

FACTORS RELATED TO VISIT ADHERENCE AMONG SCHIZOPHRENIA PATIENTS IN YASOTHON PROVINCE

PANUPAN TANAPATHOMSINCHAI 5537728 ADPM/M

M.P.H.M.

THESIS ADVISORY COMMITTEE: ORAPIN LAOSEE, Ph.D., JIRAPORN CHOMPIKUL, Ph.D

ABSTRACT

This study aims to describe the level of visit adherence in schizophrenia patients in the previous 12 months immediately prior to this study, and identifies factors associated with adherence to outpatient visits among schizophrenia patients at hospitals in Yasothon province. A cross-sectional study was used to collect data from patients with schizophrenia in three community hospitals in Yasothon Province, Thailand from February to April, 2015. Two-stage cluster sampling was employed to select 280 subjects. The structured questionnaire consisted of four parts which was filled in by trained research assistants. Medical record forms were used to obtain the information on adherence in the last 12 months, then the form was checked by nurses at the psychiatric clinic of selected hospitals. The Chi-square test and multiple logistic regression were used to determine associations between the independent variables and visit adherence at the psychiatric outpatient department. This study revealed that 69.6% of schizophrenia patients adhered to their psychiatric appointments. The reasons for missed appointments included time management problems (53.6%), forgetting the appointments (17.5%), thought that they already recovered (8.2%), no one to accompany them to the hospital (7.9%), and refusal to take psychiatric medications (3.9%). Adherence to outpatient visits was found to be significantly associated with a high level of education, being a farmer, low income, short time of illness, low perceived barriers to care, family support, sharing of experience among patients, being reminded by friends of outpatient visits, other expense, owning a vehicle, and high self-efficacy. Multiple logistic regression showed that sufficient education (AOR=1.944; 95%CI=1.042-3.628), sharing experience among patients (AOR=2.423; 95%CI=1.259-4.660), and family support (AOR=1.944; 95%CI=1.100-3.433) were the strong predictors of visit adherence to psychiatric outpatient visits among schizophrenia patients when adjusted for other factors.

In conclusion, to improve the visit adherence to the psychiatric outpatient department, health providers and family care teams should support the strengthening of family relationships, while hospitals could set up the medical appointment reminder messages or calls. In addition, initiation of the opportunity for a group of schizophrenia patients to share their experiences will improve the understanding of disease management.

KEY WORDS : VISIT ADHERENCE/SCHIZOPHRENIA/THAILAND

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