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Being a good or bad doctor: Provider factors shaping patient trust in doctors in low income rural Africa

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Statement of the Problem: Recent research indicates an increasing burden of NCDs in low income Africa. The WHO emphasize on Best Buys as the cost-effective intervention in resource constrained settings with drug therapy, risk management and patient counseling as the cornerstones of biomedical NCDs response. However, the literature in low-income Africa persistently indicates poor NCDs health care seeking, non-adherence to medication and poor continuity with care. Research in high-income countries suggests improving trust in patient-doctor relationship as a promising strategy to address these challenges. Factors shaping patient trust in doctors have been extensively documented in western countries. What is not yet clear are the factors shaping patient trust in doctors in low income Africa's healthcare settings. The purpose of this research is to examine the provider factors shaping patient trust in doctors in Tanzania using hypertension as a case study.

Methodology: A qualitative inquiry using audio-taped in-depth interviews with patients and providers was conducted between October 2015 and March 2016 in two characteristically rural districts of Tanzania. Data were managed using Nvivo 11 software and analyzed thematically.

Findings: The accounts of 34 patients representing 77% of the participants of the broader study on patient trust in doctors in Tanzania were analyzed. Features of good doctors ranging from reputation within the community and fellow patients, behaviors and demeanors portraying good customer care to technical skills were valued by patients as shaping their trust. Poor technical and behavioral competences were characterized as features of bad doctors consequently shaping distrust. These competences were characterized as manifesting along the spectrum of care: before, during and after patient-doctor encounter.

Conclusion & Significance: Doctor's reputation, behavioral and technical skills are equally important in shaping patient trust. The findings of this study provide useful insights to medical professions and health training institutions in LIA to reshaping current practices and training curriculum respectively.

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