

**KNOWLEDGE,
ATTITUDE &
PRACTICES OF
TUBERCULOSIS
PATIENTS ABOUT
TUBERCULOSIS: A
MIXED METHOD STUDY
FROM A PACIFIC
ISLAND NATION,
SOLOMON ISLANDS.**

Research Question

- *What are the current knowledge, attitude and practices of NRH Admitted TB patients about TB?*



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BRIEF BACKGROUND

- TB is still a major public health challenge in Solomon Islands. About 400 TB cases were registered every year, mainly young adults and 20% are children indicating high transmission
- Most incident cases all forms are in the 15-34 age group (42.2%) while children under 15 represent 20%
- Solomon Islands has the second highest number of TB cases in the Pacific Island Countries and Territories (PICTs)
- TB patients are not usually bedridden or clinically sick
- TB patient still active to move around whenever unnecessarily and that increases movement to come into contact with other patients within the hospital setting.
- TB is therefore a threat in both community and healthcare settings.
- Knowledge about TB and how it is spread is important to inform individual behavior and reduce TB transmission in community and healthy settings.





How did I do my research?



- Interviews were conducted with 20 TB patients. The interview had Seventeen (17) close ended questions and 7 open ended questions.
- Interviews were recorded using my Samsung phone voice recorder.
- Conducted March 2018.
- Project No. HRE044/17



What did I find?

TB- Related Knowledge

- 70% (n=14) of TB Patients were aware that TB was caused by a bacteria, 5% (n=1) stated TB was not caused by a bacteria and 25% (n=5) were not sure.
- 55%(n=11) of TB patients correctly stated the modes of transmission.
- 45% (n=9) of TB patients correctly stated ways of preventing TB.



Finding One:

-Although most patients knew about what caused TB, that it was preventable and easily spread between people, there was inadequate levels of knowledge about how it spread, the signs and symptoms and how to prevent TB.

-Patients stated their interest in receiving health education whilst they were in hospital but were not receiving any.

Implications:

Admitted patients and the general community need more in-depth knowledge of tuberculosis if the health system will have people presenting early when they have symptoms, and to take actions to prevent its spread.



What did I find?

Finding 2:

TB- Related Attitudes and Practices

- Patient feeling ashamed and afraid of being infected with TB or transmitting TB to their family member.
- They felt that they were treated differently by other people after being diagnosed with TB, with family members or others keep distance away from them.
- Family members of TB patient keep distance away from patient.



Implications:

- Stigma can contribute to delayed care seeking and thus increase community transmission of TB
- Public information campaigns to sensitize and educate the community on TB, stigma and its impacts on the patient are essential. Special workshops and seminars within schools and colleges would also help in spreading awareness on TB and its impact on the society.



What did I find?

Cultural Concern

- Patients concern on cultural context of male and female inside the TB ward.

Finding 3:

- Patients were concerned about men and women sharing bathrooms and lying on beds near each other in the TB ward. This was not culturally appropriate.

Implications;

- This cultural concern may prevent people from either seeking care and/or staying in hospitals for the full duration of the treatment.



So what should be done?

RECOMMENDATIONS

1. Increase the coverage and quality of health promotion for admitted patients and the general to support early diagnosis and treatment, and prevention of transmission.
2. Strengthen the support and training to nurses and health workers on TB wards to provide health education and counselling to inpatients.
3. Community and health staff programmes to reduce stigma against people with TB and their families is needed.
4. TB wards and related facilities need to be remodeled to address cultural concerns.
5. Strengthened monitoring and evaluation, and response to findings must be a key part of the TB Programme in Solomon Islands.



CONCLUSION

- To the best of my knowledge, this is the first time a KAP study of TB among TB patients was being conducted in Solomon Island.
- Knowledge about cause and treatment of tuberculosis among TB patients was quite good, however, misconceptions also exist.
- TB patients displayed diverse knowledge of and mixed attitudes and practices towards TB. Hence, public health education on the cause, symptoms and mode of transmission of TB would be important towards the prevention and control of TB in the present study area.
- Finally, there is need for both community mobilization and public education on TB in order to reduce the burden of TB in Solomon Island. As it relates to the public health implications locally, the findings support the need to specifically include health workers as one of the target groups for awareness activities in order to improve capacity to manage TB from diagnosis to cure.



Tagio tumas algeta

Thank you