# Patients' satisfaction for health care services at Thi-qar province,Iraq

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# ABSTRACT

#### **Background:**

Patient satisfaction is increasingly being recognized as central elements in the monitoring and evaluation of healthcare. Assessment of patient satisfaction offers a way of optimizing health status and prevents waste of medical resources. The direct measurement of patient satisfaction is a new phenomenon in Iraq.

## **Objective:**

In this survey, the level of patient satisfaction and its correlates were investigated in attendees at five health care facilities in Thiqar province,Iraq.

#### Method:

A cross sectional study of clients attending five public health care facilities during the period from March 2, to June 20, 2007. An exit interview was conducted with 452 clients using a special questionnaire consisting of socio-demographic, and health care service items.

#### **Results:**

Of the participants,222(49.1%) were dissatisfied with the health care services offered by facilities.High dissatisfaction rate was associated with low education.,unemployement, male gender ,and being single. There was a high significant statistical association between the age of clients , education ,marital status ,and employment with satisfaction for the health care services .Satisfaction rate was high for vaccination and very low for gynecology and obstetric services.

#### **Conclusion:**

There is a low satisfaction rate for the health care services at Thi-qar province in comparison with countries in the region and in the world, which indicate a need for corrective intervention in some service areas and a further thorough large-scale studies to explore the nature and correlates of satisfaction.

## **INTRODUCTION**

Patient satisfaction is an expression of the gap between the expected and perceived characteristics of a service. Satisfaction is a subjective phenomenon and could be elicited by asking simply how satisfied or not patients may be about the service(1).

Patient satisfaction is a component of healthcare quality and is increasingly being used to assess medical care in many countries in the world(1,2). Until recently, traditional assessments of medical care were done purely in

terms of technical and physiological reports of outcomes(1). Studies of patients attitudes towards health services. health personnel and constitute important resources elements in the extent to which the health services have met the consumers' expectations and needs, and hence can be viewed as a means of judging the degree of their satisfaction with the services.(3,4). It reflects the ability of the provider to meet patients' needs. Patient satisfaction is an important outcome of health care services. Satisfied patients are more likely than unsatisfied ones to continue using health care services, maintain their relationships with specific health care providers, and comply with care advice(5).Modern regimens and healthcare systems are seeking to adopt a more client-oriented approach to the delivery of healthcare. With this paradigm shift, patient satisfaction and quality of life are becoming increasingly as important as the more traditional clinic outcomes in the monitoring and evaluation of healthcare delivery (6). Satisfaction studies have been done mostly in developed countries. In developing countries, such studies are scarce and of a general nature. In the Gulf Region, some studies on satisfaction with ambulatory care were conducted in countries like Saudi Arabia.(7.8) the **Emirates(9)** United Arab and Qatar.(10)Such studies are lacking in Iraq. Concern over the quality of health care services in Iraq has led to loss of faith in public and private hospitals, and increasing outflow of Iraqi patients to hospitals in neighbouring countries. Under these circumstances and in the absence of studies measuring health care quality, assessment of the country's quality of care service has become health imperative, in which the patient's voice must begin to play a greater role. This study attempts to identify patients' satisfaction with health care services in Thigar province, Iraq and to measure sociodemographic correlates of satisfaction.

# METHOD AND MATERIALS

#### **Setting**

This was a cross-sectional, facilitybased study during the period from March 1 to June 20,2007. Exit interviews were conducted with patients and clients from 5 different public health care facilities at Alnassirya city,the center of Thiqar province. The facilities included were:

1-Al-Hussain Teaching Hospital ,the main hospital in the city with emergency, inpatient and outpatient services.

2-Al-habobiGeneral Hospital a main hospital with

gynecology,obstetric,pediatric

,and infectious diseases units.

**3-Al-Habobi Primary Health care center** with outpatient-based general practice and vaccination unit.

4-Endocrine and diabetic center ,an outpatient-based facility.

5-Al-Rasool Primary Care Health center.

#### **Participants**

Patients and clients were requested to participate in the interview when they came out of the hospital after a a health consultation with care provider.The interviews were conducted at 10 a.m to 12 a.m on Sunday, Tuesday, and Thursday each week during the survey period. All patients and clients who were resident in the catchment area of the health care facilities and were aged over 18 years at the time of interview were included. The respondents excluded were those who were seriously ill, staff members of the hospital and medicolegal cases. After obtaining consent and explaining the purpose of the survey, interviews were conducted by a team of fourth year medical students interviewers .The had rigorous training on the questionnaire itself, interviewing skills and research ethics.452 clients were successfully interviewed.

#### Measure

A special questionnaire was developed by the research team which includes demographic information on sex,age,marital status,education ,residence and employment.It also includes inquiry about cause and type of consultation.To measure the degree of satisfaction,a 4-points Likert's scale was used which includes satisfied,very atisfied,unsatisfied,and very unsatisfied choices .This gives the clients and patients an opportunity to rate their satisfaction with variable degrees .

## Statistical analysis

Statistical analysis were performed using statistical package of social sciences-15 version (SPSS-15).Chisquare test was used at P value of 0.05.The unsatisfied and very unsatisfied were added together,so were the satisfied and very satisfied in assessing the relation of satisfaction with other variables.

# **RESULTS:-**Sociodemographics of the sample

The age breakdown of the clients showed that 42% were aged45 years and older, 33.7% were 30-45 years, 24.3% were 15-29 years (table 1). More than half the clients were women (55.1%). As for literacy levels, 43.1% were graduated from secondary schools,22.4% primary from school,18.6% were having an education beyond secondary schools.and 15.95% were illiterate.. The majority of the clients were single (74.1%),128(28.3%) were employed and 324 (71.7%) were unemployed (table 2).

#### Consultation trends

Table.3 shows the distribution of clients according to the type of consultation.Of the clients, 259(57.3%) came to the health facility for medical consultation , 89(19.6%) surgical consultation ,68(15%) gynaecological consultation, and 36(7.9%) for vaccinationtation

## Satisfaction trends

Of the clients,sixty-one(13.4%) were very satisfied with the health services provided in the facility,179(39.6%) were satisfied,140(30.9%) were unsatisfied,and 82(18.1%) were very unsatisfied as shown in table 4.

High level of satisfaction were associated with increasing age, being female, having less education .and being employed(table 5)..There was a high significant significant statistical association between the age of clients and education ,marital status and occupation with satisfaction for the health care services but there was no significant statistical association between satisfaction and sex.Unsatisfied patients outnumber those satisfied in medical obstetric, and gynelogical consultations while the was found opposite in surgical consultation and vaccination

## **DISCUSSION**

To our knowledge this study is one of the first to address patients' satisfaction with the health services provided conducted in Iraq yet.

.The important finding in this study is that nearly half the studied sample were unsatisfied or very unsatisfied with health care services provided at 5 health facilities. care In addition.satisfaction bears relation with different demographics and type facilities.The services overall of satisfaction of patients at Thigar province is lower than that reported from other studies conducted in Kuwait and Saudi Arabi(2.11.12) but are much lower than the reported findings of many worldwide studies which ranged from 61 to 97%.(13,14). It is difficult to interpret these wide differences in range without adequate information about many aspects, such as study methodology and populations; health systems characteristics. sociocultural values and attitudes.

The lowest satisfaction level in this study was for services provided in gynecology and obstetric facility which might be explained partially by the high rate of interventions and to the work overload imposed on the staff. As for the patients' sociodemographic correlates of satisfaction with the services offered. only gender. occupation ,education,and marital status appear to be correlated with satisfaction. Studies have reported variable associations of satisfaction according to the sociodemographic characteristics of patients. The findings of these studies did not reveal a consistent pattern and at times reported contradictory patterns in many countries in the Gulf Region, such as the UAE. Oatar and Saudi Arabia(8,9,10,11). Differences in the perceptions and expectations of clients and providers might explain in part the low satisfaction among those who were unemployed, single, having little education and males . The main limitation of this study is that it measures the overall satisfaction which ellicits patients' views about the health care delivered but does not illicit their veiews about different components of

services.Other limitations are the small sample size and the time when clients were interviewd.The clients were interviewed in the day time hours and this may gives rise to some bias in the results. The cross-sectional study and the respondent bias do not permit causal inferences about the results . We hope that other studies will be carried out in a larger sample of subjects and other health care facilities covering the other aspects of health services offered.In addition ,these studies should explore the important factors influencing patients' satisfaction such as staff attitudes, the clinical environment, the services available and the operating hours. The results of such studies can be valuable in planning new services and expanding and reorganizing current services. The providers must get firsthand information from their clients which should help them to reorient their services by adopting a more client-centred approach, transforming their attitude and introducing a convivial ambience at health service outlets based on the feedback of their clients.

age	male	%	female	%	total	%	
15-29	48	10.6	62	13.7	110	24.3	
30-45	68	15	84	18.5	152	33.7	
≥45	87	19.2	103	22.7	190	42	
Total	203	44.9	249	55.1	452		

Table (1) distribution of patients according the age and sex.

Table (2) distribution of patients according to the demographic	
character.	

		Education			Marital status		Employment	
	illitra	t primar	secondar	Beyond	Marrie	singl	unemploye	Employe
	e	У	У	secondar	d	e	d	d
				У				
No	72	101	195	84	117	335	128	324
•								
%	15.9	22.4	43.1	18.6	25.9	74.1	28.3	71.7

Type of	medical	surgical	Gynecological&	For	total		
consultation			obstetric	vaccination			
N0.(%)	259 (57.3)	89(19.6)	<b>68</b> (15)	36(7.9)	452		

#### Table (3) type of patients' consultation.

#### Table (4) patients' satisfaction in relation to type of cosultation.

		Degree of patients satisfaction			
Cause of	Number of	Very	Satisfied	Unsatisfied	Very
consultation	patients	satisfied			unsatisfied
Medical	259	32	90	86	51
Surgical	89	18	43	17	11
Gynecological	68	0	22	27	19
&obstetric					
For	36	11	14	10	1
vaccination					
Total	452	61 (13.4)	179(39.6)	140 (30.9)	82(18.1)

#### **Table 5 Effects of Selected Variables on Satisfaction**

Variable Satisfied(N=230)	Unsatisfied(N=222)	Total x2
P Age years		
15-29 42 (18.2)	68(30.6)	110
30-44 53 (23.0)	109(49.0)	152
≥45 135(58.69)	55(24.7)	190 57.0
< 0.05		
Sex		
Male 96(41.07)	107(48.19)	203
Female 134(58.2)	115(51.8)	249
Total 230	222	452 1.74
<0.05		
Education		
Illiterate 48(20.8)	24(10.8)	72
Primary 73(31.7)	28(12.6)	101
Secondary 97(42.1)	98(44.1)	195
> Secondary 12(5.2)	72(32.4)	84
<0.05		67.1
Marital status		
Married 198(86)	137(61.7)	335
Single 32(13.9)	85(38.2) 117	
<0.05	33.56	
Employment		
Empoloyed 92(0.4)	36(16.2)	128
Unemployed 138(0.6)	186(83.7)	324 31.6
<0.05		

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رضا المريض عن الخدمات الطبية في محافظة ذي قار - العراق علي عبد سعدون ، احمد حسن حسين ، طالب رزاق مسهر كلية الطب جامعة ذي قار

#### الخلاصة

درجة رضا المرضى عن الخدمات الطبية المقدمة عنصر محوري وأساسي في مراقبة وتقيم تلك الخدمات وقد أصبح قياس درجة رضا المراجعين عن الخدمات الطبية المقدمة وبشكل متزايد من إحدى الطرق الجيدة لتحسين الحالة الصحية للمجتمع ومنع الصرف الخاطئ وغير المبرر للموارد.وخصوصا في العراق حيث انه لا توجد دراسات سابقة حول قياس درجة رضا المرضى والمراجعين عن الخدمات الطبية المقدمة .

#### الأهداف

أهداف الدراسة هي استبيان عن الخدمات الطبية والعوامل ذات العلاقة بها لدى عينة من المراجعين في خمس مؤسسات طبية في محافظة ذي قار في العراق .

### طريقة العمل

دراسة مقطعية شملت ٢٥٢ مراجعا لخمس مؤسسات طبية خلال الفترة من الثاني من آذار و إلى العشرين من حزيران عام ٢٠٠٧ تمت مقابلة المراجعين باستخدام استبيان خاص يحوي أسئلة عن الحالة الاجتماعية للمراجعين (مستوى الدراسي ،الحالة الزوجية ،العمل ،العمر والجنس ) وأسئلة أخرى عن درجة رضاهم باستخدام طريقة لايكر حيث قسمت إلى أربعة درجات (راضي جدا ،راضي ،غير راضي وغير راضي جدا).

#### النتائج

أظهرت الدراسة أن ٢٢٢ مراجعا(٩,١ ٤ %) كانوا غير راضين عن الخدمات الطبية المقدمة و كانت نسبة الغير راضين عالية جدا بين الذكور، غير المتزوجين، قليلي التعليم و العاطلين عن العمل وقد وجد تناسب إحصائي مهم بين العمر ،الحالة العلمية ،الاجتماعية للمراجع ووظيفته و رضاه عن الخدمات سجلت أعلى درجة رضا بين المراجعين لخدمات التلقيح بينما اقل درجة بين مراجعي الأمراض النسائية الولادة.

## الاستنتاج

درجة رضا المراجعين عن الخدمات الطبية المقدمة في محافظة ذي قار متدنية وبشكل ملحوظ إحصائيا بالمقارنة مع دول الجوار أو دول العالم الأخرى ، والتي تستدعي التدخل لإصلاح الخلل في بعض نواحي الخدمات ونوعيتها والحاجة الماسة لدراسة واسعة ا لاستكشاف العوامل المحددة لمستوى الرضا وطبيعته.