

Assessing Satisfaction with Quality of Maternal Healthcare Among Child Bearing Women in Selected Primary Healthcare Centres in Ogun State, Nigeria

Author(s): SOMADE, EUNICE CHINWE (RN, RM, RON, B.Sc (Ed), BNSc)
AND
PROF. AJAO, EZEKIEL O. (RN, RNT, RRNN, PhD, FWACN)

Abstract

This study assessed satisfaction with quality of maternal health care services among childbearing women attending clinic in selected Primary Health Centers (PHCs) in Ogun State, Nigeria. This study adopted descriptive cross-sectional research design to examine women's level of satisfaction with maternal health care services. The population of this study comprised of 2,417 child bearing women within 15 and 49 years utilizing maternal health care services in selected PHCs in Ogun State, Nigeria. Multi-stage sampling procedure was used to select 380 respondents from 6 PHCs. Data were obtained using a structured questionnaire adapted from "The Patient Satisfaction Questionnaire", PSQ-18 (short form). Analysis was done with the help of descriptive statistics and inferential statistics. All hypotheses were tested at 0.05 level of significance. The findings of the study show that majority of women of child bearing age have utilized maternal healthcare services in one way or the other. Staff conducts and practice (94.6%) was a main factor influencing quality of health care services, followed by physical

IJOBAS

Accepted 27 March 2020
Published 31 March 2020
DOI: 10.5281/zenodo.3737131

facilities (90.2%) and adequate resources (81.4%). Patients satisfaction with maternal healthcare services encountered is related to healthcare delivery system ($r = 0.613$, $p = 0.000$). Also, patients satisfaction with maternal healthcare services encountered is related to adequate resources available at the health centres or clinics ($r = .534$, $p = .000$). It was recommended among others that the Ministry of Health should consistently provide adequate number of staff, supplies, equipments and drugs for providing maternal health care.

Keywords: Satisfaction, Quality, Maternal Healthcare, Child Bearing Women,

About Author

1. Department of Public Health Nursing, Babcock University, Ilisan-Remo, Ogun State, Nigeria.
2. School of Nursing Science, Babcock University, Ilisan-Remo, Ogun State, Nigeria.

Introduction

Most pregnant women who register for antenatal care in a facility with a skilled birth attendant in Nigeria do not deliver in such facility, some end up delivering in mission houses, traditional or even at home assisted in delivering by unskilled birth attendant, while a portion of those who deliver there do not assess other maternal healthcare services available within the facility which is in line with the findings of Dahiru and Oche (2015), which revealed that in Nigeria 41% of women who register for antenatal care in facility with skilled birth attendant did not deliver in a health facility.

From the researchers experience as a midwife in the community, even though primary health care services are accessible, affordable and available in virtually every community and village in Nigeria, clients still travel long distances to reach secondary and tertiary health care institutions, contributing to pregnancy and childbirth-related complications and high maternal and neonatal mortality. This shows that the existence of maternal health services alone does not guarantee their use by women hence, the need for childbearing women to be satisfied with the quality of maternal healthcare services in Nigeria. This is evident in WHO (2016) report which state that increase in maternal and newborn mortality and stillbirths are due to inadequacies in the quality of care provided in health facilities.

Ewunetu, Mekonnen and Anteneh (2015) revealed that Satisfaction involves the collection of factors such as the service provider's knowledge, medical and communications skill, personal attributes, accessibility, the convenience of location and the surrounding area, resource availability. While Mehata, Paudel, Dariang and Aryal (2017) identified physical environment of the delivery ward and quality of care. Maternal satisfaction is one of the most frequently reported outcome measures for quality of care, and it needs to be addressed to improve the quality and efficiency of health care before and during pregnancy, childbirth, and puerperium to provide quality maternal-friendly services. The satisfaction of Women of childbearing age is very necessary since they are an important group in the population of a country and constitute 21% of the whole population of a country and are a determinant in the utilization of maternal health care services (Al-mandari, 2016). Therefore, good quality maternal health care, health facility delivery service, maternal and fetal good condition increases mother's satisfaction.

Findings from a qualitative study conducted by Al-Mailam (2015) on why women do not utilize primary health centers for pregnancy care, revealed the quality of care as one of the reasons and this includes providers competence, negligent and unfriendly attitudes of PHC providers, physical environment and facilities, inadequate supply of drugs. Inadequate providers, long waiting time and inappropriate referrals. To many women who mentioned the quality of care as a barrier, they would rather give birth at home than go to a primary healthcare facility. These explain the reason why attention needs to be given to their satisfaction level on the quality of maternal healthcare services. Existing interventions to reduce maternal mortality in Nigeria have centered on health-seeking behavior and access to services, with little focus on the social and cultural factors that influence maternal mortality. (Kana, Doctor, Peleteiro, Lunnet & Barros, 2015).

To improve maternal and child healthcare, child bearing women has to be satisfied with antenatal, delivery, postnatal and family planning services, hence the researcher in this study seeks to assess the satisfaction level of childbearing women with quality of maternal healthcare services from the client's experience and perspective as it relates to some structural factors(physical facility, resources: human and material resources, process of care;

healthcare delivery, midwives communication skills, staff conduct and practice in selected Primary Healthcare Centers in Ogun State, Nigeria.

This study therefore assessed satisfaction with the quality of maternal health care services among childbearing women attending a clinic in selected PHCs in Ogun state, Nigeria. Specifically, the study:

- i. determined the most utilized maternal healthcare services among child bearing women;
- ii. assessed women's level of satisfaction with maternal healthcare services;
- iii. identified the perceived factors influencing quality of maternal healthcare services;
- iv. determined the relationship between staff conduct/practice and Patients Satisfaction with maternal healthcare services;
- v. evaluated the relationship between healthcare delivery and patients satisfaction with maternal healthcare services;
- vi. assessed the relationship between adequate resources and patients satisfaction with maternal healthcare services; and
- vii. determined relationship between physical facilities and patients satisfaction with maternal healthcare services.

Research Questions

The following research questions were raised for the study:

1. What are the maternal healthcare services most utilized among women of childbearing age?
2. What is women's level of satisfaction with maternal healthcare services?
3. What are the perceived factors influencing quality of maternal healthcare services?

Research Hypotheses

The following hypotheses were generated:

1. There is no significant relationship between Staff Conduct/Practice and Patients Satisfaction with Maternal Healthcare Services.
2. There is no significant relationship between Healthcare Delivery and Patients Satisfaction with Maternal Healthcare Services
3. There is no significant relationship between Adequate resources and Patients Satisfaction with Maternal Healthcare Services
4. There is no significant relationship between Physical facilities and Patients Satisfaction with Maternal Healthcare Services.

Methodology

This study adopted descriptive cross-sectional research design to examine women's level of satisfaction with maternal health care services. The population of this study comprised of 2,417 child bearing women within 15 and 49 years utilizing maternal health care services in selected Primary Health Centers (PHCs) in Ogun State, Nigeria. Multi-stage sampling procedure was used to select 380 respondents from 6 PHCs. The instrument used for data collection was a structured questionnaire adapted from the Patient Satisfaction

Questionnaire, PSQ-18 (short form) Furthermore, the quality of the health care services scale was adopted from Oyugi, Kioko, Kaboro, Okumu, Ogola-Munene, Kalsi, Thiani, Gikonyo, Korir, Baltazar, & Ranji, (2018). The questionnaire consisted of four sections. Section A sought for bio-data of the respondents which included age, education, religion, employment, ethnicity and marital status. Section B consisted of information on maternal healthcare services while Section C sought for patients' level of satisfaction with maternal healthcare services and Section D consisted of items on perceived factors influencing quality of health care services.

The questionnaire was subjected to scrutiny and reviewed by the research experts and Nursing Science experts for face and content validity as alterations were made as advised. Reliability of the instrument was ensured through internal consistency method using Cronbach's Alpha. The Cronbach's Alpha Values were 0.779 for patients' satisfaction and 0.809 for perceived quality of health care services. The data collected through the instrument were analyzed using descriptive and inferential statistics. Descriptive statistics were used to answer the research questions while Hypotheses 1 to 4 were tested using Pearson product-moment correlation at 0.05 level of significance.

Results

Research question 1: What are the maternal healthcare services most utilized among women of child bearing age?

Table 1: Maternal healthcare services most utilized among women of child bearing age.

SN	Items	Maternal healthcare services			
		Freq	%	Mean	Rank
1	Have you accessed maternal health care services before If yes, which one?	371	97.6	.976	
2	Antenatal care	196	51.5	.515	1 st
3	Delivery care	51	13.4	.134	3 rd
4	Postnatal care	48	12.6	.126	4 th
5	Family planning	85	22.4	.224	2 nd

Table 1 shows that 371 (97.6%) women of child bearing age have utilized maternal healthcare services in one way or the other. However, out of the 4 maternal healthcare services identified in this study antenatal care (with mean score of .515) is mostly used followed by family planning (with mean score of .224), delivery care (with mean score of .134), and postnatal care (with mean score of .126).

Research question 2: What is women's level of satisfaction with maternal healthcare services?

**Table 2: Level of Patients Satisfaction with Maternal Healthcare Services
(n = 380)**

	High		Low		Not at all		Weighted Mean	Std. Dev.
	Fre q	%	Fre q	%	Fre q	%		
Communication skills	257	67.6	101	26.6	22	5.7	24.14	1.14
Accessibility of Care	226	57.7	139	36.4	15	5.9	23.65	1.71
Midwives	200	51.1	90	24.4	90	24.4	19.15	1.02
Availability/Practice								
Professionalism	190	48.7	92	24.9	98	26.4	18.98	1.12
Cost of Health Care	185	47.7	108	28.9	77	23.5	18.67	4.01

Level of patients' satisfaction with maternal health care services in the selected area of study shows that 67.6% of the patients were highly satisfied with the communication skills of the healthcare givers. On nurse's accessibility of care, 57.7% of women of child bearing age were satisfied, 51.1% for the professionalism experienced, and 47.7% for cost of healthcare. Level of satisfaction was highest on communication skills compared to others.

Research question 3: What are the perceived factors influencing quality of maternal healthcare services?

**Table 3: Perceived Factors influencing Quality of Health Care Services
(n = 380)**

	Agreed		Disagreed		Undecided		Weighted Mean	Std. Dev.	Rank
	Fre q	%	Fre q	%	Fre q	%			
Staff Conduct and Practice	367	94.6	11	4.9	2	0.5	18.78	1.55	1st
Healthcare Delivery	251	66.2	80	21.8	49	12.0	50.95	3.26	4th
Adequate resources	304	81.4	46	11.2	30	7.3	14.16	0.81	3rd
Physical facilities	340	90.2	27	6.6	13	3.2	16.99	0.87	2nd

The perceived factors influencing quality of health care services as shown in table 4 revealed that staff conducts and practice (94.6%) is a main factor influencing quality of health care services. Next to it is the physical facility (90.2%) available at the health centers and clinics. Adequate resources were ranked third by 81.4% of the respondents while healthcare delivery was ranked 4th by 66.2% of the respondents. This result shows that staff conduct

and practice, physical facilities, adequate resources and the healthcare delivery were perceived factors influencing quality of health care services.

Test of Hypotheses

Research Hypothesis 1: There is no significant relationship between Staff Conduct/Practice and Patients Satisfaction with Maternal Healthcare Services

Table 4: Pearson Product Moment Correlation of Staff Conduct/Practice and Patients Satisfaction with Maternal Healthcare Services

		Patient satisfaction	Staff Conduct
Patient satisfaction	Pearson Correlation	1	.801**
	Sig. (2-tailed)		.000
	N	380	380
Staff Conduct	Pearson Correlation	.801**	1
	Sig. (2-tailed)	.000	
	N	380	380

** . Correlation is significant at the 0.01 level (2-tailed).

Table 4 shows that the r-cal value of 0.801 is significant because the p-value of $0.000 < 0.05$. This implies that the null hypothesis was rejected. The table revealed a significant relationship between staff conduct/practice and patients satisfaction with maternal healthcare services ($r = 0.801$, $p = 0.000$, $n = 380$). The result shows that patients satisfaction with maternal healthcare services encountered was positively and highly related to staff conduct/practice.

Research Hypothesis 2: There is no significant relationship between Healthcare Delivery and Patients Satisfaction with Maternal Healthcare Services

Table 5: Pearson Product Moment Correlation of Healthcare Delivery and Patients Satisfaction with Maternal Healthcare Services

		Patient satisfaction	Healthcare Delivery
Patient satisfaction	Pearson Correlation	1	.613**
	Sig. (2-tailed)		.000
	N	380	380
Healthcare Delivery	Pearson Correlation	.613**	1
	Sig. (2-tailed)	.000	
	N	380	380

** . Correlation is significant at the 0.01 level (2-tailed).

Table 5 shows that the r-cal value of 0.613 is significant because the p-value of $0.000 < 0.05$. This implies that the null hypothesis was rejected. The table revealed a significant relationship between healthcare delivery and patients satisfaction with maternal healthcare services ($r = 0.613, p = 0.000, n = 380$). The result shows that patients satisfaction with maternal healthcare services encountered was positively and moderately related to healthcare delivery system.

Research Hypothesis 3: There is no significant relationship between Adequate resources and Patients Satisfaction with Maternal Healthcare Services

Table 6: Pearson Product Moment Correlation of Adequate resources and Patients Satisfaction with Maternal Healthcare Services

		Patient satisfaction	Adequate resources
Patient satisfaction	Pearson Correlation	1	.534**
	Sig. (2-tailed)		.000
	N	380	380
Adequate resources	Pearson Correlation	.534**	1
	Sig. (2-tailed)	.000	
	N	380	380

** . Correlation is significant at the 0.01 level (2-tailed).

Table 6 shows that the r-cal value of 0.534 is significant because the p-value of $0.000 < 0.05$. This implies that the null hypothesis was rejected. The table revealed a significant relationship between adequate resources and patients satisfaction with maternal healthcare services ($r = 0.534, p = 0.000, n = 380$). The result shows that patients satisfaction with maternal healthcare services encountered was positively and moderately related to adequate resources available at the health centers or clinics.

Research Hypothesis 4: There is no significant relationship between Physical facilities and Patients Satisfaction with Maternal Healthcare Services

Table 7: Pearson Product Moment Correlation of Physical facilities and Patients Satisfaction with Maternal Healthcare Services

		Patient satisfaction	Physical facilities
Patient satisfaction	Pearson Correlation	1	.741**
	Sig. (2-tailed)		.000
	N	380	380
Physical facilities	Pearson Correlation	.741**	1
	Sig. (2-tailed)	.000	
	N	380	380

** . Correlation is significant at the 0.01 level (2-tailed).

Table 7 shows that the r-cal value of 0.741 is significant because the p-value of $0.000 < 0.05$. This implies that the null hypothesis was rejected. The table revealed a significant relationship between physical facilities and patients satisfaction with maternal healthcare services ($r = 0.741, p = 0.000, n = 380$). The result shows that patients satisfaction with maternal healthcare services encountered was positively and highly related to physical facilities at the health centers or clinics.

Discussion

This study shows that majority of women of child bearing age have utilized maternal healthcare services in one way or the other. However, out of the 4 maternal healthcare services identified in this study antenatal care was mostly used followed by family planning, delivery care, and postnatal care. This is in consonance with the findings of Alkema et al., (2016); Amu & Nyarko (2019), Chowdhury, Al-Hadhrami, and Harun (2017).

On level of patients' satisfaction with maternal health care services in the selected area of study, the study shows that two-third of the patients were highly satisfied with the communication skills of the healthcare givers. Consistent with this, the study conducted at Tehran Teaching Hospitals, Iran showed that 66.5% of the respondents were satisfied with communication skills of the healthcare givers (Akhtari-Zavare et al., 2017). On accessibility of care, this study revealed that 57.7% of women of child bearing age were satisfied, 51.1% for the professionalism experienced, and 47.7% for cost of healthcare. These findings were in line with the findings of Adekunle, Olanrewaju and Adesanmi (2015) in South-Western Nigeria; Al-Mandari (2016) and Amu and Nyarko (2019) in Ghana.

Regarding factors influencing quality of health care services, this study shows that staff conduct and practice is a main factor influencing quality of health care services, followed by physical facilities and Adequate resources. This does not agree with the findings of Azuh and his colleagues (2017) who revealed adequate resources as main factor influencing quality of health care services. The disparities in findings may be due to the fact that the studies were conducted in different settings.

This study further revealed that there was significant relationship between staff conduct/practice and patients satisfaction with maternal healthcare services. Also, there was significant relationship between healthcare delivery and patients satisfaction with maternal healthcare services. In addition, there was significant relationship between adequate resources and patients satisfaction with maternal healthcare services. Lastly, the study revealed that there was significant relationship between physical facilities and patients satisfaction with maternal healthcare services. These findings agree with the findings of Amu and Nyarko (2019) and Azuh and his colleagues (2017).

Conclusion

Based on the findings of the present study, it could be concluded that the level of satisfaction with the quality of maternal healthcare services among childbearing women especially for communication skills of the healthcare givers was high but moderate for nurse's accessibility of care, professionalism experienced and cost of healthcare. The perceived factors influencing quality of health care services are staff conduct and practice, physical facilities, adequate resources, and healthcare delivery. In addition, all the perceived factors influencing quality of health care services such as staff conduct and practice, physical facilities, adequate resources, and healthcare delivery were related to maternal health care services.

Recommendations

The following recommendations are made.

1. The Ministry of Health should consistently provide adequate number of staff, supplies, equipments and drugs for providing maternal healthcare
2. Continuous training of the health care providers at maternal and child health center is recommended as it may improve their performance and consequently raise the quality level.
3. Continuous monitoring of clients' satisfaction with all aspects of care could aid in improvement of the quality of services.
4. Different health education methods should be available to increase awareness of the pregnant women about the importance and components of maternal healthcare.

References

- Adekunle, B. E., Olanrewaju I. I. & Adesanmi, A. (2015). Patients Satisfaction with Nursing Care in a Maternity Unit in South-Western Nigeria: Relationship with Self Esteem. *Ife Psychological*, 23 (1), 176-183
- Akhtari-Zavare, M, Abdullah M.Y., Hassan S.T.S., Said S.B. & Kamali M. (2017). Patient Satisfaction: Evaluating Nursing Care for Patients Hospitalized with Cancer in Tehran Teaching Hospitals, Iran. *Global Journal of Health Science*. 4(1), 116 – 125
- Alkema, L, Chou, D, Hogan, D, Zhang, S, Moller, A.B., & Gemmill, A. (2016). Global, regional and national levels and trends in maternal mortality between 1990 and 2015, with scenario-based projections to 2030: a systematic analysis by the UN Maternal Mortality Estimation inter Agency Group. *The lancet* 387(10017):462-74.
- Al-Mailam, F. (2015). The effect of nursing care on overall patient satisfaction and its predictive value on return to-provider behavior: a survey study. *Quality and Management of Health Care*, 14 (2), 116-120
- Al-Mandari, A. (2016). Quality of PHC services in Al-Dhahira region. *Global Journal of Health Science*. 2(5), 79 – 86.
- Amu, H. & Nyarko, S.H (2019). Satisfaction with Maternal Healthcare Services in The Ketu 35 Municipality, Ghana: A Qualitative Case Study. *Biomed Research International Journal*, 6(2), 78 – 85
- Azuh, D.E., Azuh, A.E., Iweala, E.J., Adeoye, D, Akanbi, M, & Mordi, R.C. (2017). Factors influencing maternal mortality among rural communities in southern Nigeria. *Int J Women's Health*. 9(1), 179-188
- Chowdhury, H.A., Al-Hadhrami, A.Y., & Harun, G.D. (2017). Antenatal and postnatal care practices among mothers in rural Bangladesh: A community-based cross-sectional study. *Journal of midwifery*, 6(1), 115 – 127
- Dahiru, T. & Oche, O.M. (2015). Determinants of antenatal care, institutional delivery and postnatal care services utilization in Nigeria. *Pan African Medical Journal*, 5(1), 67 – 75
- Ewunetu, M., Mekonnen, W. A. & Anteneh, Z.A. (2015). Women's satisfaction with childbirth care in Felege Hiwot Referral Hospital, Bahir Dar city, Northwest Ethiopia. *International Journal of Gynecology and Obstetrics*, 3(1), 6-13
- Kana, M.A., Doctor, H.V., Peleteiro, B., Lunet, N. & Barros, H. (2015). Maternal and child health interventions in Nigeria: a systematic review of published studies from 1990 to 2014. *BMC Public Health*. 4 (15), 334 – 341

- Mehata, S. Paudel, Y.R., Dariang, M. & Aryal, K.K. (2017). Factors determining satisfaction among facility-based maternity clients in Nepal, *BMC Pregnancy Childbirth*. 17(1), 25 – 34
- Oyugi, B. Kioko, U. Kaboro, S.M., Okumu, C., Ogola-Munene, S., Kalsi, S., Thiani, S., Gikonyo, S., Korir, J., Baltazar, B. & Ranji, M. (2018) A facility-based study of women' satisfaction and perceived quality of reproductive and maternal health services in the Kenya output-based approach voucher program. *BMC Pregnancy Childbirth*. 18(1)), 310 – 317
- WHO. (2016). Recommendations on antenatal care for a positive pregnancy experience. Geneva: WHO Press

Cite this article:

Author(s), SOMADE, EUNICE CHINWE (RN, RM, RON, B.Sc (Ed), BNSc), PROF. AJAO, EZEKIEL O. (RN, RNT, RRNN, PhD, FWACN), (2020). "Assessing Satisfaction with Quality of Maternal Healthcare Among Child Bearing Women in Selected Primary Healthcare Centres in Ogun State, Nigeria". Name of the Journal: International Journal of Academic Research in Business, Arts and Science, (IJARBAS.COM), P, 200- 210. DOI: <http://doi.org/10.5281/zenodo.3737131>, Issue: 3, Vol.: 2, Article: 19, Month: March, Year: 2020. Retrieved from <https://www.ijarbas.com/all-issues/current-articles/>

Published by

