

Title: Factors influencing non-adherence to antiretroviral therapy among HIV infected youth patients attending Kangemi and Coptic health HIV/AIDS clinics in Nairobi, Province, Kenya.

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Abstract: HIV remains a global health problem of unprecedented dimensions. Unknown 27 years ago, HIV has already caused an estimated 25 million deaths worldwide and has generated profound demographic changes in the most heavily affected countries. Young people aged 15-25 account for an estimated 45% of new HIV infections worldwide. Antiretroviral therapy (ART) requires a high-level (> 95%) adherence. Kenya is scaling up ART access programmes to the HIV infected youth, however, significant proportions of HIV -infected youth patients have high levels of non-adherence and this can lead to devastating public health problems. Published data on non-adherence to ART among the youth in Nairobi is limited. The objective of this study was to determine important factors influencing non-adherence to antiretroviral therapy among HIV I AIDS male and female youth attending Coptic (Ngong road) and Kangemi Health Centres, Nairobi, Kenya. A cross-sectional study involving 300 youth HIV/AIDS patients attending Coptic (Ngong road) and Kangemi Health Centres between August and December 2010 was conducted. These youth patients were on ARV drugs. Data were collected from the respondents using interviewer-administered questionnaires to patients and self-administered questionnaires to ten key informants (nurses and clinicians in charge of HIV I AIDS clinic) selected by purposive sampling. The key variables examined were demographic, other characteristics of the patients and non-adherence factors. Data were analysed using Statistical Package for Social Sciences (SPSS) version 17.0 for frequencies, cross-tabulations and Chi-Squared test and statistical significance set at $p < 0.05$. Results show that the prevalence of non-adherence to ART was 30% according to visual analogue scale and 6% by four-day self-report recall. Factors that were significantly associated with non-adherence were costs of transport ($X^2 = 8.147$, $df = 1$, $P = 0.004$), age of respondent ($X^2 = 26.27$, $df = 10$, $p = 0.003$), occupation ($X^2 = 26.427$, $df = 1$, $p = 0.0001$), ART regimen ($X^2 = 20.656$, $df = 1$, $p = 0.0001$) stigma ($X^2 = 10.526$, $df = 1$, $p = 0.001$) and ability to follow treatment instructions ($X^2 = 23.732$, $df = 1$, $p = 0.0001$). The study showed that being young, not employed, having no money for transport, having stigma on ART, unable to follow treatment instructions and being on ART regimen influenced non-adherence to ART. In conclusion, HIV/AIDS infected youths attending Coptic and Kangemi Health Centres have high non-adherence rates to ART according to visual analogue scale and four-day self-report recall. To improve ART adherence among the youth, the study recommends to the government to consider social-economic subsidies such as transport vouchers to patients who genuinely cannot afford the cost of transport to collect their medications, develop strategies to reduce unemployment among the youth and intensify promotion against stigma surrounding AIDS patients.