

Women Satisfaction with Antenatal Care Provided in Saad-Abu-Al-Olla Hospital in November 2018 - January 2019

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Abstract

Introduction: Women satisfaction with their antenatal care can be considered as mirror reflecting the quality of health system.

Methodology: Facility based cross sectional study in Saad-Abu- Al-Olla Hospital between November 2018 - January 2019, 150 mother participated in the study, semi structured questionnaire was filled by self-administered and direct interview, data analyzed to estimate the level of satisfaction.

Result: We enrolled 150 mother who attend Saad-Abu-AL-Oola Hospital the mean age was 30 year (SD = 5.3), regarding their satisfaction the overall satisfaction is high (95%). (94%) of the mothers are satisfied with medical information they get during their antenatal care. (93%) of them are satisfied with health cadres attitude and practice. (97%) satisfied with their antenatal care visits quality and quantity. (87%) of mothers are satisfied with the general set up of antenatal care clinics. (82%) of women say that they will repeat their experience in the same antenatal care clinics and (85%) will advise their friends to receive their antenatal care there too.

Conclusion: Degrees of satisfaction with antenatal care services is good (95%) but still more funds, studies, medical counselling health education, workers and polices are needed to improve:

- Medical counselling about contraceptives uses, advantages and disadvantages.
- To lessen out of pocket payment for health services and drugs buying and to lessen waiting time in ANC clinics.
- To improve cleanliness and tidiness in ANC clinics.
- To increase health coverage in ANC clinics.

Recommendation: More funding should be directed to help mothers to receive antenatal consultation and to get the needed drugs, more trained health cadres should be available to minimize waiting time in ANC clinics, also there should be enough number of cleaners to keep ANC clinics clean and comfortable for mothers.

Keywords: Antenatal Care; Women; Satisfaction; Saad-Abu-Al-Olla Hospital

Abbreviations

ANC: Antenatal Care; WHO: World Health Organization; MMR: Maternal Mortality Rate; SPSS: Statistic Package for Social Science; SD: Standard Deviation; NGOs: Nongovernmental Organizations

Introduction

Background

Pregnancy is one of the most important events that constitute powerful experience in women's lives, and indeed in the lives of their families. Although pregnancy is a normal physiological process, it is associated with certain risks to health and survival both for the woman and for the infant she bears, these risks are present in every society and in every setting. In developed countries they have been largely overcome because every pregnant woman has to take special care during pregnancy and childbirth. In developing countries where each pregnancy represents a journey into the unknown from which all too many woman never return, due to lack of care provision [1].

Consumer satisfaction has achieved the status of an important measurement domain in health and human service outcome assessment. Recent reviews and compendiums of outcome measures for health and human services emphasize the value of information about consumers' satisfaction with services [2]. Between 1990 and 2010, maternal mortality worldwide dropped by almost 50%, every day, approximately 800 women die from preventable causes related to pregnancy and childbirth and 99 per cent of all maternal deaths occur in developing countries, Sub-Saharan Africa had the highest maternal mortality rate (MMR) at 500 maternal deaths per 100 000 live births. Ethiopia is one of the few countries that account for most of the maternal deaths; others include India, Nigeria, Democratic Republic of the Congo, Pakistan, Sudan, and Indonesia [3]. Antenatal care is a key strategy for reducing maternal morbidity and mortality directly through detection and treatment of pregnancy related illness, or indirectly through detection of women at risk of complications of delivery and ensuring that they deliver in a suitably equipped facility [4].

Problem Statement

The growing demand for health care coupled with constrained resources and evidence of variation in maternity care practices have increased interest in measuring and improving quality of institutional delivery care services in many countries especially developing one, incorporating patient perspective into quality assessment is critical in making health services more responsive to people need, so health provider can determine the aspects of care that need to be focused on while assessing the quality of care and taking action to improve it, so ensure sustainable use of these services.

Justification

Knowing and monitoring women gratification and complains regarding ANC is an indicator of quality of care and contribute to care improvement. Although client satisfaction is an important indicator of quality of healthcare, limited studies were conducted in Sudan regarding it.

Objectives of the Study

General objectives: To study women satisfaction with ANC in Saad-Abu-Al-Olla Hospital.

Specific objectives:

- To estimate level of satisfaction among ANC users in the hospital.
- To identify factors in ANC services provided in the hospital which make them satisfactory or not to the users.
- To identify socioeconomic and cultural factors that may influence women satisfaction with ANC service in the hospital.

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Methodology

Study design

Descriptive cross sectional facility based survey.

Study area

Saad- Abu- Al-olla Hospital.

Study population

Women that have babies of 5 years of age or less who attend Saad-Abu-Al-olla Hospital during the period of the study included pregnant mothers.

Inclusion criteria

Mothers of children of less than 5 years of age who were following in the hospital for routine ANC.

Exclusion criteria

- Mothers who refuse to contribute to the study.
- Mothers of children of more than 5 years of age.

Sampling:

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s = p(1_p) z*2 \div r*2
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Where:

s = Sample size

r = Margin of error = 1.96

z = Confidence interval = 0.05

p = Prevalence (expected satisfaction level from published literature 26.9)

Sample size found to be 150.

Dependent variables

Women satisfaction.

Independent variables

Criteria of Health facility (infrastructure/building, distance, waiting rooms, schedule), services comprehensiveness, drugs availability, staff availability, staff attitude, waiting time consultation time, health education activities, Patient demographic data (Age, sex, education,

social status, occupation and having health insurance). Pilot study for both questionnaires w will be carried out on a number of respondents comparable to the study subjects. The result of the pre-test will be used for correction, reformulation and adaptation on at first. Field work will start during November 2018 and will continue till completion of the sample the questionnaires will be checked by the researcher on daily basis for omission, incomplete answers, unclear statements or illegible writing, where obvious; errors and\or inconsistencies will be corrected in the field after verification.

Data collection

For quantitative data: semi-structured questionnaire (Annex) which was developed based on published literature on patients' satisfaction; will be administered to patients through trained interviewers of the questionnaire. Verbal consent of each respondent was taken.

Data analysis

For analysis SPSS version 20 was used initially all data gathered via questionnaire then coded into variables, both descriptive and inferential statistics involving chi square test and binary logistic regression were used to present results, a P value of less than .05 was considered statistically significant.

Table 1 binary logistic regression performed to assess impact of type of hospital on degree of satisfaction. Client who were in private hospital is seven time satisfied of antenatal care service than client who were in governmental hospital (P value 0.00001) CI 95% (3.9 - 7.2).

	D	C E	Wald	ac	Dyralysa	Odd ratio	95% C.I .for odd ratio	
	Б 3.	S.E.	S.E. Walu	df	P value		Lower	Upper
Type of hospital	1.680	.152	122.357	1	.000	5.368	3.985	7.229

Table 1: Binary logistic regression was performed to assess impact of type of hospital.

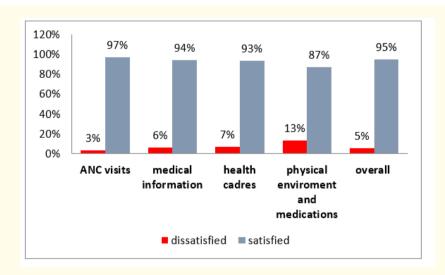


Figure 1: Percents of satisfaction with different items of ANC services of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019), (N = 150).

Ethical consideration:

- Research clearance was obtained from department of community medicine university of Khartoum and permission obtained from Saad- Abu- AL-olla hospital.
- All participants get full description of the study and the right to quit at any part of it.
- Verbal consent was taken from all participants and the data kept confidential.
- No conflict of interest in this study and it is conducted to the sake of health promotion and health system improvement.

Results

We enrolled 150 mother who attend Saad-Abu-AL-Oola Hospital their mean age was 30 year (SD = 5.3).

Majority of them had income 1000 - 3000 SDG per month (54%) and live in Khartoum state (94%). Most of the participants complete their university education (61%) from these mothers 64% received their antenatal care in private clinic.

	Vaccines	Pregnancy emergencies	Family planning	Contraceptives	Breastfeeding	Routine investigations	Drugs and doses
Strongly unsatisfied	1.9%	3.6%	1.8%	1.2%	1.2%	1.2%	1.2%
Unsatisfied	6.8%	11.3%	16%	20.8%	4.8%	2.6%	2.8%
Neutral	0%	0.5%	3.6%	3.3%	0.7%%	0%	0%
Satisfied	56.5%	55.6%	49.3%	53.5%	54.6%	59.8%	62.4%
Strongly satisfied	34.8%	29%	29.3%	21.2%	38.7%	36.4%	33.6%

Table 2: Percents of satisfaction n with medical information given to mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) regarding (N = 150).

	Reassurance and support	Attitude	Responding to requests	Experience and medical information
Strongly Unsatisfied	1.4%	1.4%	2.8%	1.5%
Unsatisfied	11.4%	7.7%	5.6%	3.5%
Neutral	2.0%	1.2%	3.1%	1.8%
Satisfied	42.1%	46.3%	43.6%	47.6%
Strongly Satisfied	43.1%	43.3%	45.0%	45.5%

Table 3: Percents of satisfaction of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) with health cadres regarding (N = 150).

	Time spent with cadres	Time between visits	Waiting time	Number of visit
Strongly unsatisfied	0%	.6%	8.2%T	0%
Unsatisfied	5.3%	3%	22.6%	4.8%
Neutral	3.5%	2.2%	3.8%	2.3%
Satisfied	54.3%	55.6%	41.7%	53.5%
Strongly satisfied	36.8%	38.6%	23.7%	39.4%

Table 4: Percents of satisfaction of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) with ANC visits regarding (N = 150).

	Medical Equipment availability	Distance from resi- dence	Payment	Drugs prices	Cleanliness	Air and cooling	Chair availability on waiting room	Drugs availability
Strongly unsatisfied	0%	2.6%	2.3%	2.7%	8.8%	5.3%	2.8%	2.6%
Unsatisfied	11.5%	13.3%	22.2%	19.8%	37.9%	11.7%	11.5%	13.3%
Neutral	2.2%	2.4%	3.8%	4.3%	5.9%	3.5%	2.2%	2.4%
Satisfied	57.5%	60.0%	52.5%	58.8%	34.8%	55.0%	57.5%	60.0%
Strongly satis- fied	26.1%	21.6%	19.1%	14.4%	12.7%	24.4%	26.1%	21.6%

Table 5: Percents of satisfaction of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) with the hospital regarding (N = 150).

	Percent
Yes	82.1%
No	17.9%

Table 6: Percents of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) who said that they would like to do their next ANC visits in the same hospital if they get pregnant next time (yes answer) and mothers who wouldn't (no answer) (N = 150).

	Percent
Yes	85.9%
No	14.1%

Table 7: Percents of mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) who said that they would like to advise their friends to do their ANC visits in the same hospital they did in (yes answer) and mothers who wouldn't (no answer) (N = 150).

Discussion

General characteristics of the study sample

High percent of the mothers (64%) who participate in the study aged between (26 - 35) and 66% of them their age at first pregnancy was between (15 - 25) and this is normal since the study target the mothers at reproductive age. Since our country classified as third world country and Saad-Abu-Al-Olla hospital considered as public hospital (54%) of the mothers said that the monthly income of their families is between (1000 - 3000) SDG, so they classified as of low socioeconomic status. Regarding their educational level (61%) of the mothers received university education, despite their education (82%) of the participants are housewives and just about (2%) are medical field workers. About their birth numbers 34% of mothers have just one kid, the number of mothers who deliver by vaginal route is just equal to those who deliver by cesarean section 64% of the mothers received their past ANC in private hospital and just 36% in public one.

Demographic variables	Frequency (%)
Age group	
15 - 25	26 (18.4%)
26 - 35	91 (64.5%)
36 - 45	24 (17.0%)
15 - 25	26 (18.4%)
Income	
1000 - 3000	77 (54.6%)
3000 - 5000	48 (34.0%)
More than 5000	16 (11.3%)
Residency	
Khartoum state	133 (94.3%)
Outside Khartoum state	8 (5.7%)
Education	
Primary school	13 (9.2%)
Secondary school	32 (22.7%)
University	86 (61.0%)
Postgraduate	10 (7.1%)
Job	
Housewife	116 (82.3%)
Officer	9 (6.4%)
Student	2 (1.4%)
Free worker	1 (0.7%)
Medical	4 (2.8%)
Other	9 (6.4%)

Table 8: Socio demographic data 0f the mothers who attend Saad Abu Aloola hospital in (Nov 2018 - Jan 2019) (N = 150).

Mother's satisfaction

80% of the mothers are satisfied with the medical information that they have received during their ANC, and more than 80% satisfied with the behavior and support of the health cadres and their experience.

Most of the mothers are satisfied with the numbers and duration between ANC visits and the time they spend with the doctor, but 22% are not satisfied with the time of waiting for their turn in counseling 22% of the mothers are not satisfied with the distance from their home to the hospitals where they receive their ANC and 19% are not satisfied with the money they pay to get medical care and 37% are not satisfied with the prices of the drugs, fortunately most of them are satisfied with the hospitals (where they receive their ANC) set up. Despite the problems the mothers complain of more than 80% of them say that they will be happy to receive their next ANC in the same hospital they did in their last pregnancy and to advise their friends to do so too.

Conclusion

Degree of overall satisfaction with ANC services is (95%). (The items discussed in this study to asses mothers satisfaction with ANC are: satisfaction with medical information given during ANC care, health cadres attitude and practice, ANC visits and physical environment of ANC clinics, the satisfaction of all of these items is more than 77%) that's means more few efforts needed to maintain it and to increase mothers satisfaction especially regarding:

- Counselling of the mothers about contraceptives uses since about (20%) of mothers are dissatisfied with it.
- Decreasing waiting time in ANC clinics since (22%) complaining about time consumed in waiting their turn in consultation.
- Lessening out of pocket payment toward medical services about (22%) are dissatisfied with them and toward drugs prices (19%) are unhappy with them.
- Cleanliness because (37%) of mothers complain of the dirt.

Recommendations

- Time management skills and trained health cadres are needed to be improved to reduce waiting time in ANC clinics.
- Health cadres should given courses about medical counselling and how to give mothers all medical information they need regarding ANC in full ANC classes.
- More funding by ministry of health and NGOs should be directed to lessen out of pocket payment toward health services and drugs attainability an affordability.
- More ANC clinics should be available for consultation.
- More cleaners and hospitals workers should be available to improve cleanliness in ANC clinics and the physical environment.

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Bibliography

- 1. Ismail N., et al. "Pregnant Women's Satisfaction with the Quality of Antenatal Care At Maternal and Child Health Centers in El-Beheira Governorate". 6.2 (2017): 36-46.
- 2. Attkisson CC. (CSQ) Scales and The Service 2015 (1996).
- 3. Chemir F., et al. "Satisfaction with focused antenatal care service and associated factors among pregnant women attending focused antenatal care at health centers in Jimma town, Jimma zone, South West Ethiopia; a facility based cross-sectional study triangulated with qualitative study" (2014): 1-8.
- 4. Langer A., *et al.* "Are women and providers satisfied with antenatal care? Views on a standard and a simplified, evidence-based model of care in four developing countries". *BMC Women's Health* 2.1 (2002): 7.

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