

CLIENT'S SATISFACTION OF A STI CLINIC IN THE TERTIARY CARE CENTRE OF CHITTAGONG

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Summary

Patient satisfaction with care is a construct reflecting the overall experience of an individual receiving examination and treatment in a given environment during a specified time period. Sexually Transmitted Infections (STI) still accounts for one of the most sensitive health problems in Bangladesh. A cornerstone of effective STI patient management is patient's satisfaction because the physician's diagnosis and prescribed therapies alone are not enough for the recovery of the patient. The aim of this study is to assess the satisfaction level of STI care services rendered by the STI clinic in the tertiary care centre of Chittagong. This cross sectional study was conducted on the patient attending at Outpatient Department (Skin & VD) of Chittagong Medical College Hospital. A total of 112 patients were interviewed by using structured questionnaire. Mean age of the respondent was 34.5±11.6 years. Majority of the respondents belonged to the age group of 25 to 35. Out of the 112 respondent 84 (75%) were male and 28 (25%) were female. Among them 78.6% respondent were Muslim and 21.4% were non Muslim. It was also observed that 17.9% were illiterate and 82.1% were literate. The study focused that education, occupation, marital status, family income, doctor's behavior, staffs behavior; OPD facilities etc. influenced the satisfaction of the respondents. Most of the respondents were satisfied with the behavior of the doctor. They were also satisfied with the service of the doctor. But most of the respondents were dissatisfied with service of the staff. It was also found that educated group of respondents showed more dissatisfaction about the overall service. In contrast those who had less educational qualification were quite satisfied about the service. Most of the respondents commented that doctors behavior were good enough while staffs behavior

were not satisfactory. About the overall service of the Outpatient Department, around 41% respondents stated that they were somehow satisfied. The results of the study indicate that the overall satisfaction of the patients mainly depend on the education, occupation and family income of the respondents.

Key words

Patient satisfaction; sexually transmitted infections (STI)

Introduction

Satisfaction is an issue of global concern. It should be discussed, analyzed and practiced meaningful way, World health Organization (WHO) given enough importance and emphases to implement the aspect with resources allocation. But in developing countries like Bangladesh, we are just beginning of our assessment on health care quality and its effect on health and health service delivery. Satisfaction means different things to different people. Satisfaction is a relative or cooperative terms, judgments and perceptions of quality change over time [1].

Measure by self report, patient satisfaction with care has become a worldwide concern in virtually every health care specialty [2-4]. Conceptually, patient satisfaction with care can be viewed from the perspective of quality care and customer service [5]. For example, people who are satisfied with care are more likely to complete a course of treatment; potentially improving their overall outcomes over those of people who do not return for prescribe care [6].

At present, Sexually Transmitted Infections (STI) still accounts for one of the most sensitive health problems in Bangladesh. Recently the additional Acquired Immune Deficiency Syndrome (AIDS) to the family of STI's have been arisen great concern and drawn back the attention of policy makers, effective STI's prevention and control play an important role in the prevention and control of HIV infection. A cornerstone of STI control is effective in STI patient management [7]. This includes diagnosis combined with individual counseling, health education, condom promotion and provision and partner notification. Patient management is provided through STI care services or clinical services which should be accessible, acceptable and effective.

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There is growing recognition of public health importance of STI's because of the degree of mortality and morbidity and the consequences of these diseases have great adverse impact on health, social and economic condition of the individual, society as well as nation. No single strategy will work in isolation in the fight against these diseases. A unified approach based on sound principles need to be implemented, globally, regionally and locally in order to have appreciable impact. The Skin and Venereology department of Chittagong Medical College Hospital is providing STI's care services as specialized referral centre for the STI vulnerable groups of the people living in and outside Chittagong city those who are affected and seek care.

Patient satisfaction or dissatisfaction is the outcome of program activities. The manager is helped by it's assessment to foresee the fate of the program. After establishment of Skin and VD department in Chittagong Medical College Hospital, not any study was conducted to explore the need and satisfaction of the patients while seeking healthcare from healthcare provider. It is interesting to study the patient's opinion and satisfaction regarding health care in order to suggest recommendations for improvement. With this view the study was conducted to know the degree of opinion and level of satisfaction of the patients who received service from OPD of Chittagong Medical College Hospital.

Materials and methods

This cross sectional type of study was conducted in the Out patient Department of Chittagong Medical College Hospital extended over a period from March 2010 to June 2010. The respondent of the study were the outdoor patients of skin & VD Department of the hospital. A purposive sampling technique was adopted to select study subjects. Only out patients who were above 15 years and willingly agreed for the interview were selected for the study. Those who were very sick and mentally handicapped were excluded from the study. A pretested structured questionnaire was used for collection of data. To assess the level of satisfaction of the respondent at every point of service delivery, there were a number of pertinent questions. As there was more than one question in assessing respondent's level of satisfaction, combined scores were used to measure the level of satisfaction. The level of satisfaction were measured on a 1-4 Likert Scale where 1 means 'highly satisfied' and 4 means 'highly dissatisfied' 2 stands for 'satisfied' and 3 stands for 'dissatisfied'. All data analyses were performed by using SPSS (Statistical Package for Social Sciences) Win Version 17.0.

Results

It was a cross sectional type of study which was conducted in Chittagong Medical College Hospital to assess the satisfaction of STI (Sexually Transmitted Infection) patients attending at out patient department regarding service provided by the health care provider. Data were collected from the out door patients. Total 112 respondents were interviewed using a structured questionnaire and observation checklist issues were evaluated in terms of number of variables to assess the quality of STI care services rendered by the mentioned department. Assessment of patient satisfaction on health care service is a difficult task because the dimension of satisfaction varies widely from patient to patients. Good quality of service is essential for patient satisfaction. Qualified doctors, adequate material support and efficient management of resources are pre requisite of good quality care. Client's degree of satisfaction depends to a great extent on physical, functional, and social aspect of the service delivered.

Table I shows the distribution of the respondents by age, sex, religion, occupation, marital status, education, monthly family income and residence.

Table II shows the respondents opinion regarding attention of doctors towards them. Among the respondents 17.85% reported that doctors had full attention towards them. 50% reported that doctors had partial attention and remaining 32.14% reported that there were no attentions of doctors towards them. Among the male respondents (84), 9.52 % stated that doctors maintained full attention during the visit. Among the female respondents (28), 42.85% stated that full attention was maintained.

Table III shows the respondents opinion regarding privacy maintained by the doctor. Among the respondents 21.42% reported that privacy was fully maintained by the doctor at the time of physical examination. 75% respondent reported that privacy was partially maintained and 3.57% reported that doctor did not maintain any privacy during the examination procedure. Among the male respondent 9.52% reported that privacy was fully maintained while among the female respondent 57.14% reported the same.

Table I: Baseline characteristics of the respondents

Characteristic	Frequency	%
Age		
15-24	15	13.39
25-34	65	58.03
35+	32	28.57
Sex		
Male	84	75
Female	28	25
Religion		
Muslim	88	78.60
Hindu	16	14.30
Buddhist	4	3.60
Christian	4	3.60
Occupation		
Student	8	7.14
Housewife	16	14.28
Service holder	36	32.14
Businessman	12	10.71
Daily laborer	20	17.85
Others	20	17.85
Marital status		
Married	72	64.30
Unmarried	40	35.70
Education		
Illiterate	20	17.90
Up to five	24	21.40
SSC	24	21.40
HSC	24	21.40
Graduate and above	20	17.90
Monthly family income		
Up to five thousand taka	8	7.10
Five to ten thousand taka	28	25
Over ten thousand taka	76	67.90
Residence		
Urban	56	50
Sub urban	28	25
Rural	28	25

Table II: Respondent's opinion regarding attention of doctors towards them (n=112).

Sex of the respondent	Attention of doctors towards patient						
	Full attention	Partial attention	No attention	Total			
Male	8	9.52 %	48	57.14 %	28	33.33 %	84
Female	12	42.85 %	8	28.57 %	8	28.57 %	28
Total	20	17.85 %	56	50 %	36	32.14 %	112

Table III: Respondents opinion regarding privacy maintained by the doctor (n=112)

Sex of the respondent	Privacy maintained by the doctor at the time of physical examination				Total			
	Fully maintained	Partially maintained	Not maintained					
Male	8	9.52%	72	85.71%	4	4.76%	84	75%
Female	16	57.14%	12	42.85%	0	0%	28	25%
Total	24	21.42%	84	75%	4	3.57%	112	100%

Table IV: Level of satisfaction of the respondents measured by Likert Scale (n=112).

Parameter	Likert Scale Score			
	Highly satisfied	Satisfied	Dissatisfied	Highly dissatisfied
Education				
Illiterate	0	8(40)	12(60)	0
Up to five	4(16.6)	16(66.6)	4(16.6)	0
SSC	0	8(33.3)	16(66.6)	0
HSC	0	16(66.6)	8(33.3)	0
Graduate and above	0	4(20)	12(60)	4(20)
Occupation				
Student	0	8(100)	0	0
House wife	0	16(66.6)	8(33.3)	0
Service holder	0	8(22.2)	24(66.6)	4(11.1)
Businessman	0	4(33.3)	8(66.6)	0
Daily laborer	4(33.3)	8(66.6)	0	0
Others	12(60)	8(40)	0	0
Family income				
Up to five thousand taka	0	8(100)	0	0
Five to ten thousand taka	4(14.2)	16(57.1)	8(28.5)	0
Over ten thousand taka	0	28(36.8)	44(57.8)	4(5.2)
General service				
Cooperation in OPD	12(10.7)	44(39.2)	44(39.2)	12(10.7)
Collection of ticket	18(16.0)	36(32.1)	48(42.8)	10(8.92)
Environment of OPD	22(19.6)	26(23.2)	56(50)	8(7.1)
Lab. facilities of OPD	16(14.2)	24(21.4)	60(53.5)	12(10.7)
Medicine supply	13(11.6)	37(33.0)	40(35.7)	22(19.6)
Cost of OPD	12(11.7)	44(39.2)	56(50)	0
Doctor's service				
Doctor's attention	20(17.8)	56(50)	36(32.4)	0
Doctor's behavior	4(3.5)	64(57.1)	44(39.2)	0
Privacy maintained by them	12(11.7)	44(39.2)	56(50)	0
Overall service	4(3.5)	52(46.4)	52(46.4)	4(3.5)
Staff's service				
Behavior of staff	8(7.1)	23(20.5)	61(54.4)	20(17.8)
Service of staff	17(15.1)	21(18.7)	53(47.3)	21(18.7)
Teamwork	13(11.6)	19(16.9)	55(49.1)	25(22.3)
Service of OPD				
General service of OPD	15(13.9)	38(31.9)	51(45.7)	14(9.5)
Doctors service at OPD	11(10.1)	50(48.2)	48(42)	10(8)
Staffs service at OPD	12(11.1)	21(18.7)	58(53.2)	24(19.6)
Other factors	3(2.5)	28(23.3)	26(23.7)	2(1.9)

#Figures in the parentheses represent percentage

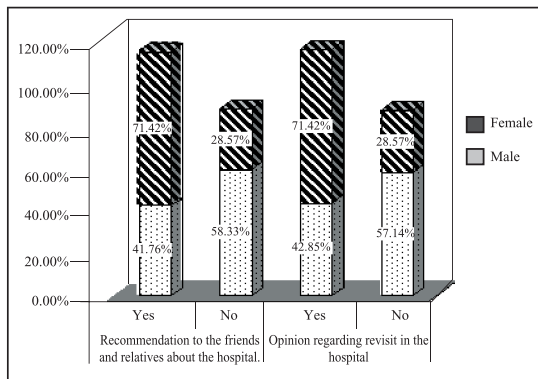


Fig 1: Respondents opinion regarding recommendation and revisit to the hospital

Discussion

In this study 13.39% respondent were in the age group in between 15 to 24 years followed by 58.03% in the age group 25 to 34 years and 28.57% were above 35 years. Out of total 112 respondents, 58.3% (maximum) were in the age group of 25 to 34 years (Table I). This age group is very indicative in various aspects. Taufiqunessa in her study found that STI's were highest among the sexually more active age group (20 to 39 years) [8]. A five year retrospective study conducted by Haque MM et al in Dhaka Medical College Hospital found that most of the STI cases were in the age group of 30-35 years (33%) but the result of the present study shows the age groups in between 21-30 years (58.03%) were suffering from STI's more[9].

In respect of sex 75% (84) of male patients attended at skin and VD OPD to seek medical care and 25% (24) females were attended at OPD (Table I). From the five years retrospective study conducted by Haque MM et al it has been found that 93.2% male and 6.2% female patients attended OPD of skin & VD at Dhaka Medical College Hospital during the year 1993 to 1997[9]. The causes of low attendance of the female STI patients at OPD may be due to 70% of STI patients are asymptomatic and due to fear of stigmatization and less access to treatment centers [8]. 78.6% of Muslim and only 14.3% Hindu by religion attended at OPD. The percentage of other religion groups of people who were found to seek STI care at OPD is very little.

The study revealed that the highest percentage (32.14%) of service holder group of people attended at OPD with STI's and the second rated group (17.85%) was from the daily laborers followed by 14.42% housewives and 10.71% were from the businessman group (Table I). Islam AKM et al in their study identified the students and the laborer as the most high risk group for the spread of STI's[10].

Haque MM et al in their study showed that 30.2% daily laborer, 20.3% service holders, 20.2% businessman and 19.0% students were the STI's patient during his study period (1993-1997) at skin & VD OPD of DMCH [9]. In this study, STI prevalence among the laborer and businessman were found a little lower than Haque's study. Out of 112 (100%) respondent 64.3% were unmarried and 35.7% were married (Table I). This study indicated that both premarital and marital promiscuity sex practice are prevailing in our country among the STI vulnerable group of people. It was found from the other study that 66.7% unmarried and 33.3% married STI patients attended at OPD of DMCH. The result of the present study is similar to the comparative study.

The present study also revealed that the prevalence of STIs is more or less equally distributed among all the group of educational level. It was found that highest percentage (21.4%) were in the Primary level educated people, SSC group, HSC group followed by the next highest group (17.9%) were illiterate group (Table I). Taufiqunessa in her study mentioned that the illiterate group (68.39%) showed a high frequency [8]. In this study the frequency of STIs among the illiterate group is quite high and similar to her study.

According to John Fiedler's statement, individual with more education will know more about the availability of medical care and acquiring health facilities more efficiently [11]. In this study it was found that 7.1% respondents were from lower income age group with monthly family income below 5000.00 per month and the upper income group with family income above 10000.00 was 67.9% (Table I).Taufiqunessa in her study found most of the patients were from family income of 5000.00 per month (56%) which was lot higher than this study [8].

According to this study it has been found that 50% were from urban area, 25% from sub urban area and remaining 25% from rural area (Table I). This study reflected that in rural society STIs were also prevailing and wide spread. Former et al also observed that pre marital and extramarital sex is quite common in rural societies of Bangladesh.

The study also showed the degree of overall satisfaction level with education, occupation and average family income. Out of 112 respondents, among the illiterate group, 40% were satisfied and 60% were dissatisfied. Among the primary education group, 73.12% were satisfied and 16.88% were dissatisfied. Among the SSC group, 33.33% were satisfied and 66.66% were dissatisfied. Among the graduate group, only 20% were satisfied and 80% were dissatisfied (Table IV). From this study it was found that patients of less educated group were quite satisfied and average educated were less satisfied about the overall service of OPD. But highly educated group showed their high rate of dissatisfaction (80%) about the OPD service. The association of education and overall satisfaction level were quite significant.

The present study revealed that the distribution of satisfaction level among the various occupational group were not the same. The satisfaction rate of student group was 100% followed by housewife group 66.66%. The service holder group and businessman group were equal in showing their dissatisfaction (66.66%). Again daily laborers were quite satisfied (60%) about the overall service (Table IV). So it was found from the study that those who were from better profession having higher expectation were about the overall service of OPD.

The degree of overall satisfaction level differed with the range of monthly family income group. Among the respondents who had a family income of up to five thousand taka they were all satisfied (100%) about the overall service. Among the respondent from the average family income of five to ten thousand taka 61.3% were satisfied and 28.57% were dissatisfied. Among the respondent from the average family income of over ten thousand taka 36.84% were satisfied versus 57.89% were dissatisfied (Table IV). So it was found that respondents who had higher average family income were dissatisfied about the overall service of the Out Patient Department.

In this study, respondent's opinion regarding hospital environment 46.8% stated that hospital environment is neat and clean while 53.2% respondents differ with this opinion (Table IV). Taufiqunnessa in her study found that only 33% respondent were satisfied with the environment of OPD and remaining 67% were dissatisfied [8]. So in both studies it was found that respondents had shown their dissatisfaction about OPD environment.

In the present study, 17.85% respondent stated that doctors had full attention towards them and 32.15% differs with the opinion. About 50% said that doctors had partial attention towards them (Table II). Faruque MM et al, in his study found that about 49% patients opined that doctors were not attentive at the time of consultation [12]. The result of the present study is quite similar to the study of Faruque MM et al. On the other hand White KL in his study mentioned the importance of service providers and users interaction [13].

Regarding privacy maintained by the doctor, this study revealed that 21.42% respondents opined that the privacy were maintained by the doctors during their consultation and physical examination and only 3.57% had given their negative answer. 75% respondents reported that the doctors had partial attention towards them (Table II). Out of 112 respondent 11.72% were highly satisfied, 39.28% were satisfied and 50% were dissatisfied. The above findings reflected that there was an important relation between attentiveness and privacy maintained by the doctors and the level of satisfaction of the respondents.

In the present study, regarding behavior of the doctor, 3.5% were highly satisfied, 57.1% were only satisfied and 39.2% showed dissatisfaction (Table IV). Regarding staffs behavior 27.6% reported staffs behavior as good and remaining 72.4% as bad (Table IV). It was found that doctor's behaviors were much better than that of the staffs. Yasin AHMM in his study mentioned that 68% patients opined that behavior of the physician were moderately good, majority of the patients were dissatisfied with the behavior of other staffs [14]. The unpleasant behavior of the provider was mentioned as 37.9% by Taufiqunnessa in her study [8]. She also found that good behavior of the health care providers prevents drop out of STI cases.

In the present study according to doctors advice out of 112(100%) respondents 35.6% patients were satisfied about the facilities of laboratory investigation and remaining 64.4% were not satisfied (Table IV). Monsur MA conducted a study in DMCH where he found 83.8% patients were satisfied about the facilities of laboratory investigation [15]. Remaining 16.2% were not satisfied about the laboratory facilities. Above findings show that the laboratory facilities of OPD of CMCH is less adequate than that of DMCH.

Regarding the opinion of the respondents about medicine collection, only 44.6% of them reported that they were satisfied. About 55.4% stated that they were not satisfied about the medicine supply (Table IV). Monsur M Ali's study showed that about 55% patients got medicine supply from hospital OPD. These shows that medicine supply service is found slightly better in his study.

Regarding respondents satisfaction about the cost of the treatment, this study revealed that 11.7% respondents were highly satisfied, 39.2% were satisfied and 49.1% were dissatisfied (Table IV). So the satisfaction rate is quite good in this context. Faruq MO in his study showed that less the cost of the treatment more the rate of satisfaction [12].

In this study it was found that only 34% respondents showed their satisfaction about the service of the supporting staff and remaining 66% showed their dissatisfaction. Study also showed that 28.5% were satisfied and 71.5% were dissatisfied about the teamwork between doctors and staff (Table IV). Faruq MO in his study found that about 58% patients expressed their satisfaction on the service of the staff which is much higher than the present study [12].

In the present study the overall satisfaction of the respondents regarding total STI care services of OPD, it was found that 11.7% respondents were highly satisfied followed by 32.9% were satisfied, 46.9% were dissatisfied and 9.9% were highly dissatisfied out of the total 112 (100%) respondents (Table IV). Faruq MO in his study showed that 54.4% were satisfied, 29.2% were partially satisfied and 10% were not satisfied at all with the overall service of the outpatient department [12]. In this study the overall satisfaction level was less than Faruq's study. Mansur MA in his study found that 40.2% respondents were average satisfied. 25.5% were satisfied, 16.7% were not satisfied and 17.6% did not respond about the overall services provided at the outdoor [15]. J Ndulo et al conducted a study¹⁶ on quality care in sexually transmitted diseases and the author stated that patient's satisfaction is an important consideration in today's health care environment for many reasons [16]. He also emphasized in his study that, the patient's satisfaction may reflect the quality of care actually received and failing to meet the customer's expectation of care might result in dissatisfaction. This ultimately results in poor utilization of the health services. In this study regarding patient satisfaction 46.9% were dissatisfied and 9.9% were highly dissatisfied, so the total of 57% overall services were failed to meet the consumers expectation and this may be treated as poor utilization according to J Ndulo et al.

In this present study, respondents opinion regarding revisit to the hospital, 50% respondents showed their interest to revisit the hospital and remaining 50% was not interested (Fig 1). Again regarding recommendation of the CMCH to others, 49% respondents stated that they would recommend and 51% stated that they would not (Fig 1). Toufiqunessa in her study showed that patients satisfied with the overall service of the hospital, showed their tendency to revisit in the hospital and they were also found to recommend their relatives about the hospital [8].

Conclusion

Patient satisfaction with care can be viewed from the perspective of quality care and customer service. People who are satisfied with care are more likely to complete a course of treatment; potentially improving their overall outcomes over those of people who do not return for prescribe care. In this study, each step of the outpatient services was evaluated on the basis of patient's responses. The findings revealed that major portion of the respondents were satisfied about the overall service

of the doctors but showed dissatisfaction about the general service of OPD and other health care provider. The satisfied respondents had shown their keen interest to visit the hospital again if they need any further treatment. They also showed their interest about recommending this hospital to their friends and relatives. The results of the study indicate that the overall satisfaction of the patients mainly depend on the education, occupation and family income of the respondents.

Disclosure

All the authors declared no competing interest.

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