

Individual and environmental determinants of adherence to antiretroviral therapy among people living with HIV in Ghana

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Individual and environmental determinants of adherence to antiretroviral therapy among People Living with HIV in Ghana.

Summary

The introduction of highly active combination antiretroviral medication (ART) dramatically transformed HIV from a deadly disease to a chronic, manageable condition in settings where treatment is widely available. Non-adherence to ART has been linked to an increased risk of uncontrolled viral load, medication resistance, treatment failure, and increased viral transmissibility. Promoting ART adherence among people living with HIV (PLWH) requires a clear understanding of context-specific individual and environmental determinants of ART adherence.

This dissertation presents the results of five empirical studies with the overarching goal of finding the individual and environmental determinants of ART adherence among people living with HIV in Ghana toward the global goal of eliminating HIV by 2030. In addition, to gain insights into the factors influencing ART adherence among PLWH in Ghana and recommend ways to improve adherence.

The **first study (Chapter 2)** is a qualitative analysis of factors influencing antiretroviral adherence among people living with HIV (PLWH) in Ghana. The aim of this study was to explore the individual and environmental factors influencing ART adherence among PLWH in the Bono East Region, in the middle belt of Ghana, using qualitative interviews and focus group discussion. This study employed 20 semi-structured in-depth interviews and three focus group discussions (FGD) with 29 PLWH visiting one of three antiretroviral clinics. The thematic analysis included PLWH clinic visits, knowledge, attitudes, and self-efficacy related to ART adherence, psychological well-being, and stigma. In the **second and third study (presented together in one paper in Chapter 3)** we explored the behavior of healthcare providers working in ART clinics (AHCP; frequent interactions with PLWH) and those working in the general healthcare setting (GHCP; less interaction with PLWH) towards PLWH. This study qualitatively explored and compared the individual and external factors influencing AHCP and GHCP behavior towards PLWH. This qualitative study employed a semi-structured interview approach to guide individual in-depth interviews with 33 randomly selected HCPs (nurses, physicians, and biochemist). The interview protocol was informed by the empirical literature and included topics such as perceptions and experiences working with PLWH, HIV-related risk perception, HIV-related training

received, knowledge about HIV, emotions towards PLWH, institutional, supervisors, and collegial support related to patient care. Thematic analysis was applied to the interview data. The **fourth study (Chapter 4)**, explores the individual and environmental factors influencing stakeholders' HIV treatment policy implementation in Ghana using qualitative, semi-structured, in-depth interviews among fifteen policy stakeholders (in different management positions) towards improving HCP non-stigmatizing behavior towards PLWH to improve ART adherence. The **fifth study (Chapter 5)**, which is a 6-month prospective study, was guided by the findings of study one (Chapter 2) and the literature review. This study assessed the relative importance of earlier identified psychosocial constructs in the prediction of adherence intention and behavior among 750 people living with HIV in the Bono and Bono East regions of Ghana. PLWH were enrolled at baseline and followed up at three-time points. At baseline, PLWH provided socio-demographic information and for each follow-up visit, they received an interview on psychosocial factors (intention, outcome expectancy, resilience, self-regulation, and anticipated public stigma). Finally, **chapter 6** summarizes and discusses the major findings of the five studies in the antiretroviral adherence literature. This chapter includes reflections on the research approaches used, recommendations for practice and future research, practical implications of the study findings for intervention, and concluding remarks.