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Clients and Health Workers' Perception of Community Pharmacy Based Anti-retroviral Therapy Model in Federal Capital Territory, Abuja, Nigeria

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Abstract

Background: The quality of healthcare can easily be measured through clients' satisfaction. There is paucity of data with regards to clients' and health workers' satisfaction with a community pharmacy antiretroviral therapy (Co-Pharm) model in Nigeria.

Objective: We assessed clients' and health workers' perception and knowledge of community pharmacy anti-retroviral therapy model in Federal Capital Territory (FCT), Abuja, Nigeria.

Methods: This is a cross-sectional survey of clients' and health workers' perception and knowledge of a Co-Pharm model conducted in eight community pharmacies and four General Hospitals offering antiretroviral therapy (ART) services in the FCT-Abuja, from January 2018 - July 2018. A self-administered structured questionnaire, consisting of 17 variables was applied. Summary statistics and student T-test were applied using the statistical package for social sciences SPPS.

Results: We included 382 clients and 55 health workers in the analysis. Majority of the participants fall within the age range of 30 - 49 years and were majorly graduate who are self-employed. Majority of the clients [309 (81%)] were highly satisfied with the model and almost all the healthcare workers [46 (84%)] said they were aware of the model and would refer patients to the community pharmacies.

Conclusion: Clients and health workers have a positive perception of services and are satisfied with the ART Co-Pharm model utilization.

Keywords: Antiretroviral Therapy (ART); Federal Capital Territory (FCT); Nigeria

Introduction

The quality of healthcare can easily be measured through clients' satisfaction. There is paucity of data with regards to clients' and health workers' satisfaction with a community pharmacy antiretroviral therapy (Co-Pharm.) model in Nigeria. For nearly three decades, hospitals have been the only source of anti-retroviral therapy (ART) for many people living with HIV/ AIDS [1]. The World Health Organisation is promoting the use of community based ART in a global strategy to end HIV/AIDs by 2030.

Citation: Gesa Adonis Akaa., et al. "Clients and Health Workers' Perception of Community Pharmacy Based Anti-retroviral Therapy Model in Federal Capital Territory, Abuja, Nigeria". Acta Scientific Medical Sciences 6.10 (2022): 47-50. The community based ART approach is overwhelmingly supported because it helps in delivery HIV treatment services closer to the people and ART access, retention in care and decongestion of the already over burdened public health facilities (World Health Organisation 2016 Guideline) ART stands for Antiretroviral Therapy which means treatment with drugs that inhibit the ability of the human immunodeficiency Virus (HIV) or other types of retroviruses to multiply in the body.

Community pharmacy ART model (Co. Pharm.)

It is a community based ART model whereby registered community Pharmacies linked to hospitals receive referred stable Adult Patients without co-morbid conditions from the hospitals for onward management in terms of Pharmaceutical Care drug refill and basic clinical check, BMI etc.

The Art Prescription written by Physicians are dispensed by the Community Pharmacist who also counsel, monitor adherence and adverse drug reaction in addition to drug logistic and data management services.

Prescriptions are generally refilled bimouthly, only adult first line regimes and Cotri moxazile Prophylaxis are offered in the Community Pharmacy in Nigeria [2].

In service delivery, Quality is defined by the gap between the expectation for the service and the perception of how it was delivered and this determines patient's satisfaction. Therefore measuring the perception of patient is essential in evaluating the success of therapy and needs of patients since patients constitute an essential source of information about accessibility and effectiveness of care (Jose., et al. 2015). Patients perceive service quality when patient compares his/her expectations with perceptions of service received. This service perception is from when a patient enters the pharmacy, the pharmacist vets the drug items before dispensing ending with payment to a cashier, which is not the case with HIV/ AIDs medication, (ART drugs are free). A patient's experience when using such services can radically influence his/her perception of service quality. Patient satisfaction has been defined as the patient's "personal evaluation of health care services and providers". It reflects provider's ability to successfully deliver care that meets patients' expectations and needs [3].

Objective of the Study

We assessed clients' and health workers' perception and knowledge of community pharmacy anti-retroviral therapy model in Federal Capital Territory (FCT), Abuja, Nigeria.

Specific objectives

- To access level of patient satisfaction with services rendered by community pharmacist
- To determine the level of perception of health workers about the Co-Pharm. model in Nigeria.
- To assess the extent to which the Co-Pharm model is been utilized.

Materials and Methods

This is a cross-sectional survey of clients' and health workers' perception and knowledge of a Co-Pharm model conducted in eight community pharmacies and four General Hospitals offering antiretroviral therapy (ART) services in the FCT-Abuja, from January 2018 - July 2018. A self-administered structured questionnaire, consisting of 17 variables was applied. Summary statistics and student t-test were applied using the statistical package for social sciences SPPS.

Ethical approval was given by the Federal Capital Territory Health ethical research committee before carrying out the research. The consents of the Clients were sought after explain the details, benefits and purpose of the study. Approved number FHREC/2018/01/64/31-05-18.

Inclusion criteria

- All adult patients on ARV therapy for at least 6months.
- Patients who are very stable clinically.
- Patient with recorded undetectable viral loads.
- Patient with good medical adherence history.
- Patient must be on first line drugs combination.
- Patient without any co morbid condition.
- Patient must be resident within FCT or its environs.

Exclusion criteria

- All Adult patients with Co-morbidity.
- Positive Children.
- Positive Pregnant and breast feeding mothers.

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- Patient on second line therapy.
- Patient that defaulted.
- Patient with high viral load.

Results

Patient Characteristic, Knowledge and Satisfaction with Co-Pharm Model

	Demographic characteristic of respon- dents:	
Variables	Clients n: 382	Health Workers n: 55
Gender		
Men	162 (42%)	16 (29%)
Women	220 (58%)	39 (71%)
Major Respondent		
Age wise	30-49yrs	30-49yrs

Table 1

	Satisfaction	
Variables	Clients n: 382	Health Workers n: 55
Strongly agreed	309 (81%)	18(32%)
Moderately agreed	73(19%)	28(55%)
Disagree	0(0%)	9(17%)
Table 2		

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	Perception	
Variables	Clients n: 382	Health Workers n: 55
Strongly agreed	140 (37%)	21(39%)
Moderately agreed	212(56%)	25(45%)
Disagree	28(7%)	9(16%)

Table 3

Health workers from the hospital (main stream Health workers) willingness to send patients to Community Pharmacy for **Co-Pharm Model Utilization**

	n:41
Variables	Health Workers
Strongly agreed	13(32%)
Moderately agreed	21(51%)
Disagree	7(17%)

Community Pharmacy staff perception/utilization about Co-Pharm. Model

	n:14	
Variables	Health Workers	
Strongly agreed	9(64%)	
Moderately agreed	5(36%)	
Disagree	0(0%)	

Table 5

Discussion

From the study, it is evidenced that majority of the participant across the three category of respondent are female. This is similar to the study of Shazwani., et al. [4] who also reported a higher percentage of female (55%) participating more in their study in Malaysia. Furthermore, the result indicates that married people across the three categories of respondents participated more in the study and that majority of the respondents are within 30 - 39 and 40 - 49 years. It's also in tandem with the findings of Ashenafi., et al. [5] who also reported similar findings.

The study reveals that the respondents are satisfied with services of community pharmacy anti-retroviral therapy in the study area. This is consistent with the study of Ashenafi., et al. [5] who submit that clients are very much satisfied with Anti-Retroviral Therapy Model (ART) Services in Ethiopia. The study of Aderemi-Williams., et al. [3] also reveals that clients visiting community pharmacies in Owerri Nigeria have a positive perception of the services provided by pharmacists. More studies like Also by Okoye., et al. [6] in South, Nigeria and Owonaro., et al. [7] also concluded the same as above. On the contrary, Opera., et al., (2010) in Benin, Yang., et al. [8] in South Korea concluded a low patient satisfaction as against the finding of this survey.

The study further evaluates the perception of mainstream health workers and extent of their awareness on the operations of community pharmacies. The results indicates that majority of the health workers are aware of the existence of community pharmacy anti-retroviral therapy. The survey further reveal that the health workers do encourage and are always ready to refer stable patients to visit the community pharmacy to seek ART services and this is based on the belief that the community ART model/services provider by the community pharmacies will improved patients' access

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to ART drugs, this would lead to good adherence and high retention in care of the patients. The reasoning behind this might not be far from the belief of health workers that the mainstream hospitals needed to be decongested to enable other patients to be attended to and new patient enrolled into the HIV/AIDs treatment programme at the Hospital, Avong *et. al.* [2].

Finally, the study assesses the perception of Community Pharmacy staffs on the extent to which the ART.

Model is being utilized. Findings' emanating from the study indicates that there is effective management of patients by the Community Pharmacies within the framework of the community ART model. The study further reveals that, all that is required to run an effective and efficient community pharmacy are being provided or are available at the Community Pharmacy outfits in the study area by IHVN. These requirements include but are not limited to temperature monitoring device, having a good serene environment fitted with air conditioner and good consulting and counseling room to take care and control for patients' privacy. With the availability of Air-conditioned rooms, the integrity of ARV drugs is guaranteed [9,10].

Conclusion

Clients and health workers have a positive perception of Co-Pharm. Model services. Clients have very high satisfaction with the quality of services rendered by the Community Pharmacy, and are satisfied with the ART Co-Pharm. model utilization.

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