ABSTRACT

Introduction: Diabetes is a chronic disease caused by inherited and / or acquired deficiency of insulin production by the pancreas, or by the ineffectiveness of the insulin produced. There are majorly two types of diabetes, type 1 and 2. Type 2 diabetes is the most common and results from the body's inability to respond properly to the action of insulin produced by the pancreas. Type 2 diabetes is projected to rise from 285 million in 2010 to about 428 million cases in 2030 among adults over 20 years of age, globally (Rahati, S., et al., 2014). In Tanzania, local surveys using similar methods indicated that Type 2 diabetes has risen by 6-folds in the past decade, (Mbanya, J., C., N, et al., 2010). In Uganda, out of the 2061 type 2 diabetics accessing care at Gulu Regional Referral Hospital, diabetic clinic, only 289 (14%) complied with T2D control measures despite availability of anti-diabetes medication, blood glucose testing, medical check-ups and emphasis on exercise and recommended food. Broad objective: To assess factors associated with adherence to type 2 diabetes control measures among adults attending the diabetic clinic at Gulu Regional Referral Hospital.

Methodology: A cross-sectional study was used to compile data on both independent and dependent variables. Study participants were enrolled using simple random sampling. A self-administered questionnaire and data extraction form were used to gather quantitative data while a focus group discussion guide was employed to collect qualitative data. Data analysis was done using the Statistical Package for Social Sciences.

Results: The study found that having knowledge on recommended food for diabetic patients (AOR 2.09; 95% CI 1.31-4.74), regular medical checkups at a diabetic clinic (AOR 7.92; 95% CI 3.19-9.54) than at a general clinic (AOR 2.99; 95% CI 1.48-8.29), having knowledge on importance of regular testing for blood sugar (AOR 9.65; 95% CI 6.36-13.97), waiting at the clinic for less than 40 minutes (AOR 8.75; 95% CI 4.63-12.21) and belonging to a support group (AOR 5.37; 95% CI 2.19-8.18) were independent predictors for adherence to type 2 diabetes control measures.

Conclusion: Knowledge on type 2 diabetes control interventions is key to enhance adherence among diabetic patients.

Recommendations: Health workers should increase patients' knowledge on the importance of the diabetes control interventions to improve their compliance to these measures which will reduce complications. Patients should seek diabetic care at a diabetic clinic for not only quality care but also to receive diabetes related information.