FACTORS AFFECTING PATIENT ENROLLMENT INTO HIV CARE IN KABAROLE HOSPITAL, KABAROLE DISTRICT UGANDA

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ABSTRACT

Background: Enrollment of HIV positive clients into care after HIV Counseling and Testing (HCT) provides a gateway to care and treatment services which improves a patient's quality of life. However, a total of 40% of clients testing HIV positive in Kabarole hospital are not enrolled into care though MoH standard requires that everyone who tests positive is enrolled into care. This study aimed at identifying factors that affect enrollment of newly diagnosed HIV-positive individuals into HIV care.

Objectives: To identify individual, community and health facility factors associated with enrollment into HIV care in Kabarole hospital.

Methodology: A descriptive cross sectional study involving both quantitative and qualitative data collection methods was conducted in Kabarole district. 371 respondents from the community who tested HIV positive from Kabarole hospital were interviewed using structured questionnaires. In addition, 9 key informants were interviewed and data generated was analyzed thematically.

Results: The study established that 87.9% of the study participants interviewed (326/371), were enrolled into HIV care in the different health facilities. Clients who paid for certain medical services were less likely to enroll into care (PR= 0.57, 95% CI; 0.40, 0.80). The factors that facilitated enrollment into HIV care included home visiting by a health worker or community volunteer (PR= 1.15, 95% CI; 1.07, 1.23) and disclosing one's HIV status (PR = 3.57, 95% CI; 1.84, 6.92).

Like from quantitative data, non-disclosure of an individual's positive HIV status to their partners negatively influenced enrollment into HIV care as revealed from some key informants.

Conclusion and recommendation: Linkage to HIV care after HCT is still a challenge and there is need to ensure that all HIV positive clients are traced until they are enrolled into care from facilities of their convenience. HIV clients' expenditure on medical services should be minimized to reduce the cost burden on patients.