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A prospective exploration of adherence using health belief model among HIV/AIDS patients

Background: The introduction of Highly Active Antiretroviral Therapy (HAART) transformed the treatment of Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS), improving the quality and greatly prolonging the lives of many infected people. Adherence to these medications has been a major challenge among these patients. There are relatively few rigorous evaluations of interventions to promote adherence to these medications, even fewer have explicitly utilized behavior change theories. The Health Belief Model (HBM) is a tool that scientists use to try and predict health behaviors.

Objectives: The broad Objective of this study is to investigate the influence of health beliefs on medication adherence among HIV/AIDS patients in South Eastern, Nigeria using the Health Belief Model as a theoretical construct.

Methods: This was a cross sectional and survey design study and data extrapolated using qualitative and quantitative methods. A sample of 1300 respondents who have been on HAART treatment for six months or more participated in the study. A questionnaire with biographical data information and questions aimed at ascertaining level of adherence using health belief concepts such as perceived severity, perceived barriers, perceived susceptibility and perceived value to treatment were utilized. Other concepts such as knowledge of treatment, side effects and cost of treatment, were also investigated. Data obtained was analyzed with

the help of IBM SPSS Software 2015, utilizing descriptive statistics for demographics/adherence relationships and regression analysis for health belief concepts/adherence.

Results: The study sample were mainly male (66%) while 86% of the total sample fell within 18-37years range. 74% were mostly Christians, 52% of total sample were unemployed, 50% were single and 66% of the respondents had high school education and above. Analyzing the demographics of respondents, there was no statistically significant relationship between occupations, age group, marital status and Adherence. But a statistically significant relationship between high school (and above) and Adherence. The Knowledge base of HIV and HAART among respondents was high even among lowly educated respondents. The most prevalent reasons for missed dose/doses were related to avoidance of side effects (24%), forgetfulness (23%) and extreme confidentiality (22%). A statistically significant relationship was observed when applying regression of the % adherence on aggregate score on perception of severity, perception of susceptibility and perception of barriers to treatment. However, a non-statically significant relationship resulted, while analyzing same on perception of the value of treatment of HAART.

Conclusion: This study revealed significant relationship between high school educated respondents (and above) and adherence to HAART. It also revealed that the

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knowledge base of respondents on HAART treatment was high even in lower educated groups. It was further observed that there was a direct relationship between adherence and perception to key concepts of the health belief model like 'severity', 'susceptibility' and 'barriers' while there was

low predictive relationship to perceived 'value' to HAART treatment. This study highlighted the importance of the Health Belief Model and its role in predicting adherence to HAART.

Biography

Paul Agbulu is a Medical sociologist, Clinical Pharmacist and Research scientist. Currently an Executive QI specialist with Health Architects, Edmonton, Canada. Health Architects is an organization which uses digital person-centered design led data-driven solutions in Health care systems. He was past senior consultant, Quality and Patient Safety, Alberta Health Services, Canada. Was also past Senior Clinical Audit coordinator, Faculty of Medicine and Dentistry, University of Alberta, Canada. A Current licensed Clinical Pharmacist in Alberta, Canada, Certified Clinical Research Practitioner and health care systems expert. Major work is in the areas of applications of the use of medical sociological theories, social-psychological tools and patient centered design models in health care systems in Africa and Canada.

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