**ABSTRACT**

**Introduction:** Effective malaria management requires patients’ adherence to policies regarding malaria control to prevent the emergence of drug resistance. This study evaluated the knowledge and practices in the management of malaria among inhabitants of the Buea Health District.

**Methods:** A community-based cross-sectional survey of a random sample of 495 people living in the district with reported episodes of malaria within the last one year prior to the study was conducted between February and August 2015. Questionnaire was designed to obtain information from participants on the general knowledge of malaria and practices regarding malaria management.

**Results:** Knowledge of malaria symptoms, transmission, and prevention was reasonable among 399 (80.6%) respondents. Only 155 (31.3%) respondents could attribute the cause of malaria to protozoan of genus Plasmodium species. Majority of the survey respondents, 333 (67.2%), relied on presumptive diagnosis, 283 (57.2%) took antimalarials based on physician recommendations, 339 (68.5%) reportedly obtained antimalarials from the right sources, and 283 (57.2%) did not adhere to the treatment regimen. Practices regarding malaria diagnostic preference, treatment recommendation and adherence were not influenced by respondent's knowledge of malaria (P > 0.05). Respondents with good knowledge of malaria (OR = 2.55, 95% CI: 1.62 - 3.42, P < 0.001) were more likely to take medications from correct sources when compared to their counterparts with poor knowledge of malaria. The prevalence of self-medication in the study population was 26.9%. Majority of the respondents who were self-diagnosed were self-medicated, obtained antimalarials from wrong sources and did not adhere to the treatment regimen.

**Conclusion:** The findings reveal a high knowledge of malaria with poor practices regarding malaria management, suggesting the need for routine monitoring and evaluation of public health interventions regarding malaria management in the district to prevent early emergence of drug resistance to effective antimalarials.