

## **PSYCHOSOCIAL AND STRUCTURAL BARRIERS TO MEDICATION-ASSISTED TREATMENT (MAT) ADHERENCE IN TANZANIA'S SOUTHERN HIGHLANDS ZONE**

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### **Background:**

This study examined psychosocial and structural barriers to Medication-Assisted Treatment (MAT) adherence among people with substance use disorders in Tanzania's Southern Highlands Zone, where dropout and relapse rates remain critically high.

### **Methods:**

A mixed-methods cross-sectional design was used. Quantitative data were collected from 130 MAT clients (80 in treatment, 50 defaulters), and qualitative interviews were conducted with 34 stakeholders including healthcare workers, local leaders, and family members.

### **Results:**

Psychosocial barriers were prominent: 82% of respondents reported community stigma, 63% experienced internalized stigma, and 74% of defaulters cited stigma as a reason for discontinuation. Mental health issues were identified by 58%, yet only 11% received support. Family support was inadequate in 69% of cases and rose to 83% among defaulters. Structural challenges included long distances to clinics (67%), dissatisfaction with service conditions (54%), and relapse (48%). Facility reviews showed dropout rates exceeding 79%—only 38 of 204 clients remained in care at Tunduma, and 112 of 556 at Mbeya. Additionally, 47 overdose-related deaths were reported, mainly among defaulters. Donor funding cuts disrupted outreach and rehabilitation, while salary delays affected staff morale. Regression analysis showed that stigma (OR=3.7,  $p<0.001$ ), poor family support (OR=2.9,  $p=0.002$ ), untreated mental illness (OR=2.1,  $p=0.01$ ), clinic inaccessibility (OR=1.8,  $p=0.04$ ), and lack of continuing education (OR=6.36,  $p=0.001$ ) were major predictors of non-adherence.

### **Conclusion:**

To improve MAT outcomes, the study recommends integrating mental health services, strengthening anti-stigma and educational outreach, enhancing family engagement, decentralizing service delivery, and securing sustainable funding. Policy reforms to support harm reduction and long-term recovery are urgently needed.