Editor's focus

Survey on the lifestyle and health-seeking behaviour of Basotho patients with diabetes

Diabetes is a global problem that affects all age groups irrespective of gender and socio-economic background. It is a fact that early diagnosis and appropriate management can successfully limit the impact of this disease on the affected individual. PN Makinga and A Beke conducted a cross-sectional survey among diabetic patients seen at three hospitals in Lesotho to determine the lifestyle and health-seeking behaviour of these patients. The main outcome measures were obesity indices, quality and quantity of physical exercises, provision of health education, and frequency with which the patients sought medical help. The study revealed that the prevalence of obesity by body mass index was 67.7%, prevalence of smoking was 14.6% and only 20.8% participated in recommended physical exercise. The Health Education Quantity Index was 49.9%, but most of them (95%) consulted their physicians on a regular basis. The implication is that most of the Basotho diabetic patients in this study were obese, did not participate in recommended physical exercise and did not receive adequate health education and counselling relevant to the management of their disease. Obviously for the control of diabetes, it is imperative that promotion of a healthy lifestyle should be paramount and this will need the collaboration of the patient and health care provider. The fact that the study showed that the quantity of education given was poor reinforces the need to have the health care providers who manage these patients at the study sites better trained in the care of the diabetic patient.

Health reform and staff morale in South Africa: a case study of Dr Yusuf Dadoo Hospital

Globally studies have shown that there is a correlation between quality of care, healthcare outcomes and the availability of healthcare personnel. In 1994, South Africa embarked on various healthcare reforms with the expressed intention of providing equitable and quality health services for the majority of its people. OJ Ibeziako, ON Chabikuli and S Olorunju in their study explored major factors that influenced staff motivation at a district hospital following hospital reforms and compared these factors across two main staff categories. A total of 179 participants were invited from this district hospital for the study but ended with a response rate of 68% (122/179). There were more demotivating factors than motivating factors in their responses. Poor management and leadership, unfavourable institutional policies and administration practices regarding staff development, paucity of equipment were some of the demotivating factors. While the fewer motivating factors included the individual value of the vocational aspect of the profession, love for work and professional satisfaction. There are possible solutions for some of the demotivating factors for

example, the appointments of knowledgeable and experienced managers will address poor management and leadership issues; the paucity of equipment can be dealt with by proper planning, budgeting and procurement of essential equipment with proper service plans. Healthcare reforms are processes of change which emerge from strategic policy decisions at a national level, which need careful resource provision, implementation and responsiveness at various levels of healthcare.

Contraceptive knowledge and practice among HIV-positive women receiving antiretroviral therapy at a district hospital

Despite pre-initiation counselling, it is estimated that 22 000 HIV-positive women receiving antiretroviral therapy (ART) fall pregnant each year in South Africa. However there is no available data to determine whether or not these pregnancies were planned. YS Somera and A Ross conducted a crosssectional study on a sample of 400 women who were receiving ART for a minimum of one month and were willing to participate in the study. The objective of the study was to determine the knowledge and use of contraceptives by the HIVpositive women who were on ART at a district hospital. It was reported that their knowledge of the male condoms, injectable contraceptive and emergency contraceptive were 100%, 97% and 47% respectively. In terms of usage of the three forms of contraception, the results were much lower i.e. 66%, 40% and 10.9% respectively. Only just over 50% used dual method of contraception i.e. male condoms plus another contraceptive method. In terms of sexual practice, 92% were sexually active and 34% reported episodes of unprotected coitus in the last six months. The authors concluded that most of their participants were sexually active, well informed about male condoms and injectable contraceptive but were concerned on their low usage of dual method of contraception. They recommended the integration of HIV and family planning services to improve dual contraception use, routine enquiries about contraceptive usage and the women's desire to have children. The question is: Are we winning the battle against HIV/AIDS especially among women?

Prof Gboyega A Ogunbanjo

Editor-in-chief: South African Family Practice

References:

- Makinga PN, Beke A. A cross-sectional survey on the lifestyle and healthseeking behaviour of Basotho patients with diabetes. S Afr Fam Pract 2013; 55(2): 194-199.
- Ibeziako Oj, Chabibikuli ON, Olorunju S. Hospital reform and staff morale in South Africa: a case study of Dr Yusuf Dadoo Hospital S Afr Fam Pract 2013; 55(2): 184-189.
- Somera YS, Ross A. Contraceptive knowledge and practice among HIVpositive women receiving antiretroviral therapy at a distrct hospital in KwaZulu-Natal. S Afr Fam Pract 2013; 55(2): 200-204.