

# A mixed method study of the barriers and facilitators of adherence to antiretroviral treatment at a public health facility in Ghana

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## Abstract

**Background:** Poor adherence to antiretroviral therapy (ART) increases the risk of viral drug resistance and reduces treatment effectiveness leading to greater risk of death and increased risk of viral transmission. **Objective:** Assess current adherence levels to ART among patients in Ghana, exploring barriers and enablers of adherence to it, to provide future guidance to all key stakeholder groups. **Method:** A mixed method approach comprising of a cross-sectional survey followed by a focused group discussion of the patients and an in-depth interview of four key health professionals working in the ART clinic of Atua Government Hospital, primary care health facility in the Eastern Region. A structured questionnaire was used to assess current adherence levels and their determinants among 231 randomly selected patients attending the clinic between July to September, 2019. Quantitative data analysed using bivariate and multivariate methods, qualitative data analysed using a thematic framework approach. **Results:** Adherence levels were 42.9% among our study population. Lower adherence to ART was associated with patients' belief in herbal medicine (aOR =0.34 CI: 0.19-0.61). Other barriers included low motivation arising from pill fatigue, forgetfulness, frequent stock out of medicines, long waiting times and worrying side-effects; while enablers included measures that ensure improved assessment of adherence and those that improve patient satisfaction with ART services. **Conclusion:** Adherence to ART among patients living with HIV was sub-optimal in our study population. Understanding of the barriers

and enablers of adherence to ART is a key step to developing evidence-based adherence improvement strategies to enhance clinical outcomes.