

ABSTRACT

Non-adherence to prescribed drug regimens is common, whether the disease is acute or chronic or whether the patient population is adult or paediatric. Ensuring high level of adherence to anti-retroviral medication (ART) is a priority in treating people living with HIV and AIDS. At least 95% adherence to ART is optimum and studies have shown that adherence less than 95% is associated with treatment failure. Numerous interventions to improve adherence have been investigated in both developed and developing countries but the majority of the work has focused on adherence in adults and data in children is limited. It is therefore essential to have an understanding of the factors influencing adherence among children. Adherence in children cannot be fully studied if we do not recognize the involvement of primary caregivers who largely determine how well and often the ART medication is taken. A cross-sectional study of primary caregivers aimed at examining the extent to which their attitude and practices affect the adherence of ART in children was conducted. Interviewer administered questionnaires were used to collect data from 126 primary caregivers. The data was complemented with key informant in-depth interviews with the health workers at the Comprehensive Care Centre (CCC) and two focus group discussions (FGD) of the primary caregivers. The questionnaire respondents were not eligible to participate in the FGD. Data was stored in hard copy and in electronic form. Analysis was done with the use of computer package Statistical Package for Social Scientists version 12 (SPSS 12). The Mann Whitney U Test and the Persons Chi-Square Test were used to test relationships between variables. The Z-Test analysis ($P < 0.05$) was used to test the hypothesis. In this study majority (81.7%) of the primary caregivers were parents to the children. A 97.2% level of adherence was observed in the study. Majority of the caregivers interviewed reported that ARVs were effective and that they had helped to improve the quality and prolong life span of the children. The relationship of the caregiver to child and the level of education of the caregiver did not influence the level of adherence to ARV among the children. The need to give the children their ART medication transcends the relationship between the children and the education level of to the caregiver thus maintaining an adherence level of 97.2%. Ninety six percent of caregivers were stated that it was important to know their HIV status. The caregivers were also aware of the appropriate actions to take when

adverse drug reaction is suspected. The study found that attitude of the care givers was found to influence the adherence to ART ($P < 0.05$). Key recommendations include; ensuring information and education on ART medication in children is available to the care givers, in addition to the ART medication the caregivers need nutrition and financial support to further improve the uptake of ART in children and that it would be useful to carry-out a similar study in the rural setting and compare results of adherence levels to ART between urban and rural setting.