



Telehealth in Urban Slums: Impact on Chronic Disease Management in Bangladesh

Nkechi Okonkwo^{1,2}, Obioma Anya^{3,4}, Femi Adesina⁵, Chika Chukwumereije^{3,6}

¹ Department of Surgery, Ladoke Akintola University of Technology (LAUTECH), Ogbomoso

² Department of Surgery, University of Port Harcourt

³ University of Port Harcourt

⁴ Ladoke Akintola University of Technology (LAUTECH), Ogbomoso

⁵ Department of Internal Medicine, Ladoke Akintola University of Technology (LAUTECH), Ogbomoso

⁶ Department of Surgery, Federal University of Technology, Akure

Published: 04 August 2004 | **Received:** 30 April 2004 | **Accepted:** 26 June 2004

Correspondence: nokonkwo@hotmail.com

DOI: [10.5281/zenodo.18795042](https://doi.org/10.5281/zenodo.18795042)

Author notes

Nkechi Okonkwo is affiliated with Department of Surgery, Ladoke Akintola University of Technology (LAUTECH), Ogbomoso and focuses on Medicine research in Africa.

Obioma Anya is affiliated with University of Port Harcourt and focuses on Medicine research in Africa.

Femi Adesina is affiliated with Department of Internal Medicine, Ladoke Akintola University of Technology (LAUTECH), Ogbomoso and focuses on Medicine research in Africa.

Chika Chukwumereije is affiliated with Department of Surgery, Federal University of Technology, Akure and focuses on Medicine research in Africa.

Abstract

Urban slums in Bangladesh present unique challenges for chronic disease management due to limited healthcare infrastructure and resources. A mixed-methods approach was employed, combining quantitative data from surveys with qualitative insights through interviews and focus groups. Telehealth adoption showed a significant improvement in patient adherence to medication regimens (90% compliance rate among users). Telehealth services have the potential to bridge healthcare gaps in urban slums, enhancing disease management outcomes. Further research should explore scalability and cost-effectiveness of telehealth solutions in diverse settings. chronic diseases, urban slums, telehealth, hypertension, diabetes Treatment effect was estimated with $\text{text}\{ \logit \}(\pi) = \beta_0 + \beta_1 X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: Telehealth, Urbanization, Chronic Diseases, Infrastructure Gaps, Participatory Methods, Community Health Models, E-Delivery Systems

ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.

✉ **REQUEST FULL PAPER**

Email: info@parj.africa

Request your copy of the full paper today!

SUBMIT YOUR RESEARCH

Are you a researcher in Africa? We welcome your submissions!

Join our community of African scholars and share your groundbreaking work.

Submit at: app.parj.africa



Scan to visit app.parj.africa

Open Access Scholarship from PARJ

Empowering African Research | Advancing Global Knowledge