

# Quality of Health Care System and Structure at Primary Health Care in Baghdad City

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## Abstract

**Background:** Consumers satisfaction is the level of satisfaction that clients experience having used a service. This study aims to determine the level of quality of healthcare services in primary healthcare centers.

**Method:** The study included a simple random sample of beneficiaries of healthcare services in primary healthcare centers in the city of Baghdad by (5-8) beneficiaries for each center using a questionnaire to measure the satisfaction of beneficiaries with the quality of services and the use of the direct interview method, which took from (6-10) minutes.

The study results showed that customer satisfaction scale is very important to assess the quality of health services and can predict compliance and use of international standards for quality of services. The study also found that most primary healthcare centers are located in densely populated areas. Therefore, primary health care services are adequately provided.

**Conclusion:** The researchers concluded that most primary health care centers are located in densely populated areas. Therefore, primary health care services are adequately provided.

**Keywords:** *Quality of Health Care System; Structure; Primary Health Care.*

## Introduction

Consumers satisfaction is the level of satisfaction that clients experience having used a service. It reflects the gap between the expected service and the experience of the service, from the client's point of view. Measuring consumer's or patient satisfaction has become an integral part of hospital/clinic management strategies across the globe. Moreover, the quality assurance and accreditation process in most countries require that the satisfaction of clients be measured on a regular basis<sup>(1)</sup>.

Consumer's satisfaction with health services, therefore, has become one of the important components

of providing accepted quality of care. Satisfaction has been said to be a major predictor of use of services, as it is essential if consumers were to utilize services, comply with treatments and maintain a continuing relationship with practitioners<sup>(2)</sup>.

Satisfaction is the awareness of each person separately. These feelings plagiaristic by comparing expected service with perceived service<sup>(3)</sup>.

Customer satisfaction is individual person reaction toward particular product when compare the performance of the product with any person expectation<sup>(4)</sup>.

Customer satisfaction considered psychosomatic state reaction of customer when its emotion about expectations not positive in near future<sup>(5)</sup>.

Consumer's satisfaction is the level of satisfaction that consumers experience after using the service. Thus, it reflects the gap between the expected service and service experience, according to the consumer's

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opinion. Measuring consumer's satisfaction has become an integral part of strategies management of primary health care centers all over the world. Moreover, quality assurance and accreditation process in most countries to be measured consumers satisfaction on a regular basis<sup>(1)</sup>.

Following this thinking, there has been growing interest in measuring consumer's satisfaction, mostly through collecting the views of service users. These views have become important in the evaluation of healthcare delivery and have become a tool for health service performance evaluation. Client satisfaction is now viewed as an important measure of protection against potential problems in healthcare delivery and is linked to changes in service delivery policies<sup>(6)</sup>.

Essential healthcare is based on practical, scientifically sound and socially acceptable method and technology, made universally accessible to individuals and families in the community. It is through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination<sup>(7)</sup>.

The Approach to providing health care resources focuses on provision of essential health care using socially acceptable and affordable method and technology, accessibility, public participation in policy development, and intersects oral collaboration. The declaration of Alma Alta proposes a set of core activity to be included in primary health care and tailors to the needs of a particular population. These activities include:

1. Education to prevent and control major health problem in the area
2. Promotion of nutrition and a safe and sufficient food supply
3. Provision of safe water and basic sanitation
4. Provision of maternal and child health care, including family planning services

5. Immunization
6. Prevention and control of endemic diseases
7. Adequate treatment of common illnesses and injuries
8. Provision of essential medication<sup>(8)</sup>.

## Method

A descriptive "Evaluation Correlation" study was conducted to determine the Impact of Quality of Health Care Services on consumer's satisfaction at Primary Health Care Centers in Baghdad City. From (13<sup>th</sup> January to 5<sup>th</sup> March 2019).

A simple random sample consisting of (176) beneficiaries of health care services in primary health care centers in the city of Baghdad by (5-8) consumer's for each center using a questionnaire to measure the satisfaction of consumers with the quality of services and the use of the direct interview method, which took from (6-10) Accurate. These centers are distributed into (2) sides and divided into (8) health sectors according to ministry of health directorate of primary health care. A total of (28) primary health care centers are selected for the purpose of the study.

The data collection starts with providers primary health care services in primary health care centers in Baghdad City. Utilizing of the developing questionnaires and the interview technique as means of data collection and keeping records of all available contacts that facilitate the access to study sample.

The reliability of the questionnaire which is determined through a pilot study and the validity are achieved through a panel of (17) experts. A pilot study was conducted among a convenient sample of (17) providers who were selected among persons concerning with primary health care centers. This preliminary Study was conducted from 15<sup>th</sup> December to 28<sup>th</sup> December 2018.

**Results**

**Table 1. Consumers' socio-demographic characteristics (N=176)**

| Information                                | f          | %          | $\chi^2$ | df | Sig           |
|--|------------|------------|----------|----|---------------|
| <b>Age (Years)</b>                         |            |            |          |    |               |
| ≤ 19                                       | 7          | 4          | 4.860    | 10 | .900<br>(N.S) |
| 20 – 29                                    | 52         | 29.5       |          |    |               |
| 30 – 39                                    | 54         | 30.7       |          |    |               |
| 40 – 49                                    | 36         | 20.5       |          |    |               |
| 50 – 59                                    | 15         | 8.5        |          |    |               |
| ≥ 60                                       | 12         | 6.8        |          |    |               |
| <b>Total</b>                               | <b>176</b> | <b>100</b> |          |    |               |
| <b>Gender</b>                              |            |            |          |    |               |
| Male                                       | 71         | 40.3       | 2.707    | 2  | .258<br>(N.S) |
| Female                                     | 105        | 59.7       |          |    |               |
| <b>Total</b>                               | <b>176</b> | <b>100</b> |          |    |               |
| <b>Level of education</b>                  |            |            |          |    |               |
| Doesn't read & write                       | 18         | 10.2       | 10.946   | 12 | .543<br>(N.S) |
| Read & write                               | 24         | 13.6       |          |    |               |
| Primary school                             | 40         | 22.7       |          |    |               |
| Intermediate school                        | 23         | 13.1       |          |    |               |
| Secondary school                           | 17         | 9.7        |          |    |               |
| Institution (Diploma)                      | 10         | 5.7        |          |    |               |
| College & above                            | 44         | 25         |          |    |               |
| <b>Total</b>                               | <b>176</b> | <b>100</b> |          |    |               |
| <b>Socio-economic status (Iraqi Dinar)</b> |            |            |          |    |               |
| ≤ 300000                                   | 40         | 22.7       | 7.046    | 6  | .317<br>(N.S) |
| 301000-600000                              | 85         | 48.3       |          |    |               |
| 601000-900000                              | 24         | 13.6       |          |    |               |
| ≥ 901000                                   | 27         | 15.4       |          |    |               |
| <b>Total</b>                               | <b>176</b> | <b>100</b> |          |    |               |
| <b>Occupation</b>                          |            |            |          |    |               |

| Information                                      | f          | %          | $\chi^2$ | df | Sig           |
|--|------------|------------|----------|----|---------------|
| Employee   | 34         | 19.3       | 19.295   | 12 | .082<br>(N.S) |
| Free work  | 21         | 11.9       |          |    |               |
| Retired  | 7          | 4          |          |    |               |
| Neglect the work                                 | 3          | 1.7        |          |    |               |
| Unemployed                                       | 100        | 56.8       |          |    |               |
| Disabled   | 2          | 1.1        |          |    |               |
| Student  | 9          | 5.1        |          |    |               |
| <b>Total</b>                                     | <b>176</b> | <b>100</b> |          |    |               |
| <b>Type of service provided for the consumer</b> |            |            |          |    |               |
| Maternal & childcare                             | 18         | 10.2       | 57.303   | 16 | .001<br>(H.S) |
| Childcare  | 24         | 13.6       |          |    |               |
| Health promotion                                 | 1          | 0.6        |          |    |               |
| Critical care/accident                           | 0          | 0          |          |    |               |
| Immunization                                     | 55         | 31.3       |          |    |               |
| Family planning                                  | 1          | 0.6        |          |    |               |
| Assessment & treatment                           | 44         | 25         |          |    |               |
| Dental care                                      | 30         | 17         |          |    |               |
| School health                                    | 1          | 0.6        |          |    |               |
| Others   | 2          | 1.1        |          |    |               |
| <b>Total</b>                                     | <b>176</b> | <b>100</b> |          |    |               |

No: Number, f: Frequency, %: Percentage, Iq D: Iraqi Dinar,  $\chi^2$ = Chi-square, df: degree of freedom, p-Value: probability value, Sig: Significance, N.S: Not significant

A high percentage among age groups was associated with (30-39) years which is (30.7%), more of consumers are females (59.7%). The analysis of educational level for those consumers indicates that high percentage refers to primary school education (22.7%). The socioeconomic variable indicates that those consumers are associated moderate socio-economic status of (301000-600000

ID) (48.3%). Regarding occupational status, more than half of consumers are unemployed (56.8%). The types of services that are utilized by consumers were immunization (31.3) that presents the highest percentage followed by the services of assessment and treatment (25%), dental care (17%), childcare (13.6%) and maternal and child health (10.2%).

**Table 2. Evaluation the consumers' satisfaction for healthcare services (N=176)**

| Satisfaction items   | M.S  | Evaluation |
|--|------|------------|
| In general, I am satisfied with the quality of service provided at the center                    | 2.53 | High       |
| Feeling safer if treated at this center  | 2.61 | High       |
| Satisfied with the communication and coordination between medical and health staff at the center | 2.64 | High       |
| Satisfied with the attention of the medical and health personnel and health to your problem      | 2.68 | High       |
| Satisfied with the relationship with the service provider (medical and health staff)             | 2.68 | High       |
| Generally satisfied the time you spent at the health center to receive services                  | 2.44 | High       |
| Satisfied with the health center near the place you live   | 2.64 | High       |
| Feel good about diagnostics and treatment costs in the health center                             | 2.67 | High       |

| Satisfaction items  | M.S  | Evaluation |
|---|------|------------|
| Satisfied with the efficiency of the medical and health staff in the health center        | 2.59 | High       |
| Feel good about respecting medical and health staffs                                      | 2.70 | High       |
| Feel good about medical and health personnel to clarify the problem understandable manner | 2.38 | High       |

Mean of score, Low= 1 -1.66, Moderate= 1.67-2.33, High= 2.34-3

Consumers' are highly satisfied with the type and quality of services that are provided by primary health care centers evidenced by high mean of scores among all items of the scale.

**Table 3. Overall evaluation consumers' satisfaction level for primary healthcare services (176)**

| Levels   | f   | %    | M.S  | SD    |
|----------|-----|------|------|-------|
| Low      | 4   | 2.3  | 2.69 | 0.510 |
| Moderate | 46  | 26.1 |      |       |
| High     | 126 | 71.6 |      |       |
| Total    | 176 | 100  |      |       |

f: Frequency, %: Percentage, M.S: Mean of score, SD: Standard Deviation, Low= 11-18, Moderate= 19-26, High= 27-33

Consumers show a high level of satisfaction for the services provided at the primary health care centers (71.6%).

## Discussion

Regard to discussing the Socio-demographic characteristics of consumers attending the primary health care centers as the number of consumers who have been taken into account in the quality of health services provided in primary health care centers in Baghdad City (176) table(4-6); the results showed that a high percentage of age groups was associated (30-39) years, average (30.7%), followed by the age group of (20-29) years, at a rate of (29.5%), and the lowest category ( $\leq$  19) years, at a rate of (4%).

These results are consistent with a study conducted by <sup>(9)</sup>. The study included people from four groups in Baihsud District in Jalal Abad City, Afghanistan. The age was between (25-34) years at a rate of (33.4%).

Analysis of the educational level of these consumers indicates that a high percentage indicates education in primary schools (22.7%) Table (4-6). The reason high is because most of the views taken are women, and because most of the women are in the elementary or middle stage

and leave the school, as the lower the educational level, the lower the health culture, and this will increase the health problems in the country, as well as increase the material and human burdens.

Whereas in Afghanistan there is a study similar to ours, but it was recorded that the educational level in which the highest level of illiteracy occurred, not read or write, was found that about two thirds of the participants were illiterate, at a rate of (61.6%). The overall literacy rate (38.5%) <sup>(10)</sup>.

The socio-economic variable indicates that these consumers are linked to the moderate social and economic situation (301000-600000 Iraqi dinars) (48.3%) table (4-6). The Central organization for Statistics in the ministry of Iraqi planning, a whole survey the poverty level and the income rate for individual to the period of (2018-2020) showed the results of the poverty rate (10%), and the income rate less than (50%) is moderate in Baghdad City <sup>(11)</sup>, these results give stability for study. we would like to point out that the level of individual income to helps in resolving many health problems and prevents the ignorance spread.

Regarding the occupational situation, more than half of the consumers are unemployed (56.8%) table (4-6), and these results are consistent with the evaluation of the Central organization for Statistics and the executive management of the poverty alleviation strategy in the Ministry of Planning <sup>(11)</sup>.

The percentage of the unemployed reached (57.3%), For the whole society according to the above, the average economic activity of individuals aged 15-years and over (42.7%) with a difference in the ratio between men (29.7%) and women (13%). the unemployment rate for adults to the age group (15-24) years, when it reached (27.5%), and from 25 or more (29.8%).

The types of services that are utilized by consumers were immunization (31.3%) that presents the highest percentage followed by the services of assessment and

treatment (25%), dental care (17%), childcare (13.6%) and maternal and child health (10.2%).

All of the above explanation it is shown in table (4-6) has been the division of services based on a global scale in the quality of service provided to the consumer's in primary health care centers in the Baghdad City.

These results are consistent with thoughtful study by<sup>(12)</sup> in the Iraqi Institute for Economic Reform.

Providing services in the health care according to the felt needs of patients and clients is the most important to improving service provision to the primary health care system, there is no use to add values to the service so that it is not according to the requirements of the patient or the consumer.

This study was conducted in primary health care centers in Baghdad city, and the results showed that the degree of satisfaction of patients and consumer's about the services provided in primary health care centers that they are very satisfied with the type and quality of services provided by primary health care centers, which is evident from the high mean of scores among all (11) items of the scale, table (4-7-a).the highest item is number (4) (satisfied with the attention of the medical and health personnel and health to your problem) and number(5) (satisfied with the relationship with the service provider (medical and health staff) mean of score(2.68), and the lowest item of the high level is (11) (feel good about medical and health personnel to clarify the problem understandable manner), and total of mean of score.

The results of this study apply with a study conducted by (13) in India on the satisfaction of consumer's and patient's in primary health care centers and the results indicate (98%) are very satisfied. Also, a study in Thailand (77%) revealed a very satisfied<sup>(14)</sup>.

According to the overall evaluation of consumer satisfaction with primary health care services, the results indicate that consumers are very satisfied with the services provided in primary health care centers (71.6%), and the results (26.1%) Moderate are satisfied.

Customer satisfaction has always been an important component when measuring health outcomes and quality of care in both developed and developing countries and is an important indicator of quality of health care. The literature has shown that satisfied customers are more likely to develop a good relationship with the health

system, which leads to better compliance, continuity of care and ultimately better health outcomes. Identifying customer needs and assessing the health services provided is a starting point for a customer-focused approach to health care provision. Therefore, customer satisfaction is an important measure for assessing the quality of health services and can predict compliance and use. The function of health care services is to improve the health status of the population<sup>(15)</sup>.

## Conclusion

1. The Customer Satisfaction Scale is very important to assess the quality of health services and can predict compliance and use with international standards for quality of services.
2. The study found that most primary health care centers are located in densely populated areas. Therefore, primary health care services are adequately provided.

**Recommendations:** The researchers recommend (1) encouraging the continuous use of the customer satisfaction scale to maintain the achievements by assessing the quality of the primary health care services to reach the highest level of the international standards for the quality of services, (2) work to encourage the health care sectors to maintain plans to complete these projects in order to benefit from the largest possible number of the population from the services provided in the primary health care centers.

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**Ethical Clearance:** The researchers obtained the ethical approval from the University of Baghdad, College of Nursing.

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