



Adherence Rates in Mobile Health Clinics for Malaria Prevention in Southern Ghana Villages Over Two Years: A Systematic Literature Review

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Abstract

Malaria remains a significant public health issue in southern Ghana's villages, with adherence to prevention measures such as bed nets and indoor residual spraying (IRS) being crucial for control. A comprehensive search strategy was employed to identify relevant studies, focusing on adherence rates and implementation outcomes. Studies were assessed for methodological quality using predefined criteria. Adherence rates varied significantly between mobile health clinics, with an average adherence rate of 72% across the two-year period in selected villages, though these variations are not evenly distributed among all clinics. The review highlights inconsistencies in adherence to malaria prevention measures provided by mobile health clinics in southern Ghana's villages. These findings underscore the need for standardised protocols and continuous monitoring. Implementing a consistent reporting system and training programmes for clinic staff are recommended to improve adherence rates and ensure effective malaria control efforts. Treatment effect was estimated with $\text{text}\{\text{logit}\}(\pi) = \beta_0 + \beta^{-1} p X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Sub-Saharan, Africa, geographic, Village, Spatial, Mobility, Health, Systemic, Intervention, Epidemiology, RandomisedControlled, Qualitative, Quantitative, Adherence, Prevalence, Anopheles, Vector, Bioavailability, Insecticide, Treatment, Screening, Monitoring, Community, Indigenous, Integration, Contextual, Accessibility*

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