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**POSTER ABSTRACT****Facilitators and Barriers to Self-Management of Tuberculosis Patients: A  
Qualitative Study**18<sup>th</sup> International Conference on Integrated Care, Utrecht, 23-25 May 2018

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**Introduction:** Patient self-management improves health and well-being. In 2015, 10.4 million was infected with Tuberculosis TB. TB is curable but treatment is ineffective without patient self-management. When patient perform self-management, it reduces treatment abandonment, prevents hospital admissions, and increases confidence and sense of control. TB self-management involves managing medication regimens, monitoring laboratory indicators, maintaining nutrition, coping to the psychological and social demands, and lifestyle regulation. However, little has been known about the conditions that facilitate or inhibit self-management of TB patients. Therefore, the purpose of this paper is to describe the facilitators and barriers of self-management of TB patients receiving treatment in an urban community health center.

**Methods:** Qualitative data were collected through individual interview conducted at the dwelling place of the participants. The participants were recruited through maximum variation sampling from 15 adults with pulmonary TB with different gender, education, and occupation receiving treatment in an urban community health center in the Philippines. Data were analyzed using content analysis. Trustworthiness was established through respondent validation to check for accuracy and credibility of analysis. The respondents evaluated the interview transcript for the correctness and consistency of the identified categories between the researcher's view and the participants. Bracketing and audit trailing from the verbatim transcriptions were done to establish trustworthiness.

**Results:** Facilitators of self-management of TB patients are the self, family support, health care providers, environment, and spirituality. On the other hand, the barriers to self-management are the physical and emotional stress, social stigma, dissatisfaction to the healthcare system, and the self.

**Discussions:** The self is the most important facilitator of self-management because it is voluntary and conscious will of the patient to improve their health and well-being. However, the self may also be the barrier especially if there is no support of the family, acceptance of the community, and the over-all health care system.

**Conclusions:** Identification of the facilitators and barriers to self-management is a prerequisite in order to develop an integrated care model that will improve the over-all care

of TB patients. Health care providers must educate patients about the importance of self-management, use therapeutic communication with patients, and engage patients to spiritual activities that promote healing. Moreover, involving the family in the care, and ensuring accessible, available, appropriate, and acceptable services of health and care system are also important to promote self-management of patients.

**Lessons learned:** Patient self-management is not a one-way process. It involves participation of the family, health care providers, and the different factors that interact with the patient.

**Limitations:** The study is limited to qualitative data derived from pulmonary TB patients living in an urban community in the Philippines.

**Suggestions for future research:** Qualitative data may be triangulated using quantitative data for future research using a large number of participants.

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**Keywords:** self-management; tuberculosis; facilitators; barriers; qualitative study

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