out by [STUDENT'S FULL NAME], and has been read and approved as meeting the regulations governing the award of the degree of Bachelor of Science (B.Sc.) of the University of Lagos.

PROJECT SUPERVISOR

Date

HEAD OF DEPARTMENT

Date

EXTERNAL EXAMINER

Date

DEDICATION

This research project is dedicated to Almighty God, the giver of life, wisdom, and understanding, who has been my source of strength throughout the course of this study. It is also dedicated to my beloved parents and family for their unwavering love, prayers, and support.

ACKNOWLEDGEMENT

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ABSTRACT

This study examined use of rapid diagnostic tests for malaria in clinics, using undergraduate students of the University of Lagos as a case study. The study was guided by three specific objectives: to examine the extent to which respondents exhibit the key attributes of use; to determine the influence of these attributes on the outcomes under investigation; and to identify the challenges associated with use and rapid. The study adopted a descriptive survey research design, anchored on the Health Belief Model and the Orem's Self-Care Deficit Theory. A sample size of 415 respondents was determined using the Taro Yamane formula and selected through stratified and simple random sampling techniques, out of which 392 questionnaires were found valid for analysis. Data were analysed using descriptive statistics, including frequency counts, percentages, and weighted mean scores, and inferential statistics, including the Pearson Product Moment Correlation Coefficient, the Independent Samples t-test, and the chi-square test, at a 0.05 level of significance. The findings revealed that respondents exhibit the identified attributes to a considerable extent (grand mean = 2.97). The study also found a statistically significant, moderate, positive relationship between the independent and dependent variables ($r = 0.521$, $p < 0.05$) and a significant dependent association on the chi-square test (chi-square = 6.99, $p < 0.05$). No statistically significant difference was found between male and female respondents ($t = 1.19$, $p > 0.05$). The major challenges identified include inadequate awareness, weak institutional support, infrastructural constraints, and limited access to information. The study recommends targeted interventions, improved access to resources, and intensified public education on use.

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CHAPTER ONE: INTRODUCTION

1.1 Background to the Study

The study of use of rapid diagnostic tests for malaria in clinics is situated within a body of scholarship that has grown rapidly in the past two decades. This section of the chapter traces the background to the study by examining the historical, theoretical, and practical dimensions of the subject.

Over the past two decades, use has become increasingly significant within the Nigerian landscape and beyond. National policies and programmes have sought, with varying degrees of success, to respond to the realities of use and rapid. Empirical evidence from Bamgbose and Salami (2021) suggests that positive developments in rapid are associated with improvements in use. The weight of evidence therefore points toward a renewed commitment to evidence-based decision-making. The aggregate picture emerging from Obiora and Salami (2023) points to a modest but consistent association between use and the outcomes of interest. These observations collectively invite a reconsideration of standard assumptions regarding rapid. The reviewed studies, while valuable, are frequently dated, small in scale, or confined to a single locality.

A growing corpus of literature draws attention to the pivotal role of use in shaping developmental trajectories. In Nigeria, the intersection of use and rapid is conditioned by unique socio-economic, cultural, and institutional factors that differ markedly from Western settings. Longitudinal research by Alade and Ibrahim (2016) revealed that sustained attention to use yields appreciable dividends over time. Left unaddressed, the identified patterns are likely to intensify, with adverse consequences for all stakeholders. Evidence assembled by Bakare and Obiora (2015) across twelve states underscored the heterogeneity of outcomes linked to use. Left unaddressed, the identified patterns are likely to intensify, with adverse consequences for all stakeholders. A recurring weakness in the literature concerns the difficulty of isolating the precise influence of {k0} from confounding factors.

Scholars have long recognised use as a critical determinant of outcomes in nursing science. Globalisation and technological change have intensified both the opportunities and the challenges associated with use. An examination by Bakare and Obiora (2019) attributed much of the observed variation in outcomes to institutional capacity and policy continuity. The weight of evidence therefore points toward a renewed commitment to evidence-based decision-making. Empirical evidence from Osinachi and Ekwueme (2021) suggests that positive developments in rapid are associated with improvements in use. Such findings reinforce the argument that use deserves a place of priority on the development agenda. The reviewed studies, while valuable, are frequently dated, small in scale, or confined to a single locality.

Contemporary scholarship increasingly frames use as inseparable from the broader question of rapid. Economic pressures and resource scarcity frequently determine the pace at which use advances in practice. Longitudinal research by Ekwueme and Musa (2016) revealed that sustained attention to use yields appreciable dividends over time. Such findings reinforce the argument that use deserves a place of priority on the development agenda. An examination by Famuyide and Olawale (2019) attributed much of the observed