

FACTORS ASSOCIATED WITH ADHERENCE TO ANTIRETROVIRAL THERAPY AMONG PATIENTS ATTENDING CARE AND TREATMENT CENTRE AT MWANANYAMALA HOSPITAL DAR ES SALAAM

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ABSTRACT

The HIV pandemic remains one of the biggest challenges to public health worldwide. Globally, major progress has been made on improving availability and provision of Anti-Retroviral Therapy (ART) for people living with HIV and AIDS (PLHA) for healthy living, prevention of HIV progression, and mortality due to AIDS. However, the prevailing suboptimal adherence is the main drawback regarding the successful treatment impacting good health outcome; it also increases the chance of developing multi drugs resistance.

Objectives: To determine the factors associated with adherence to antiretroviral therapy among people living with HIV / AIDS attending at Mwananyamala Care and Treatment Centre in Kinondoni Municipality Dar es Salaam.

Methodology: This was cross sectional study using quantitative methods. A semi structured questionnaire was used to collect data and the sampling was based on hospital medical records. Data was edited for accuracy, readability, consistence and completeness; thereafter was coded and then entered into a computer using software SPSS (Statistical Package for the Social Sciences) version 18.0.

Results: The findings show that even after accounting for other factors; sex, income, and family support were independently and significantly associated with adherence. Compared with men, women were 45% less likely to have optimal adherence [odds ratio (OR), 0.55 (95% confidence interval (CI), 0.31, 0.98), $p < 0.04$]. With regards to income, participants who had income of >200,000 Tanzanian Shillings per month were more than six-fold likely to have optimal adherence compared to those with an income of <100,000 Tanzanian Shillings per month (OR, 6.33 (95% CI, 1.83, 21.87), $p = 0.01$). Similarly, participants who received family support were more likely to have optimal adherence compared to those who did not receive any family support (OR, 2.98 (95% CI, 1.59, 5.60), $p = 0.001$)

Conclusion: The high level of Sub-optimal ART adherence found in this study (53%) is a public health concern that warrants planned strategies to increase adherence. The priority strategies include increasing health education, counseling, and development of guidelines for health care workers on monitoring adherence, strengthening peer and family support, guidance on medication self-management skills and tailoring the regimen to PLHIV life styles. The feasibility of using messages through mobile phones should also be explored.