Quality of Health Care and its Effects on the Utilization of Maternal and Child Health Services

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The study was done to assess the quality of care provided by the Kisumu Municipal health facilities as perceived by the community and from the professional perspective, with special reference to maternal and child health services. It was a descriptive cross-sectional survey, with data collected from household and exit interviews of women in the reproductive age group of 15-49 years who were living within the Municipality. Data was also collected from the Municipal facilities using a prepared checklist.

A total of 482 and 196 mothers were interviewed in the household and exit interviews respectively.

Utilization of Municipal facilities was found to be low, with 40.4% of the respondents using them for ANC services, 53.7% for immunisation, and 45.7% for pediatric clinical services. Of the other facilities, there was high utilization of the Provincial and District hospitals, which are MOH facilities.

About 70% of the respondents had by-passed Municipal facilities for at least one of the three services in their last attendance of such a service. For specific services, the by-pass rate was 59.5% for ANC, 46.3% for immunization and 54.3% for pediatric clinical services. By-pass rate was high for the urban catchment areas than the rural catchment areas. There was association between the socioeconomic status and by-pass rates, with the higher social class more likely to by-pass than the lower social class. The main reasons given for by-pass were poor care (37%), lack of drugs, vaccines/supplies (30%) and lack of/poor laboratory services (21%).

Results on the respondents perception of quality of care showed that majority of the mothers were satisfied with the providers competence, attitude and the communication process that took place during their interaction, but that there was lack of privacy in the consultation rooms and that most providers were not thorough in their physical examinations. There was also a general satisfaction with the infrastructure including cleanliness and quality of buildings.

The areas that the respondents want to be improved are drug availability (69.6%), laboratory services (46.4%) and more staff (23.5%). Overall, the respondents had a low opinion of the quality of care offered in the Municipal facilities as shown by the mean quality index from the household interview. Only four facilities out of eleven had a mean quality index more than half of the maximum possible score of 17. Again, only 19.3% gave the overall quality rating of "good". Utilization of ANC and Immunization services were significantly associated with the perceived quality of care while perception does not influence utilization of child treatment services.

From the facility audit, most of the facilities had reasonable capacity to offer basic health care with only 3 facilities out of 11 scoring less than 50% before weighting and 4 facilities scoring
less than 50% after weighting. The WOIOst scores were in availability of drugs, equipment and management issues. There was however over-employment of both technical and support staff as compared to the workload, which was very low. Most of the staff is in dire need of in-service training in the areas of reproductive health. There was however no association between utilization of MCH services and the capacity of the facilities to offer care.

By-pass and ever-use of Municipal facilities is significantly associated with perceived quality of care, while they are not influenced by the capacity of the facilities to offer care. CONCLUSION: There is under-utilization of Municipal health facilities due to the low opinion the community has on the quality of care they provide and that this perception is influenced by the respondent's socioeconomic status especially education.

RECOMMENDATION: The Municipality should improve on supplies, equipment and medicines, rehabilitate and maintain the physical facilities, establish continuous education for staff and set up a Health Management Board to oversee the running of health services.