Determinants of Utilization of HIV Transition Clinic Services by

Young Adults at the Infectious Disease Institute, Kampala, Uganda

By

NYABIGAMBO AGNES (MHSR)

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SUPERVISORS:
LYNN ATUYAMBE (MPH, PhD)
HARRIET BABIKAKO (MB.ChB, MPH)
ANDREW KAMBUGU (MB.ChB, M.Med (Internal Medicine))

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Abstract

Introduction: Though there are established HIV transition programmes including the Transition Clinic of Infectious Diseases Institute (TC-IDI), Kampala, Uganda providing HIV health care management, support groups and STIs treatment to young adults living with HIV, there is minimal research that has been conducted in this population to understand the utilization levels, determinants of utilization, and the general wellbeing of these young adults.

General objective: The main purpose of this study was to understand the levels and determinants of utilization of the HIV Transition Clinic services by young adults at Infectious Diseases Institute, Kampala, Uganda.

Study design and methods: This cross sectional study used both quantitative and qualitative methods. It was conducted between March and May 2012 at the Transition Clinic of Infectious Diseases Institute (TC-IDI), Kampala, Uganda among young adults receiving HIV care between the ages of 15-24 years. The sample size included 379 respondents. At analysis utilization was categorized into two levels; regular (kept all the appointments visits) and irregular (missed one or more appointments visits) utilization. The association between determinants and utilization was analyzed using univariable, bivariable and multivariable logistic regression. The 18-item general wellbeing schedule (GWS-18) was used to assess the general wellbeing of young adults. Factor analysis was used to systematically group the GWS-18 questionnaire into two factors that is anxiety and self-control. Factor analysis was used to determine the correlated factors and unpaired t-test was used to test for a difference in mean overall GWS scores and subscale scores between regular and irregular utilizers of the transition clinic. Univariable, bivariable and multivariable logistic regression was used to determine the association between
utilization and general wellbeing. In-depth interviews were carried out among young adults. Content analysis was used to analyze qualitative data.

**Results:** Of the 379 total respondents, only 32.4% (123/379) were regular utilizers of the transition clinic. The male to female ratio was 1:5. The determinants associated with HIV transition clinic regular utilization were CD4 cell count category of >250/µl (AOR 0.58, 95%CI: 0.36-0.95), not currently on ART (AOR 0.27, 95%CI: 0.15-0.47) and did not receive counseling services (AOR 0.47, 95%CI: 0.27-0.83). The GWS-18 tool was highly acceptable, easily administered and the 18 items were reduced to seven items. The overall scale demonstrated good internal consistency with Cronbach’s alpha of 0.82. There was no statistically significant association between general wellbeing and utilization of the HIV transition clinic. When we explored the experiences of young adults in the HIV transition at Infectious Diseases Institute qualitatively we discovered that peer, family and healthworker support influenced regular utilization of this clinic. Finally poor general wellbeing influenced irregular use of the HIV transition at Infectious Diseases Institute, Kampala, Uganda.

**Conclusion:** There are low levels of regular utilization of the TC-IDI. Female young adults have better service utilization rates compared to the males in TC-IDI. However, having a CD4 cell count between 250-2603/µl, not being on ART, not receiving HIV counseling services and having poor general wellbeing reduce the chance regular use of the HIV transition clinic among young adults living with HIV.

**Recommendations:** The young adults in the HIV transition clinic should be screened on a regular basis to detect those with a CD4 cell count of <350/µl and counseled for early initiation of ART so as to enhance regular HIV transition clinic utilization. In addition a reminder system
like peers, family and mobile phone messages should be set up for young adults so that they are reminded of their appointments hence facilitating regular use of the transition clinic.