## **ABSTRACT**

**Purpose:** Good diabetes mellitus (DM) and diabetic retinopathy (DR) management depends largely on involved medical staff, prompting us to investigate knowledge, attitudes, and practices about DM and DR at a tertiary referral center in Kenya.

**Design:** The design for this study is exploratory qualitative using semistructured interviews.

Methods: Data from eye and diabetes clinic staff were collected until thematic saturation was reached, transcribed, and iteratively analyzed for relevant themes based on the constant comparative method.

**Results:** Among 46 participants (mean age, 38 years; 54% females), most were physicians (n = 25, 54%), followed by nurses (n = 14, 30%) and clinical officers (n = 6, 13%). Diabetes mellitus and DR were seen as urgent health problems (n = 42, 91%), and regular ophthalmic screening of diabetic patients was universally recommended. Two thirds (n = 32, 70%) were unaware of DM and DR management guidelines at the hospital. Participants identified training of staff in diagnosing (n = 30, 65%), efficient detection and referral of diabetic patients (n = 24, 52%), and improved outreach services (n = 14, 30%) as most pressing areas of need. Communication among hospital departments was found to be suboptimal. Reported barriers to good DR management were lack of retinal laser treatment and costs.

**Conclusions:** Management outcomes for DM and DR may be improved by implementing integrated service provision, direct ophthalmological involvement in diabetic clinics, endorsement and effective distribution of guidelines, an increase in screening capacity, and the introduction of ongoing medical education covering DM and DR.