

Effects Of Adherence to Treatment and Socio-Economic Factors on Treatment Success Rates Among Adult TB Patients in Secondary Health Facilities in Akwanga, Nasarawa State

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ABSTRACT

Introduction: Tuberculosis (TB) remains a major public health concern in Nigeria, with treatment adherence being a critical determinant of therapeutic success. Despite advances in diagnosis and treatment, socioeconomic barriers continue to affect patients' ability to complete therapy. This study assessed the effects of adherence to treatment and socioeconomic factors on treatment success rates among adult TB patients in secondary health facilities in Akwanga, Nasarawa State. The study aimed to determine the level of adherence among patients, identify socioeconomic challenges influencing adherence, and evaluate their relationship with treatment outcomes.

Methodology: A descriptive cross-sectional research design was adopted. Data were collected from adult TB patients using a structured questionnaire incorporating the 8-item Morisky Medication Adherence Scale (MMAS-8) to assess adherence levels. Socio-demographic and socioeconomic variables such as age, gender, education, employment, income, transport cost, and social support were also obtained. Data were analyzed using descriptive and inferential statistics, including chi-square tests to determine associations between adherence, socioeconomic factors, and treatment success.

Results: Findings showed that most respondents were aged 30–39 years (31.5%), and males constituted 58.0% of participants. The majority were unemployed (34.6%), and 24.1% had no formal education, indicating socioeconomic vulnerability. Adherence assessment revealed that 63.6% demonstrated high adherence, 14.2% moderate adherence, and 22.2% low adherence. Financial constraints were identified as major barriers, with 57.4% of respondents citing transport costs and 64.2% reporting food-related financial difficulties. Social support significantly influenced adherence, with 72.8% of patients who had family or community support achieving higher treatment completion rates ($p = 0.004$). Overall, 84.0% of respondents completed treatment successfully, meeting the WHO target of $\geq 85\%$, while 16.0% relapsed or failed treatment. There were significant associations between adherence and treatment success ($p = 0.005$), financial hardship and incomplete treatment ($p = 0.019$), and social support and treatment completion ($p = 0.004$).

Conclusion: The study revealed relatively high adherence and treatment success rates among TB patients in Akwanga; however, socioeconomic barriers such as poverty, unemployment, and transport costs continue to hinder optimal treatment outcomes. Social support was found to be a key facilitator of adherence and recovery. Strengthening socioeconomic interventions, promoting community-based support systems, and integrating social welfare schemes into TB care are essential for improving adherence and achieving sustained treatment success in the region.

Keywords: Tuberculosis, Adherence, Socio-Economic Factors, Treatment Success, Akwanga

