

Satisfaction level of Postnatal Mothers about Antenatal Care in Jumla, Nepal

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ABSTRACT


Background: Client satisfaction is essential for improvement of quality of antenatal care and to increase service utilization. Therefore, this article aimed to assess the level of satisfaction of postnatal mothers About antenatal care services in Chandannath Municipality of Jumla, Nepal.

Methods: The descriptive cross sectional study design was conducted to assess the level of satisfaction of postnatal mothers about antenatal care services in Chandannath Municipality of Jumla, Nepal. The study population was postnatal mothers within one year of child birth who came in maternal and child health (MCH) clinic for the immunization of their baby. Total 367 postnatal mothers within one year of childbirth were recruited by adopting simple random sampling technique, and face to face interview was done by using Likert scale to collect the data. Data analysis was done by using descriptive statistics.

Results: Regarding the satisfaction on antenatal care received by postnatal mothers on different aspects, majority were satisfied with the information received regarding prenatal test and procedures (68.1%), and antenatal guidance/counseling on preparation for child birth (61.3%). Similarly, more than half were satisfied with time given to answer their questions (57.5%). About approachability, less than half (45.8%) were dissatisfied because providers were hurried during antenatal visit. Concerning the availability; majority (68.9%) were satisfied because they got in touch with care providers. Likewise, majority of mothers were satisfied with respect (67.0%) and support (64.0%) from providers. Regarding the satisfaction level on antenatal care received by postnatal mother, majority of them (71.4%) were satisfied and 28.6% were dissatisfied from antenatal care they received.

Conclusion: The facility based study showed that the majority of postnatal mothers were satisfied and one third were not satisfied from antenatal care. So community based study should be conducted to find out the actual satisfaction level.

Keywords: Antenatal care; Postnatal mothers, Satisfaction, Nepal

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INTRODUCTION

Antenatal care (ANC) is one of the most effective interventions in reducing maternal morbidity and mortality in the developing world including Nepal.^{1,2} A higher number of ANC visits confirms the benefits that can be gained by continued interaction with the health system.³ ANC visit is the first step to preventing both mother and child health problems which is the key component of achieving the Sustainable Development Goals (SDG) by 2030.⁴ Client satisfaction is essential for the improvement of the quality of ANC and to increase safer motherhood service utilization.⁵⁻⁷ Globally, client satisfaction has been identified as a major index in the assessment of quality health care services.⁸ The improvement of maternal and child health status can be increased through client's satisfaction.⁹ Antenatal care service satisfaction is an indicator of the quality of antenatal care. Low satisfaction or dissatisfaction with the antenatal care services hinder women from going to a health facility to receive care.¹⁰ Therefore the researchers are interested to find out the satisfaction about antenatal care services among postnatal mothers of Chandannath municipality of Jumla.

METHODS

The descriptive cross sectional study design was conducted to identify the mothers' satisfaction level of antenatal care services among postnatal mothers of Chandannath Municipality of Jumla, Nepal. The population of the study was postnatal mother within one year of child birth who came in MCH clinic for the immunization of their child. The sample size of the study was calculated on the basis of four ANC visit done by women that is according to Nepal demographic and health survey report 2016 (the rate was 69%). A total 367 postnatal mothers having children under one year were recruited. Simple random sampling technique was used to select study participants. Face to face interview was done by using Likert Scale for the collection of data from May 2020 to February 2021. Pretesting was done in 10% similar population in maternal and child health (MCH) clinics. Similarly, validity of study tool was done by doing extensive literature search, consultation with subject expert, translation to Nepali language of tool with the help of language expert and back translation to English. An ethical approval was sought from the institutional

review committee of Karnali Academy of Health Sciences, Jumla, Nepal. The collected data was entered and analyzed by using Statistical Package for Social Science (SPSS) 16 version.

Descriptive statistics like frequency, percentage, mean, standard deviation was calculated. Thirty-one statements including three negative statements having five point Likert scale were used to assess the level of satisfaction of postnatal mother regarding the satisfaction on antenatal care services. The level of satisfaction was measured with agree and strongly agree response, and other responses were considered as not satisfied.

RESULTS

Regarding the satisfaction on antenatal care received by postnatal mothers on information aspects, majority 250 (68.1%) were satisfied with the information received regarding prenatal test and procedures. There were 174 (47.4%) satisfied and 178 (48.5%) very satisfied on involved in prenatal care and information received about outcome and potential problems of pregnancy. More than half [213 (58%)] were satisfied on explanation received about the result of tests. Likewise, more than half [176 (52.3%)] were satisfied on information received to make decision. Higher proportion [171 (46.6%) and 163 (44.4%)] satisfied and very satisfied respectively that care providers kept their information confidential. About the reason for blood and other test ordered, 203 (55.3%) were satisfied (Table 1).

More than half 215 (58.6%) of participants were satisfied on given option for childbirth by maternal care providers. Approximately 181 (49%) of participants were satisfied with enough information given about need of breast feeding. In regard to preparation for child birth, 225 (61.3%) were satisfied.

Information given by care provider about the safety of moderate exercise during pregnancy, 187 (51%) were satisfied. Similarly, 213 (58%) were satisfied on information received about diet during pregnancy. Likewise, 169 (46%) satisfied and 182 (49.6%) strongly satisfied on received information about avoidance of alcohol and substance use during pregnancy (Table 2).

Approximately 211 (57.5%) of participants were satisfied on information received that provider had time to answer their questions. Moreover, 193 (52.6%) were satisfied that the providers had time to talk with them. Furthermore, 193 (52.6%) satisfied that providers had time to listen the queries of them. Regarding the approachability; higher proportion 168

(45.8%) were satisfied that providers were not rushed during visit. About 168(45.8%) postnatal mothers were satisfied that the providers were not feeling the wasting of their time. Likewise, higher proportion 140(38.1%) of postnatal mothers were satisfied that they were not afraid to ask questions with care providers (Table 3).

Table 1: Satisfaction on Information Sharing Aspects of Antenatal Care Service among Postnatal Mothers (367)

Variables	VD (%)	D (%)	NSND (%)	S (%)	VS (%)
Information Sharing					
Prenatal test and procedure	1(.3%)	2(.5%)	8(2.2%)	250(68.1%)	106(28.9%)
Provided information on outcome and potential problem of pregnancy	2(.5%)	3(.8%)	10(2.7%)	174(47.4%)	178(48.5%)
Explained results of test	0(0%)	3(.8%)	14(3.8%)	213(58.0%)	137(37.3%)
Gave answer to questions		1(.3%)	10(2.7%)	176(48.0%)	180(49.0%)
Gave enough information to make decisions	0(0%)	1(.3%)	10(5.4%)	176(52.3%)	180(42.0%)
Kept the information confidential	4(1.1%)	0(0%)	29(7.9%)	171(46.6%)	163(44.4%)
Understood the reasons for blood work and other tests	2(.5%)	1(.3%)	13(3.5%)	203(55.3%)	148(40.3%)

Note: VS=Very satisfied, S=Satisfied, NSND=Neither satisfied nor Dissatisfied, D=Dissatisfied, VD=Very Dissatisfied

Table 2: Satisfaction on Antenatal Guidance/Counseling among Postnatal Mothers (367)

Variables	VD (%)	D (%)	NSND (%)	S (%)	VS (%)
Antenatal guidance/counseling					
Options for child birth	6(1.6%)	11(3.0%)	34(9.3%)	215(58.6%)	101(27.5%)
Information to meet need breastfeeding	2(.5%)	10(2.7%)	16(4.4%)	181(49.3%)	158(43.1%)
Prepared for birth	4(1.1%)	8(2.2%)	6(1.6%)	225(61.3%)	124(33.8%)
Information about safety of moderate exercise in pregnancy	4(1.1%)	7(1.9%)	20(5.4%)	187(51.0%)	149(40.6%)
Information about diet during pregnancy	2(.5%)	5(1.4%)	7(1.9%)	213(58.0%)	140(38.1%)
Received information on avoidance of alcohol during pregnancy	3(.8%)	8(2.2%)	5(1.4%)	169(46.0%)	182(49.6%)

Note: VS=Very satisfied, S=Satisfied, NSND=Neither satisfied nor Dissatisfied, D=Dissatisfied, VD=Very Dissatisfied

Table 3: Satisfaction on Sufficient Time and Approachability Aspects of Antenatal Care among Postnatal Mothers (367)

Variables	VD (%)	D (%)	NSND (%)	S (%)	VS (%)
Sufficient time					
Provider has time to answer the questions	1(.3%)	1(.3%)	14(3.8%)	211(57.5%)	140(38.1%)
Providers made time to talk	1(.3%)	7(1.9%)	23(6.3%)	193(52.6%)	143(39.0%)
Providers took time to listen	4(1.1%)	10(2.7%)	26(7.1%)	193(52.6%)	134(36.5%)
Approachability					
Providers were rushed during prenatal visit	48(13.1%)	168(45.8%)	58(15.8%)	64(17.4%)	29(7.9%)
Provider made feeling like wasting their time	59(16.1%)	168(45.8%)	52(14.2%)	63(17.2%)	25(6.8%)
Afraid to ask questions with provider	76(20.7%)	140(38.1%)	43(11.7%)	80(21.8%)	28(7.6%)

Note: VS=Very satisfied, S=Satisfied, NSND=Neither satisfied nor Dissatisfied, D=Dissatisfied, VD=Very Dissatisfied

Table 4: Satisfaction on Antenatal Availability, Support and respect among Postnatal Mothers (367)

Variables	VD (%)	D (%)	NSND (%)	S (%)	VS (%)
Availability					
Get in touch with providers	5(1.4%)	16(4.4%)	25(6.8%)	253(68.9%)	68(18.5%)
Reach providers by phone when necessary	19(5.2%)	50(13.6%)	26(7.1%)	190(51.8%)	82(22.3%)
Support and respect					
Respected providers	0(0%)	2(.5%)	38(10.4%)	246(67.0%)	81(22.1%)
Respected knowledge and experiences	0(0%)	2(.5%)	46(12.5%)	209(56.9%)	110(30.0%)
Decisions respected by providers	0(0%)	2(.5%)	54(14.7%)	211(57.5%)	100(27.2%)
Providers were patience	1(.3%)	1(.3%)	60(16.3)	209(56.9%)	96(26.2%)
Supported the feelings by providers	0(0%)	1(.3%)	37(10.1%)	235(64.0%)	94(25.6%)
Concerns were taken seriously	1(.3%)	0(0%)	40(10.9%)	220(59.9%)	106(28.9%)
Self-control of decisions being made by provider	0(0%)	3(.8%)	39(10.6%)	227(61.9%)	98 (26.7%)
Decisions supported by providers	0(0%)	2(.5%)	33(9.0%)	211(57.5%)	121(33.0%)
Feel ease with providers	0(0%)	1(.3%)	21(5.7%)	245(66.8%)	100(27.2%)
Respected values and beliefs by providers	2(.5%)	0(0%)	19(5.2%)	237(64.6%)	109(29.7%)

Note: VS=Very satisfied, S=Satisfied, NSND=Neither satisfied nor Dissatisfied, D=Dissatisfied, VD=Very Dissatisfied

Regarding the satisfaction on antenatal care received by postnatal mothers on different variables, 253(68.9%) were satisfied regarding how to get in touch with care providers. Similarly, 190(51.8%) were satisfied that they could reach providers by phone call as necessary. Most 246(67%) were satisfied regarding respect from providers and 209(56.9%) respect in their knowledge and experience. More than half 211 (57.5%) were satisfied that providers respected the decisions of the mother. About 209(56.9%) were satisfied that the providers were patience, and 235 (64%) were satisfied that providers supported for right things of client. Furthermore, 220(59.9%) satisfied that the care providers had taken clients' concern seriously. And 227(61.9%) were satisfied that they had self-control on decision of care providers. Likewise, 211(57.5%) satisfied that decisions were supported by care providers. About 245(66.8%) satisfied that they were ease with care providers, and 237(64.6%) were satisfied that care providers respected their value and belief. (Table 4).

Regarding the satisfaction on different aspect of antenatal care; average score on information sharing was 30.49 ± 2.65 with ranging 19 to 35 and average score of antenatal counseling/guidance was 25.7 ± 3.07 with ranging 12 to 36. Similarly, average score on sufficient time given by health care providers was 7.72 ± 3.27 with ranging from 3 to 15. Likewise, average score on approachability with providers was 10.28 ± 3.26 with ranging 3 to 15. About the average score on availability of health care providers was 41.60 ± 4.24 with range of 28 to 50. Lastly, average score on support and respect provided by health care providers was 113.19 ± 9.61 with range of 82 to 140. (Table 5)

Table 5: Women's Satisfaction on different aspect of Antenatal care (n=367)

Satisfaction on	Min	Max.	Mean	SD
Antenatal care				
Information Sharing	19.0	35.0	30.49	2.65
Antenatal guidance/counseling	12.0	36.0	25.67	3.07
Sufficient time	3.00	15.0	7.72	3.27
Approachability	3.00	15.2	10.3	3.26
Availability	28.0	50.0	41.60	4.24
Support and respect	82.0	140	113.	9.61

Table 6: Level of Satisfaction of antenatal care (n=367)

Level of Satisfaction	Frequencies	Percentage
Satisfied	262	71.4
Dissatisfied	105	28.6

Regarding the satisfaction level on antenatal care received by postnatal mother; majority of them 262(71.4%) were satisfied and 105(28.6%) were dissatisfied from antenatal care they received. (Table 6)

DISCUSSION

Regarding the satisfaction on antenatal care received by postnatal mothers on information aspects, majority (68.1%) were satisfied with the information received regarding prenatal test and procedures, which is near similar to the finding of a facility-based cross-sectional study in Southern Ethiopia that is 74.2% were satisfied with the information provided by health-care providers.¹¹ Another institution-based cross-sectional study conducted in Eastern Ethiopia showed women's satisfaction on provider's explanation about the procedure was contrast to this study that is 40.9%.¹² Higher proportion (47.4%) and 48.5% were satisfied and very satisfied respectively on involved in prenatal care and information received about outcome and potential problems of pregnancy. More than half (58%) were satisfied on explanation received about the result of tests. The study was conducted in the East Kazakhstan showed contrast finding that is 81.7% satisfied with information received about tests (e.g., blood, urine) during pregnancy.¹³ Likewise, more than half (52.3%) were satisfied on information received to make decision. Higher proportion (46.6%) and 44.4%) were satisfied and very satisfied respectively that care providers kept their information confidential. The contrast result was found with a cross-sectional study of Myanmar that is 70.4% were satisfied with confidentiality maintained by providers.¹⁴ Approximately half (49%) of participants were satisfied with enough information given about need of breast feeding. Study of East Kazakhstan showed higher satisfaction than current study finding that is 58.9% satisfied with information received about breast feeding.¹³

About 45.8% postnatal mothers dissatisfied that the providers felt the wasting of time. Similar result was found from a facility-based cross-sectional study of Southern Ethiopia that is 49.5% of pregnant women

were not satisfied with waiting time.¹¹ About 57% were satisfied that the providers were patience, and 64% were satisfied that providers supported for right things of client. Similar result was found from a cross-sectional study of Nigeria that is 64%.¹⁵

In regard to the satisfaction on different aspect of antenatal care; average score on information sharing was 30.49 ± 2.65 with ranging 19 to 35 and average score of antenatal counseling/guidance was 25.7 ± 3.07 with ranging 12 to 36. Similarly, average score on sufficient time given by health care providers was 7.72 ± 3.27 with ranging from 3 to 15. Likewise, average score on approachability with providers was 10 ± 3.26 with ranging 2 to 10. About the average score on availability of health care providers was 41.60 ± 4.24 with range of 28 to 50. Lastly, average score on support and respect provided by health care providers was 113.19 ± 9.61 with range of 82 to 140. According to the study conducted in Chitwan, Nepal had the mean score as information sharing 21.39 ± 2.54 , anticipatory guidance 20.99 ± 2.48 , sufficient time 16.08 ± 1.51 , approachability 13.33 ± 1.61 , availability 12.13 ± 1.45 and support and respect 29.13 ± 3.16 .¹⁶ This finding is different from this study. Regarding the satisfaction level on antenatal care received by postnatal mother; majority of them (71.4%) were satisfied and 28.6% were dissatisfied from antenatal care they received. One facility- based cross-sectional survey of Ghana showed majority (92.7%) were satisfied with antenatal care services which is higher than our study finding.¹⁷ Similarly, finding from Ethiopia showed that more than 74% were satisfied with the service which is similar with our study result.¹⁸

CONCLUSION

Regarding the satisfaction on antenatal care received by postnatal mothers on different aspects; majority were satisfied with the information received regarding prenatal test and procedures, and antenatal guidance/counseling on preparation for child birth. Similarly, more than half were satisfied with time given to answer their questions. Concerning the availability majority were satisfied because they got in touch with care providers. Likewise, most of mothers were satisfied with respect and support from providers. Regarding the satisfaction level on antenatal care received by postnatal mother; majority of them were satisfied and one third were dissatisfied from antenatal

care. The facility based study showed that the majority of postnatal mothers were satisfied and one third were not satisfied from antenatal care. Therefore, it is recommended that the community based study should be conducted to find out the actual satisfaction level.

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