

ISSN: 0975-8585

Research Journal of Pharmaceutical, Biological and Chemical Sciences

Perception of Rural Adults Regarding the Quality of Health Care Services.

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ABSTRACT

The knowledge of health seeking behaviour is pivotal for prevention, treatment, management of disease and promotion of health. Proper understanding of those health seeking behaviors could reduce delay to diagnosis, improve treatment compliance and improve health promotion strategies in a variety of contexts. To identify the perception among rural adults regarding quality of health care services in private and public health facilities and to find the association between perception regarding the quality of health care services and selected demographic variables. A descriptive survey was done among 260 rural adults using self-administered rating scale. Descriptive statistics, Chi-square and Pearson correlation were used. Out of 260 samples, 61% were had neutral perception about the quality of health services in government health facilities while 70% sample were had positive perception towards private health facilities. There is a significant association between perception regarding the quality of health care services and demographic variables. Majority of the sample prefer to go to private health facilities during the period of illness. The sample had better perception regarding the quality of health care services in private health facilities than government. **Keywords:** Perception, quality of health care services, rural adult

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ISSN: 0975-8585

INTRODUCTION

Indian population mainly lies in rural areas. According to 2011 census 69% of Indian population comprises of rural population. In Karnataka the people living in rural area is more (66%) than that of urban area [1]. Since people of India are mainly rural and less educated they have misconceptions about the available health care services and medicines. Perceptions regarding quality of health care services among rural people are to a large extent shaped by the health care professional's services—mostly paramedics, infrastructure facilities, timely care and intervention and cost factors. The attitude of health care professionals in dealing with the community is very important. The present study will throw light on these critical issues.

It is the perceptions of the rural consumers of health care services that make the community health programmes and initiatives successful or failure. Positive attitude and trust towards health care professionals who are delivering the services and care giving, proper information and awareness programmes and timely supply of medicines and other facilities can build positive perceptions among people towards quality health care. The findings of the study will benefit in implementation and execution of community health care programmes and to promote utilization of services provided through public health infrastructure. It is vital that primarily the perceptions, attitudes and expectations of the community, who is the actual consumer, be outlined and then accordingly further activities are planned and implemented.

MATERIALS AND METHODS

A community based cross sectional descriptive study was carried out in order to explore the perceptions on quality of health care among rural adults towards private and government health care facilities. A non probability purposive sampling was used to select 260 adults aged between 20-60yrs and who are willing to participate were included in the study. After obtaining the informed consent, samples were asked to mark their responses on a pre tested rating scale. It was aimed at obtaining details about self reported health seeking behavior and perception regarding quality of health care services in government and private health facilities. A pilot study was conducted prior to main study.

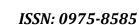
RESULTS

The SPSS (version 16.0) statistical package was used for the analysis of the data based on objectives stated in the study. Descriptive statistics including frequency, percentage, mean and inferential statistics including Chi-square test (p<0.05) and Pearson co-relation were applied.

Majority of the samples belongs to the age group of 31-40 years (43.5%), 58.8 % of them were female and 76.5% of belongs to Hindu religion. Most of the samples had higher secondary education (34.6%) and were private employed i.e. 36.9% and 42.7 % were unemployed. Majority of the families (41.2 %) were had their monthly income between Rupees 10001-25000, 52.7% were belongs to nuclear families and 61.9 % families comprised of 1-5 members (Table 1).

The data further shows that majority of the sample (61.2 %) had neutral perception about the quality of health services in government health facilities while 13.8 % had negative perception. Only a few people (25 %) had positive perception regarding the quality of health care services in government health facilities. But when it comes to private health care facilities majority of the sample (70%) had positive perception about the quality of health care services in private health facilities. Only a few adults (4.6 %) had negative perception about the quality of care in private health facilities while 25.4 % had neutral perception (Table 2). The mean score of perception regarding the quality of health care services is higher for private health care facilities. So it is revealed that the sample have better perception regarding the quality of health care services in private health care facilities than government (Table 3). Data also revealed that the perception of sample regarding the health care delivery, physical facilities and interpersonal relationship among health professionals and clients were better with regard to private health care facilities than government health care facilities(Table 4).

A significant association was found between perception regarding the quality of health services in government health facilities and age (χ^2 =40; p<.001), gender (χ^2 =13.63;p<.001), education (χ^2 =49.26; p<.001), occupation (χ^2 =45.79; p<.001), family monthly income (χ^2 =18.99; p=.004), type of family(χ^2 =15.46; p<.001) and house hold size(χ^2 =33.34; p<.001). With regard to private health facilities there was significant association





between perception regarding the quality of health services in government health facilities and age (χ^2 =17.27; p=.008), education (χ^2 =34; p<.001), occupation (χ^2 =19.65; p=.004) and type of family (χ^2 =6.62; p=.037).

Table 1: Frequency and percentage distribution of demographic characteristics of study sample (n=260)

Sample characteristics	f	%
Age in years	42	16.2
20-30		
31-40	113	43.5
41-50	71	27.3
51-60	34	13.1
Gender		
Male	107	41.2
Female	153	58.8
Religion	199	76.5
Hindu		
Christian	15	5.8
Muslim	46	17.7
Education	61	23.5
Primary		
Secondary	55	21.2
Higher secondary	90	34.6
Graduate	40	15.4
Post graduate and above	14	5.4
Occupation		
Unemployed	111	42.7
Cooli worker	35	13.5
Government employee	18	6.9
Private job	96	36.9
Monthly income of family in Rupees <5000	30	11.5
5000-10000	91	35
10001-25000	107	41.2
>25000	32	12.3
Type of family	137	52.7
Nuclear		
Joint	123	47.3
House hold size	161	61.9
1-5		
6-10	81	31.2
>10	18	6.9

Table 2: Perception about the quality of health services in government and private health care facilities

Perception about the	Negative	Neutral	Positive
quality of health services	%	%	%
Government Health facilities	13.8	61.2	25
Private Health facilities	4.6	25.4	70

Table 3: Mean score of perception regarding the quality of health care services

Perception regarding the quality of Health care services	Maximum possible score	Mean	Standard deviation
Government Health facilities	100	63.46	13.59
Private Health facilities	100	74.88	11.53



ISSN: 0975-8585

Table 4: Area wise comparison of the perception regarding the quality of health care services

Area	Maximum possible score	Mean score	
		Government health care	Private health care facility
		facility	
Health care delivery	55	35	40.73
Interpersonal relationship	30	19.46	21.92
Physical facilities	15	8.2	12.23

DISCUSSION

The present study show that the sample had better perception regarding the quality of health care services in private health care facilities than governmen . The perception of sample regarding the health care delivery, physical facilities and interpersonal relationship among health professionals and clients were better with regard to private health care facilities than government health care facilities. This findings supported by P Singh, Shiv D Gupta conducted study to assess the health seeking behavior and health care services in Rajastan. In their study it was found that the problems being faced by the people while utilizing government health services were inaccessibility due to lack of transportation, unsympathetic attitude of the staff dispensing the health services, and shortage or non-availability of medicines locally [2-6].

Health seeking behaviour of people is dependent on the perception of people regarding the quality of health care services in health facilities. The perception of the people has to be changed as to attract them more to government hospitals and health centers. It can be done through improving the quality of care, proper maintenance of facilities and also by inculcating a caring and sympathetic attitude in health professionals while dealing the patients.

ACKNOWLEDGEMENT

The authors are thankful to the Dean, Manipal College of Nursing, Manipal University, Manipal for providing the administrative permission to conduct the study.

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