

Client Satisfaction Regarding Family Planning Services in Reproductive Center at Jinnah Hospital, Lahore

FARAH REHMAN¹, ABDUL REHMAN JANJUA², HUMERA SHAHZAD³

ABSTRACT

Background: Patient satisfaction is one the utmost goals of any health system. Patient's perceptions about health care system have been seen largely ignored by health care managers in developing countries. Family planning has a major role in reducing maternal and newborn mortality rates and improving the health of women and children.

Aim: To describe family planning services being provided at Reproductive Health Services A (RHS-A) Center in a teaching hospital and to explore the satisfaction level of clients using these services.

Methods: This descriptive study was included 91 subjects and carried at Family Planning OPD Reproductive Health Services (RHS-A) Center Jinnah Hospital Lahore over a period of one month. Married women in reproductive age who were using family planning services and willing to participate in the study were included. Subjects reporting for emergency and surgical services were excluded.

Results: Out of 91 respondents, only (33%) of the clients was satisfied with the available services, whereas rest (67%) was unsatisfied with one or other aspect of the provided services. Majority (62%) were unsatisfied with the availability of methods and some (56%) were unsatisfied with staff attitude, (89%) of respondents were unsatisfied with the working hours of health facility whereas 52(57.1%) were unsatisfied with the behavior of staff and 36(39.6%) were satisfied with waiting time before examination.

Conclusion: Improving the attitude of health care providers and spending time on counseling as well as ensuring provision of information and availability of methods will help in improving the services.

Keywords: Satisfaction, Family planning, Reproductive centre

INTRODUCTION

Measures to recognize women's reproductive health necessities have shown that the interaction between clients and the service is a critical and neglected dimension of program efforts¹. Concern for clients' rights in the provision of reproductive health in developing countries has promoted intense efforts by international experts to promote client-centred models of communication as a replacement for more provider-centred approaches². Patient satisfaction is one the utmost goals of any health system, but it is difficult to measure the satisfaction and gauge responsiveness of health system as not only do the clinical but also the non-clinical outcomes of care influence the customer satisfaction³. Patients perceptions about health care system seems to have been largely ignored by health care managers developing countries, patient satisfaction depends up on many factors such as: quality of clinical services provided, availability of medicine, behavior of doctors and another health staff, cost of services hospital infrastructure, physical comfort, emotional support, and respect for patients' preferences.⁴ Therefore, assessing patient's perspectives gives them a voice,

which can make public health services more responsive to people's need and expectation⁵. Patients feedback is necessary to identify problems that need to be resolved in improving the health services.⁶ Measuring patient satisfaction depends on using the "accurate measures because it comprises of standards that incorporate dimensions of technical, interpersonal, social, and moral aspects of care".⁷ Quality of service delivery in health sector is the most ignored area in Pakistan.⁸ Evaluation of clients' satisfaction plays a significant role in the improvement of health care quality. In general, a patient's satisfaction is a complicated phenomenon that is influenced by different factors, and patient feedback is the foundation for improvement of quality programs. Reproductive Health Services A centers are located in separately constructed unites in Teaching Hospital, Metropolitan Hospitals, all DHQ and selected THQ Hospitals under the administrative control of Provincial Population Welfare Departments. These RHS-A Centers are staffed and equipped by Ministry of Population Welfare.

PATIENTS AND METHODS

This descriptive study was included 91 subjects and carried at Family Planning OPD Reproductive Health Services (RHS-A) Center Jinnah Hospital Lahore over a period of one month. Married women in reproductive age who were using family planning

¹Department of Community Medicine Central Medical College Lahore, ²Punjab Aids Control Programme Lahore, ³Department of Pathology, Basic Medical Sciences Jinnah Postgraduate Medical Center Karachi
Correspondence to Dr. Farah Rehman
Email: dr.sherni@gmail.com

services and willing to participate in the study were included. Subjects reporting for emergency and surgical services were excluded. Data collection started after taken letter from Institute of Public Health Lahore. When conducting the study, the general ethical principle that was respect of person's beneficence, justice was always kept in view. Each client was informed about the purpose, voluntary nature of study and confidentiality of information. All the sampled individuals were interviewed by researcher herself. All responses were entered in computer software Epi-Info 6 and the data was cleaned and analyzed.

RESULTS

Result shows that out 91 respondents, 34(37.3%) were 15-30 years old while 57(62.7%) respondents were 31-45 year old. 16(17.5%) respondents were illiterate, 2(2.2%) had primary education, 12(13.2%) were middle, 20(22%) had passed their matric examination and 41(45.1%) were intermediate and above. Out of 91 respondents, 48(52.7%) were housewives, 42(46.2%) were working ladies and 1 (1.1%) was student. 7(7.7%) respondents husbands were businessmen, 53(58.2%) were government employees and 31(34.1%) were working in private firms. Out of 91 respondents, 19(20.9%) had family income Rs.3000-6000/- per month and majority 72(79.1%) had monthly income more than Rs.6000/- per month (Table 1). Result shows that out of 91 respondents, 1(1.1%) was satisfied with the ability to discuss problems or concern about health, 16 (17.6%) were neither satisfied nor dissatisfied, 56 (61.5%) were unsatisfied and 18(19.8%) were highly unsatisfied (Table 2). Out of 91 respondents, 2 (2.2%) were neither satisfied nor dissatisfied about the availability of contraceptive methods at health facility, 62(68.1%) were unsatisfied and 27(29.7%) were highly unsatisfied (Table 3).

Table 1: Sociodemographic characteristics of the subjects (n = 91)

Variable	No.	%
Age		
15-30 years	34	37.3
31-45 years	57	62.7
Educational Status		
Illiterate	16	17.5
Primary	2	2.2
Middle	12	13.2
Matric	20	22.0
FA or above	41	45.1
Occupation		
Housewife	48	52.7
Working lady	42	46.2
Student	1	1.1
Monthly family income (Rs)		
3000 – 6000	19	20.9
> 6000	72	79.1

Table 2: Satisfaction of the women with ability of providers while discussing problems about health

Ability of Providers	No.	%
High satisfied	-	-
Satisfied	1	1.1
Neither satisfied nor dissatisfied	16	17.6
Unsatisfied	56	61.5
Highly unsatisfied	18	19.8

Table 3: Satisfaction of the women with the reproductive contraceptive methods

Availability of contraceptive methods	No.	%
Highly satisfied	-	-
Satisfied	-	-
Neither satisfied nor dissatisfied	2	2.2
Unsatisfied	62	68.1
Highly unsatisfied	27	29.7

DISCUSSION

To make family planning successful clients' satisfaction plays an important role. The Reproductive Health Service A (RHS-A) Center of Jinnah Hospital is providing family planning services to eligible couples. The present study was conducted to explore the client satisfaction of family planning services at this center. The study reflects that behavior of health care providers at RHS-A center was not satisfactory. A large number of clients i.e. (61.5%) were highly unsatisfied with their behavior. This corresponds to the findings of study, conducted by Nanbakhsh et al⁹ who reported that 34.0% of women were completely unsatisfied with their health care provider. There is need to educate the health care provide to adopt a better attitude with clients and try to satisfy their needs which will in turn improve the utilization of services leading to a successful family planning program.

It was astonishing to know that (61.5%) clients were unsatisfied and (19.8%) were highly unsatisfied with the ability of health care provider. It is a HCP responsibility to provide all the information required by the client and should fully satisfy him, otherwise the client will loose trust in the provider as well as service. Creel et al¹⁰ describe that clients want to receive information that is relevant to their needs, desires, and lifestyles. Clients who are well-informed and have made their choice about a contraceptive method may not want detailed information on a range of other methods. Others may want information about procedures, treatment, risks, and side effects.

Family planning is a very personal subject and people do not like to openly discuss their problems. Therefore, privacy is very much important in providing family planning services. It was observed that most (57.1%) of the clients were unsatisfied and (11.0%) were highly unsatisfied with the privacy arrangement at RHS-A centers. Creel et al¹⁰ also elucidated in their study that clients feel more

comfortable if providers respect their privacy during counseling sessions, examinations, and procedures. Lack of privacy can violate women's sense of modesty and make it more difficult for them to participate actively in selecting a family planning method.

Another important area of service provision is the availability and provision of contraceptive methods which in this case was again not satisfactory as (68.1%) clients were unsatisfied and (29.7%) were highly unsatisfied. The results of the study conducted by Nanbakhsh et al⁹ are better than this study because 76.2% of women were satisfied and 15.8% were completely satisfied with the total reproductive health service. The important factors for satisfaction were provision/availability of all modern contraception methods in the health centres. Satisfaction is essential to motivate and convince the clients for family planning. There is need to improve the clients satisfaction at RHS-A centres through various measures.

CONCLUSION

The use of family planning methods can be increased if the clients are satisfied. The cooperation of health care providers and the promotional campaigns by the government can increase the use of family planning methods. Education plays an important role in seeking any kind of services. Health personnel cooperation and abilities play a crucial role to satisfy the clients while in this case a large portion of clients was unsatisfied. There is need to increase the working hours of the health centre for the convenience of the clients. The clients should be facilitated at RHS-A centres and other facilities should also be provided along with family planning services. The highly satisfied clients not only use the family planning services but also will convince the others to use such services.

REFERENCES

1. Simmons R, Elias C. The study of client-provider interactions: a review of methodological issues. *Studies in family planning*, 1994, 25(1):1-17.
2. Abdel-Tawab N, Roter D. The relevance of client-centered communication to family planning settings in developing countries: lessons from the Egyptian experience. *Social science & medicine*, 2002, 54(9):1357-68.
3. Agrawal D. Health sector reforms: Relevance in India. *Indian J Community Med* 2006; 31: 220-2.
4. Jenkinson C, Coulter A, Bruster S, Richard N, Chandola T. Patient experience and satisfaction with health care: Results of a questionnaire study of specific aspects of care. *Qual Saf Health Care* 2002; 11: 335-9.
5. World Health Organization. *The World Health Report 2000 - Health System: Improving Performance*. Geneva: WHO, 2000.
6. Boyer L, Francois P, Doutre E, Weil G, Labarere J. Perception and use of the result of patient satisfaction surveys by care providers in a French teaching hospital. *Int J Qual Health Care* 2006; 18: 359-64.
7. Kane RL, Macejowski M, Finch M. The relationship of patient satisfaction with care and clinical outcomes. *Medical Care* 1997; 35(7): 714-30.
8. Sajid A, Ali H, Rashid M, Raza A. Impact of process improvement on patient satisfaction in public health care facility in Pakistan. 2008: 1-14. Available at: www.ep.liu.se/ecp
9. Nanbakhsh H, Salarilak S, Islamloo F, Aglemand S. Assessment of women's satisfaction with reproductive health services in Urmia University of Medical Sciences. *Health Journal* 2008; 14(3):43-9.
10. Creel LC, Sass JV, Yinger JV. Client-centered quality: Clients' perspectives and barriers to receiving care. *Population Reference Bureau*, 2002. Available at: <http://www.igwg.org>