## UPTAKE AND FACTORS ASSOCIATED WITH COMPLIANCE TO IVERMECTIN TREATMENT FOR ONCHOCERCIASIS UNDER THE MASS TREATMENT PROGRAM IN GULU DISTRICT, UGANDA

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## **ABSTRACT**

**Background:** Human onchocerciasis is the second leading infectious cause of blindness in Africa and cause of severe skin disease. It is caused by *Onchocerca volvulus*. Before the launch of national control programme, the disease had affected one third of the districts in Uganda. Long term compliance with ivermectin treatment by all eligible community members in oncherciaisis-endemic areas is critical for its control. No study has been done on compliance to ivermectin among the people of Gulu ever since Community Directed Treatment using Ivermectin was started. The study therefore documented information on level of compliance, its associated factors and community attitude towards MDA for onchocerciaisis control.

**Methodology:** This was a cross-sectional study that included both qualitative and quantitative method. A total of 420 respondents were interviewed. About 7 respondents were sampled from each 54 villages using random sampling. Key outcome measured were receiving, uptake and compliance to ivermectin.

**Results:** The study found that, coverage of ivermectin was at 51%, (213/420) in the last MDA cycle. Out of the 278 individuals who at least took ivermectin in the last three distribution rounds, only 14% (39/278) respondents are high compliers and 26.6% (74/278).

Those who do not feel at risk were less likely to comply compared to those who feel at risk (OR 0.39, 95% CI 0.21-0.74). Those who have knowledge on signs and symptoms are more likely to comply compared to those without knowledge (OR (1.91, 95% CI 03-3.56). Those who were advised were more likely to comply compared to those who were not (OR 0.47 95% CI 0.24-0.92). The study found that attitude towards ivermectin uptake is still poor and this is because people claim medicine makes them weak and some do not consider the disease as a big threat to their life.

Conclusion: Compliance to ivermectin treatment was low in Gulu district. Members of the community within Gulu district needs to health educated and be sufficiently mobilized to

appreciate onchocerciaisis as a health problem so as to positively change their perception towards treatment using ivermectin to control onchocerciaisis.