



Perceived challenges of managing diabetes type 2 during COVID-19 in Tanzania and Kenya -Implication for integrating social protection schemes at health care port

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What we Learned

- Patients with type 2 diabetes in Tanzania and Kenya reported similar health and socio-economic challenges of managing their illness during COVID-19.
- Mental health challenges were mostly expressed in Tanzania not much in Kenya despite the lack of strict COVID-19 prevention measures such as lockdown and curfew.
- Most patients were aware of their vulnerability of developing health complications if they contracted COVID-19.
- Emergency preparedness actions/plans in Tanzania and Kenya need to consider the needs of chronically ill people such as those with type 2 diabetes.

Background

- People with type 2 diabetes as with other chronically ill people are more likely to develop complications when contracting COVID-19 due to their weak immunity systems.
- COVID-19 pandemic emerged as an emergency pandemic and not all health systems were prepared to manage the pandemic.
- There is limited evidence on how patients with type 2 diabetes managed their illness in such emergency situation and this study aimed to provide such evidence which can help improve health care systems emergency services.

Methods

- A qualitative cross sectional study with in-depth interviews were conducted in January-March 2022.
- Participants were recruited from government and private health facilities in Dar es Salaam and Morogoro regions (Tanzania) and in Nairobi, Kiambu, Vihiga and Nyeri (Kenya).
- Purposive sampling identified men and women with type 2 diabetes (30 patients in Tanzania; 22 in Kenya).
- Thematic content analysis identified inductive themes which were categorized into theoretical domains which were validated using 'member check'.

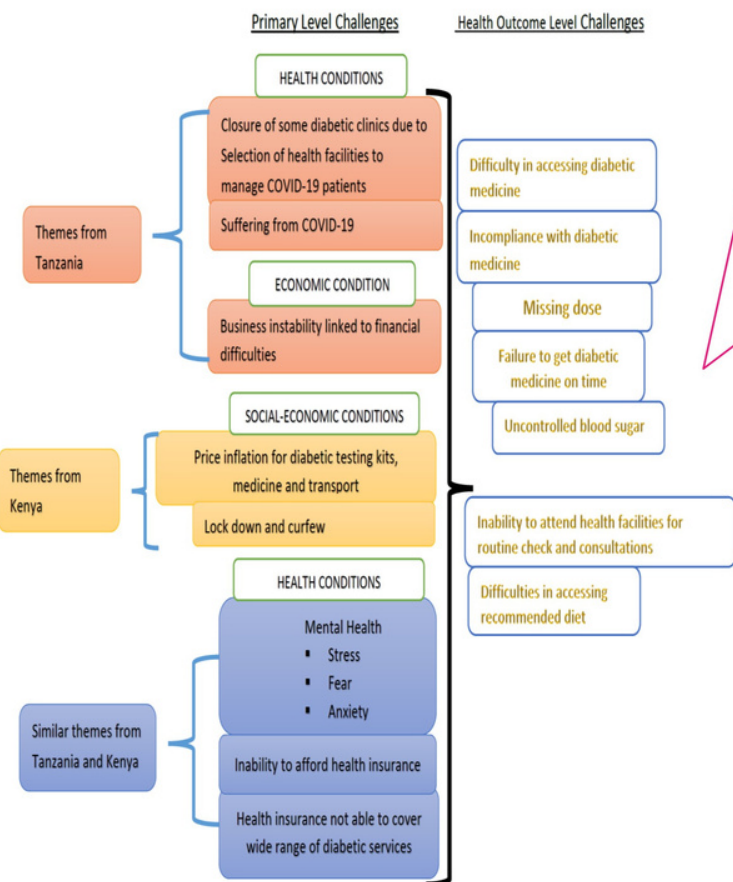


Member checking for data validation

Results

Model

Challenges experienced by patients in managing type 2 diabetes during COVID-19



Source: Graphical presentation of study results, 2022

Quotes: From some representative participants

Missing dose
"It reached a point when I did not have medicine to use since my business was not doing well. Therefore, there are some days that I went without medicine and my blood sugar went up and I started being sick, I could not even go to work, because I felt weak" [Male_PT09_Tanzania]

Inability to afford health insurance
"If I had the insurance it would have been easier, I could just come to the hospital and I will be given medication to take me for two weeks or a month and I would not miss any dose but now I can't". Now I need to buy (medicine) and the economic situation isn't good with this CORONA at hand" [Female_PT_03_Tanzania]

Price inflation of diabetic medicine
"Before COVID-19 ..(.) the medicine was not very expensive like right now [during COVID-19]. Glycomet 850 mg is ksh.10 per tablet and Novolog is ksh.5 and I take them twice a day. So, per day I use thirty shillings, so I have to take pain killers to manage this disease" (diabetes). [Female_PT_220304_Kenya]

Lock down and curfew
"It was tragic because even movement was a problem, you could not leave the estate from here to where you get your medications. So, it was a bad experience and this experience introduced us to now go over the counter to buy these medications" [Male_PT_220228_Kenya]

Closure of some diabetic clinics
"After closing the clinic (diabetic clinic), they told us to shift to Mnazi mmoja, unfortunately, we went to Mnazi Mmoja and we were told there was no clinic set up yet for diabetic patients..... Of course there were others who said they went to the Plan center, but I went to Plan center as well and I was told there was no such diabetic unit." [Male_PT_06_Urban.Tanzania]

Not able to access the recommended diet
"During that time (COVID_19), my husband did not have a job and so getting food was a problem like now I am diabetic, which is also a problem. If it's the cooking oil we are told we should use Elianto or Rina and getting this is expensive. If you use the other brands of cooking oil the blood sugar level will go up. We are advised to eat brown Ugali, a kg of this flour is two hundred and twenty shillings. So, you see getting this is a problem" [Health care providers_220304_Kenya]

Fear
"I knew my condition and I was very worried thinking of that I have diabetes and ulcers, so if I got COVID, what would happen to me? (..). I knew once I got COVID-19 and I was already in that special group where when you get COVID-19 your body's immune system will be low. Will I be able to survive if my immune system is compromised and I contract COVID? Regardless of whether everyone was afraid of COVID, I was the most worried," [Female_PT 04_Tanzania]

Conclusion

This study suggests that the health and socio-economic conditions that patients with type 2 diabetes experienced in Tanzania and Kenya, such as financial instability, not being enrolled into health insurance, mental distress and COVID-19 preventive measures (e.g. closure of health clinics) gave rise to multiple challenges for managing illness during COVID-19. Social protection schemes that target people with chronic illness including those with type 2 diabetes at the community and at the health care port would help to increase their resilience against shocks arising from emergencies such as COVID-19.