

Integrating mental health care services in primary health care clinics: a survey of primary health care nurses' knowledge, attitudes and beliefs

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Abstract (Full text available online at www.tandfonline.com/ojfp)

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Background: Nurses are the main providers of care at primary health care (PHC) clinics; the high incidence of mental health problems at these clinics means that PHC nurses are important providers of mental health care. The PHC nurses' knowledge regarding provision and identification of mental health problems has been shown to be poor.

Aim: The study aimed to investigate the knowledge, attitudes and beliefs concerning the care of psychiatric patients at PHC level amongst nurses.

Setting: The study was conducted in uThungulu Health District in the Northern Area of KwaZulu-Natal Province. Six clinics were purposively selected based on their geographical location.

Methods: The study used a quantitative survey using a structured questionnaire. Simple descriptive analysis and one-way ANOVA were used to analyse the data.

Results: The study revealed that 39% of the nurses were between the ages of 41 and 50 years and 92% were females. The association between past experience in working with psychiatric patients and positive attitude of nurses was found to be significant.

Conclusion: This study found that PHC nurses' attitudes and beliefs towards people with mental illness were positive. PHC nurses were found to have inadequate knowledge to manage psychiatric patients.

Keywords: attitudes, beliefs, integration, knowledge

Patient experiences with designated service provider medication delivery in a rural general practice in KwaZulu-Natal: a cross-sectional study on HIV patients

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Background: Healthcare funders (medical schemes) have established disease management programmes (DMPs) and designated service providers (DSPs) to reduce costs and improve patient outcomes to meet legislative requirements. However, there is a paucity of studies that have researched patient experiences and adherence to medication through the DSP process.

Methodology: A retrospective cross-sectional descriptive study was conducted between January and June 2013 within the designated family practice amongst all HIV patients who were receiving antiretroviral treatment provided by healthcare funders via DSP agreements (Medipost, Direct Medicines, etc.) Data were collected using an anonymous self-administered questionnaire as well as a record review tool.

Results: The majority of patients (77%; 26) reported receiving antiretroviral medication deliveries on time, receiving a reminder before delivery (88%; 30) and receiving correct medications (77%; 26). Short messaging services (SMS) were the most popular method used to inform patients of an impending medicine with 85% (28) of all respondents reporting that they received SMS messages. Some 70% of the patients rated their satisfaction with DSP medication delivery between good and excellent. However, 30% of the patients rated the service as satisfactory to poor.

Conclusion and recommendation: DSP delivery of ART medication has fared well in this study, with the majority of patients satisfied with the services. This may in part be due to the higher level of education amongst the participants of the survey. A national study should be conducted using different population groups to identify the satisfaction and adherence to HIV medication amongst patients from a lower socio-demographic profile.

Keywords: antiretroviral treatment, designated service providers, HIV and AIDS, private practice