Challenges influencing Nurse Initiated Management of Retroviral Therapy (NIMART) Implementation in Ngaka Modiri Molema District, North West Province, South Africa

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Abstract: Background: The increasing number of people who tested HIV positive and who demand antiretroviral therapy (ART) prompted the National Department of Health to adopt WHO recommendations of task shifting where Professional Nurses (PNs) initiate ART rather than doctors in the hospital. This resulted in the decentralization of services to primary health care (PHC), generating a need to capacitate PNs on NIMART. After years of training, the impact of NIMART was assessed where it was established that even though there was an increased number who accessed ART, the quality of care is of serious concern. The study aims to answer the following question: What are the challenges influencing NIMART implementation in primary health care. Objectives: This study explores challenges influencing NIMART training and implementation and makes recommendations to improve patient and HIV program outcomes. Methods: A qualitative explorative program evaluation research design. The study was conducted in the rural districts of North West province. Purposive sampling was used to sample PNs trained on NIMART. FGDs were used to collect data with 6-9 participants and data was analysed using ATLAS ti. Results: Five FGDs, n=28 PNs and three program managers were interviewed. The study results revealed two themes: inadequacy in NIMART training and the health care system challenges. Conclusion: The deficiency in NIMART training and health care system challenges is a public health concern as it compromises the quality of HIV management resulting in poor patients’ outcomes and retard the goal of ending the HIV epidemic. These should be dealt with decisively by all stakeholders. Recommendations: The national department of health should improve NIMART training and HIV management: standardization of NIMART training curriculum through the involvement of all relevant stakeholders skilled facilitators, the introduction of pre-service NIMART training in institutions of higher learning, support of PNs by district and program managers, plan on how to deal with the shortage of staff, negative attitude to ensure compliance to guidelines. There is a need to develop a conceptual framework that provides guidance and strengthens NIMART implementation in PHC facilities.

Keywords: antiretroviral therapy, nurse initiated management of retroviral therapy, primary health care, professional nurses

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