

**AN INVESTIGATION INTO THE KNOWLEDGE LEVELS
OF CLIENTS ON LONG TERM TUBERCULOSIS
TREATMENT AT KWEKWE GENERAL HOSPITAL**

by

PORAI MARY SAMKANGE

submitted in part fulfillment of the requirements for
the degree of

MASTER OF ARTS

in the subject

HEALTH STUDIES

at the

UNIVERSITY OF SOUTH AFRICA

**SUPERVISOR: MRS H DU TOIT
JOINT SUPERVISOR: MRS JE SMITH**

NOVEMBER 2005

Student number: 3055-194-3

DECLARATION

I declare that **AN INVESTIGATION INTO THE KNOWLEDGE LEVELS OF CLIENTS ON LONG TERM TUBERCULOSIS TREATMENT AT KWEKWE GENERAL HOSPITAL** is my own work and that all sources that I have used or quoted have been indicated and acknowledged by means of complete references.

PORAI MARY SAMKANGE

30 OCTOBER 2005

ACKNOWLEDGEMENTS

I wish to express my heartfelt thanks and appreciation to the following:

- **Mrs HS du Toit** and **Mrs JE Smith**, my supervisors, for their guidance, encouragement, advice and patience throughout the project
- **Mrs M Burger**, the librarian, for her assistance with the literature sources
- **Dr E Munongo**, Medical Superintendent, Kwekwe General Hospital, for granting me permission to carry out the study
- **All the respondents**, for their time, sharing and input
- **Sister Irene Mapuranga**, for helping me with interpreting the statistics
- **Godfrey**, my dear husband, for his uncomplaining attitude, understanding, support and love.
- **Chido, Tinashe, Tatenda, and Ruvarashe**, my children, for their understanding, patience and love.
- **Cephas** and **Janet Siziba**, my father and mother, who made me what I am and always believed in me
- **Mrs IM Cooper** for editing the manuscript and **Mrs EC Coetzer** for the typing and final format of the manuscript.
- Last but not least, **GOD** my **Heavenly Father**, for the strength and inspiration to conduct this study

Dedication

I dedicate this study to my HUSBAND, AND CHILDREN

***AN INVESTIGATION INTO THE KNOWLEDGE LEVELS OF CLIENTS
ON LONG TERM TUBERCULOSIS TREATMENT AT KWEKWE
GENERAL HOSPITAL.***

ABSTRACT

The study investigated the knowledge levels of clients on long-term tuberculosis (TB) treatment at Kwekwe General Hospital, Zimbabwe. A quantitative, descriptive research design was chosen and data was collected using a structured questionnaire with a convenience sample of 60 clients on TB treatment and 10 professional nurses.

The major findings of the study were that although clients had some knowledge about their condition, there was a lack of knowledge regarding critical aspects such as information on drug-resistant TB and the Directly Observed Therapy Short Course. The professional nurses experienced constraints such as insufficient time for appropriate health education and home visits.

Based on the study findings and conclusions, several recommendations were made.

KEY CONCEPTS

DEFAULTING

DIRECTLY OBSERVED THERAPY SHORT COURSE

HEALTH EDUCATION

KNOWLEDGE LEVELS

MULTI- DRUG RESISTANT TUBERCULOSIS

TUBERCULOSIS

TUBERCULOSIS AND THE HUMAN IMMUNE DEFICIENCY VIRUS

Chapter 1**Orientation to the research**

1.1	INTRODUCTION	1
1.2	BACKGROUND TO THE RESEARCH PROBLEM	1
1.3	RATIONALE FOR THE RESEARCH	3
1.4	PROBLEM STATEMENT AND RESEARCH QUESTION	4
1.4.1	Research questions	4
1.5	PURPOSE OF THE STUDY.....	4
1.6	OBJECTIVES OF THE STUDY	5
1.7	SIGNIFICANCE OF THE STUDY	5
1.8	DEFINITION OF KEY TERMS	5
1.9	RESEARCH APPROACH AND METHODOLOGY	6
1.9.1	Research design.....	7
1.9.2	Population and sample.....	7
1.9.3	Data collection	8
1.9.4	Data analysis	8
1.10	ETHICAL CONSIDERATIONS.....	8
1.11	RELIABILITY AND VALIDITY OF THE RESEARCH	8
1.12	OUTLINE OF THE STUDY.....	9
1.13	CONCLUSION	9

Chapter 2**Literature review**

2.1	INTRODUCTION	10
2.2	DEFINITION AND HISTORIC BACKGROUND TO TB	10
2.3	RECENT TB STATISTICS	11
2.4	THE HEALTH SYSTEM IN ZIMBABWE	11
2.5	WESTERN AND TRADITIONAL MODELS OF HEALTH CARE.....	13

Table of contents		Page
2.6	COURSE OF THE DISEASE	14
2.7	TREATMENT OF TB	17
2.8	DIRECTLY OBSERVED THERAPY SHORT COURSE STRATEGY	20
2.9	PREVENTION OF TB.....	21
2.10	MULTI-DRUG-RESISTANT TB (MDR TB)	22
2.11	ADHERENCE TO TREATMENT	23
2.12	EMPOWERMENT THROUGH KNOWLEDGGE	24
2.13	CONCLUSION.....	28

Chapter 3

Research methodology

3.1	INTRODUCTION	29
3.2	DELIMITATION OF THE STUDY	29
3.3	GEOGRAPHICAL AREA.....	30
3.4	RESEARCH DESIGN.....	30
3.5	TARGET POPULATION	31
3.5.1	Inclusion criteria.....	32
3.5.2	Exclusion criteria	32
3.6	SAMPLING DESIGN AND PROCEDURES	32
3.7	DATA COLLECTION	33
3.7.1	Research instrument	33
3.7.2	Validity	35
3.7.3	Reliability	35
3.7.4	Pilot study.....	35
3.8	DATA ANALYSIS	35
3.9	ETHICAL CONSIDERATIONS	36
3.9.1	Permission to conduct the study	36
3.9.2	Respect for persons as autonomous individual.....	36
3.9.3	Confidentiality and anonymity	37
3.9.4	Avoiding harm.....	37
3.9.5	Justice.....	37
3.9.6	Informed consent.....	38

Table of contents	Page
-------------------	------

3.10	CONCLUSION.....	38
------	-----------------	----

Chapter 4

Data analysis and interpretation

4.1	INTRODUCTION	39
4.2	DATA OBTAINED FROM CLIENTS TREATED FOR TB.....	39
4.2.1	Respondents' demographic details.....	40
4.2.2	Respondents' knowledge about TB and the treatment.....	43
4.2.3	Section C: Respondents' opinion of the DOTS.....	49
4.2.4	Section D: Respondents' attitude towards TB treatment	52
4.2.5	Section E: Other factors that may influence treatment of TB	55
4.3	REGISTERED NURSES CONTRIBUTION TO THE KNOWLEDGE LEVELS OF CLIENT ON TB TREATMENT	59
4.3.1	Section A: Demographic data.....	59
4.4	CONCLUSION	63

Chapter 5

Summary, conclusions and recommendations

5.1	INTRODUCTION	64
5.2	SUMMARY OF THE STUDY.....	64
5.3	SUMMARY OF FINDINGS PERTAINING TO CLIENTS ON TB TREATMENT	64
5.3.1	Objective 1: Assess the knowledge levels of clients on TB treatment regarding the medical condition and treatment regimen.....	65
5.4	FINDINGS ON REGISTERED NURSES	67
5.4.1	Objective 2: Determine how health workers contribute to the knowledge levels of clients on TB treatment .	67
5.5	LIMITATIONS OF THE STUDY	67
5.6	RECOMMENDATIONS	68
5.7	PRACTICAL IMPLICATIONS OF THE STUDY.....	68
5.8	RECOMMENDATIONS FOR FURTHER RESEARCH.....	69

Table of contents	Page
5.9 CONCLUSION.....	69
BIBLIOGRAPHY	71

List of tables	Page
Table 4.1 Age distribution of respondents (N=60).....	40
Table 4.2 Respondents' residence (N=60).....	41
Table 4.3 Education level of respondents (N=60).....	42
Table 4.4 How TB is spread (N=60).....	44
Table 4.5 Importance of completing treatment (N=60).....	46
Table 4.6 Respondents' feeling about the amount of TB tablets taken (N=60).....	53
Table 4.7 Relatives and friends informed of TB treatment (N=60).....	54
Table 4.8 Distance from health centre (N= 60).....	56
Table 4.9 Problems encountered with drugs (N=60).....	57
Table 4.10 Nurses' age distribution (N=10).....	60
Table 4.11 Nurses' qualifications and experience (N=10).....	60
Table 4.12 Information given to clients (N=10).....	61

List of figures	Page
Figure 4.1 Respondents Gender (N=60).....	41
Figure 4.2 Cause of TB (N=60).....	43
Figure 4.3 Meaning of MDR TB (N=60).....	46
Figure 4.4 Awareness of DOTS (N=60).....	49
Figure 4.5 Supervisor (N=60).....	50
Figure 4.6 Opinion on duration of treatment (N=60).....	53
Figure 4.7 Visits by the health workers at home (N=60).....	58
Figure 4.8 Instructional methods (N=10).....	62

List of abbreviations

AIDS	=	Acquired Immune- Deficiency Syndrome
DOTS	=	Directly Observed Therapy Short Course
HIV	=	Human Immune Deficiency Virus
MDR TB	=	Multi- Drug Resistant Tuberculosis
MOH/CH	=	Ministry of Health and Child Welfare
NTP	=	National Tuberculosis Programme
TB	=	Tuberculosis
WHO	=	World Health Organization

List of annexures

ANNEXURE A: Permission to do the study

ANNEXURE B: Consent from the respondents

ANNEXURE C: Questionnaires