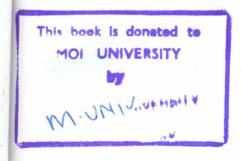
PERSPECTIVES OF PATIENTS AND HEALTHCARE PROVIDERS ABOUT SUPPORT GROUPS IN PROMOTING LONG-TERM MANAGEMENT OF DIABETES AT MTRH, ELDORET, KENYA



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ABSTRACT

Adherence to long-term therapy for chronic illnesses in developing countries averages 50%. In hypertensive diabetics the adherence rate is as low as 27%. In developing countries it is expected to be even lower. It is undeniable that many patients experience difficulty adhering to treatment recommendations. Intervention strategies addressing the issue of non-adherence in long term therapy focusing on active patient participation is proposed promoting the use of support groups as a psycho-educational strategy.

Diabetes mellitus is a chronic medical condition presenting a potential risk for multiple life threatening medical complications, should there be problems with adherence to therapy. Gaining a greater understanding of factors that influence adherence is of vital importance, especially for patients with diabetes and hypertension. The overall aim of this thesis was to investigate experiences and perspectives of diabetes and its care among people with Type 2 diabetes and health care professionals responsible for diabetes care at the Moi Teaching and Referral Hospital, Eldoret, Kenya.

A descriptive cross-sectional study design collected quantitative and qualitative data from a purposively selected sample of 299 respondents, to consider the perceived role of support groups. The study tool used was a semi-structured questionnaire, which sought personal experiences with care and support groups in the management of diabetic patients. Descriptive statistics and frequency distributions were generated to make comparisons between the health care providers and patients regarding perspectives of the role of support groups in the promotion of adherence in diabetic hypertensive patients. Within group and between groups comparisons were made using the Krusal-Wallis tests and the Mann-Whitney tests. The significant level was taken to be 0.05 levels. Logistics regressions analysis was computed to determine the association between adherence and perceived role of support groups.

The adherence level of patients was at 74% and 26% for non-adherence, and was affected by age, education level, number of doses, and duration of treatment. Support groups help patients to adhere to their treatment regimens. Barriers were discomfort experienced and number of doses. Social networks involving family members and healthcare professionals in helping the patients adhere to their treatment regimes need to be created.

There is need to put into place intervention measures that promote collaborative partnerships between the patients, health care providers and the community for purposes of promotion of long-term therapy in diabetic hypertensive patients. Recommendations suggest the development of a therapeutic alliance with patients, health care providers and further research should consider the logistical implications.