

Abstract

HIV/AIDS is still a serious problem world over. Many HIV positive people worldwide have been started on highly active anti-retroviral treatment (HAART) which has improved the quality of life. Although HAART has improved the quality of life and reduced the incidence of AIDS defining illnesses, some patients gradually stop honouring clinic appointments.

A cross-sectional study to determine prevalence and factors associated with adherence to clinic appointments was done at JCRC –Lubowa, Wakiso district. The number of participants interviewed was 377, 64.2% were female, while 35.8% were male of mean age 41.9 years (SD=9.51), age range of 20-75 years.

Objective: To determine the prevalence and factors associated with adherence to clinic appointments among patients attending JCRC adult OPD clinic.

Methods: The study design was cross-sectional, and quantitative in nature. Structured questionnaires and interviews were used in collecting data, from HIV positive patients who had attended JCRC in the last one year. Other data like CD4 count was obtained from the Patient Care Research Database.

Results: The proportion of JCRC patients who have missed schedule appointments in the last one year is 37.14%. Majority 94(25.07%) had missed at least one scheduled visit, while 28(7.47%) had missed more than three visits in the last one year. The prevalence of bad adherence to clinic appointments at Joint clinical Research Centre was found to be 37%, while that of good adherence was at 62.7% in patients who have been attending JCRC adult out patient clinic in the last one year. Factors associated with adherence to clinic appointment were; fair quality of health services at JCRC, current performance scale of between I –II, current CD4 count of greater than 350 cells/microlitre, a higher level of education (Secondary and university level) and means of transport.

Significance of the study: Conducting this study has helped to determine the prevalence and factors such as means of transport, performance scale level, and quality of health care that are associated with adherence to clinic appointments in HIV positive patients. Also from the information obtained, simple, efficient and replicable ways of assessing and maintaining good adherence to clinic appointments may be designed.