



Digital Healthcare Delivery Models for Tuberculosis Treatment in Eastern Uganda: Adoption Rates and Compliance Outcomes (1980s-2000s)

James Ssebuloba¹, Patrick Abimbola², Alice Namugenyi³

¹ Uganda National Council for Science and Technology (UNCST)

² Busitema University

³ Makerere University, Kampala

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Correspondence: jssebuloba@outlook.com

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Author notes

James Ssebuloba is affiliated with Uganda National Council for Science and Technology (UNCST) and focuses on Medicine research in Africa.

Patrick Abimbola is affiliated with Busitema University and focuses on Medicine research in Africa.

Alice Namugenyi is affiliated with Makerere University, Kampala and focuses on Medicine research in Africa.

Abstract

Digital healthcare delivery models have been introduced to improve access to tuberculosis treatment in remote areas of Uganda. A longitudinal study design was employed, utilising surveys and administrative data to analyse trends over time. Digital healthcare adoption varied significantly across villages, with an average compliance rate of 75% among patients using these models. The findings indicate a need for targeted interventions to enhance digital health literacy in remote populations. Healthcare providers should prioritise training and support for community health workers to improve patient engagement with digital healthcare systems. digital healthcare, tuberculosis treatment, compliance outcomes, Eastern Uganda, longitudinal study Treatment effect was estimated with $\text{text} \{ \text{logit} \} (\pi) = \text{beta } 0 + \beta^{-1} p X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Geographic, Country, Africa, Village, Treatment, Digital, Healthcare, Delivery, Models, Remote, Villages, Population, Epidemiology, Public, Health, Intervention, Qualitative, Quantitative, Methodology, Data, Sources, Analysis, Compliance, Adoption, Outcomes*

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