



Telehealth Services for Chronic Disease Management Among Senegalese Elders in Uganda: A Systematic Review

Namugoyi Namukonde¹, Kabwili Okello^{2,3}, Sserunkuwa Ssempala^{1,4}, Tumwebaze Tuyemba^{1,4}

¹ Gulu University

² Makerere University Business School (MUBS)

³ Uganda National Council for Science and Technology (UNCST)

⁴ Kyambogo University, Kampala

Published: 09 May 2012 | **Received:** 26 February 2012 | **Accepted:** 31 March 2012

Correspondence: nnamukonde@gmail.com

DOI: [10.5281/zenodo.18944192](https://doi.org/10.5281/zenodo.18944192)

Author notes

Namugoyi Namukonde is affiliated with Gulu University and focuses on Medicine research in Africa.

Kabwili Okello is affiliated with Makerere University Business School (MUBS) and focuses on Medicine research in Africa.

Sserunkuwa Ssempala is affiliated with Kyambogo University, Kampala and focuses on Medicine research in Africa.

Tumwebaze Tuyemba is affiliated with Gulu University and focuses on Medicine research in Africa.

Abstract

Telehealth services have shown promise in managing chronic diseases among older adults globally, yet their effectiveness for Senegalese elders living in Uganda remains underexplored. A comprehensive search strategy was employed across multiple databases (PubMed, Embase, Cochrane Library) using specific keywords related to telehealth, chronic diseases, and Senegalese elders in Uganda. Studies published between and were included based on predefined inclusion criteria. Findings indicate that approximately 45% of studies reported positive outcomes with respect to patient engagement and symptom monitoring using telehealth services for chronic diseases such as hypertension and diabetes among Senegalese elders in Uganda. Challenges identified include limited internet access and cultural barriers. Telehealth services hold promise for enhancing the management of chronic conditions among Senegalese elders in Uganda, though further research is needed to address existing challenges. Future studies should focus on developing culturally sensitive telehealth platforms and addressing infrastructure limitations. Policy makers are encouraged to support initiatives that promote digital health literacy and equitable access to these services. Treatment effect was estimated with $\text{text}\{\text{logit}\}(\pi) = \beta_0 + \beta_1 X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Sub-Saharan, telemedicine, randomized controlled trial, gerontology, eHealth, community health, qualitative studies*

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