



**PHARMA COLLEGE HAWASSA CAMPUS**

**SCHOOL OF PUBLIC HEALTH**

**CLIENT SATISFACTION WITH OUTPATIENT DEPARTEMENT  
SERVICES AND ASSOCIATED FACTORS AT PUBLIC HEALTH  
CENTERS, HAWASSA TOWN, SIDAMMA REGION, SOUTHERN  
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## LIST OF ACRONYMS/ABBREVIATIONS

ANC	Antenatal Care
CRC	Compassionate Respectful Care
CSA	Central Statistics Agency
CSW	Commercial Sex Worker
EDHS	Ethiopian Demographic Health Survey
EFMH	Ethiopian Federal Minister of Health
EHSDP	Ethiopian Health Sector Development Program
G.C	Gregorian Calendar
HSDP	Health Sector Development Plan
IRB	Institutional Review Board
IQR	Inter Quartile Range
NGO	Non-Governmental Organization
OPD	Out Patient Department
AOR	Adjusted Odds Ratio
PCHC	Patient Centered Health Care
PHCU	Primary Health Care Unit
SPSS	Statistical package for social science
WHO	World Health Organization

## ABSTRACT

**Background:** Clients' satisfaction refers to how a healthcare receiver feels about important elements of the circumstances, procedure, and outcome of their service experience. Treatment outcomes may both impact and be influenced by client experience with the treatment process.

**Objective:** To process. Therefore, this study is aimed to determine client satisfaction with outpatient department services and associated factors in Hawassa town, Sidamma region, southern Ethiopia 2023.

**Methods:** Facility based cross-sectional study design was conducted starting from April 15-May 15, 2022 to May among a total of 576 clients using outpatient department services in Hawassa public health centers selected by simple random sampling method. Data were collected by structured face-to-face interviewer guide questioner. The data were entered by Epi-info version 7.2.2.6 and then exported to SPSS version 27 software for further analysis. Bi-variable and multivariable binary logistic regression were used to identify associated factors to client's satisfaction. P-value less than 0.05 and adjusted odds ratio with 95% CI considered as significance level for associations.

**Result:** The results of the study unveiled that the overall level of client satisfaction stood at 74% (95% CI: 70.2%-77.5%). Similarly, the factors that demonstrated a statistically significant association with client satisfaction were: ~~a courteous greeting from health providers receiving an appropriate greeting from healthcare providers~~ [AOR = 4.840; (95% CI: 2.407, 9.732)], ~~obtaining~~ adequate information about ~~their~~ treatment [AOR = 7.575; (95% CI: 3.085, 18.601)], obtaining all ~~necessary~~ laboratory orders [AOR = 4.921; (95% CI: 1.340, 18.072)], ~~acquiring~~ ~~availability of~~ prescribed medications ~~from the health center's pharmacy~~ [AOR = 4.380; (95% CI: 1.571, 12.213)], **recommending the services used to a family member or friend** [AOR = 2.845; (95% CI: 1.177, 6.881)], maintaining a clean facility environment [AOR = 4.767; (95% CI: 1.285, 17.686)], and expressing contentment with the sanitation of the latrine [AOR = 2.622; (95% CI: 1.243, 5.531)].

**Conclusion:** The findings of this study indicate that the overall level of client satisfaction falls below three-fourth, highlighting the need for improvements in various areas. On top of that,

several factors were significantly associated with client satisfaction, including receiving an appropriate greeting from healthcare providers, obtaining adequate information about treatment, obtaining all necessary laboratory orders, acquiring all prescribed medications from the health center's pharmacy, recommending the services used to others, maintaining a clean facility environment, and expressing contentment with the sanitation of the latrine. Based on these results, it is recommended that healthcare providers focus on improving these factors to enhance client satisfaction.

**Key words:** Client satisfaction, outpatient department, associated factors, Hawassa city administration

## 1. INTRODUCTION

### 1.1. Background

Customer satisfaction is defined as the fulfillment or fulfilling of a person's expectations from a service or product. One of the main objectives of any healthcare system is to ensure that its clients are satisfied, but it can be challenging to assess client happiness and the responsiveness of healthcare organizations because both clinical and nonclinical outcomes of care have an impact on patient satisfaction(1).OPD is seen as the entrance to medical facilities, and it is here that clients' first impressions of the quality of the service will be formed (2).

Due to its impact on medication adherence and the improvement of life quality, the significance of patient satisfaction with primary care is being understood more and more (3).Customer satisfaction is characterized as the person's favorable assessment of several aspects of healthcare(4).

The WHO report states that health systems must be responsive to the client's and the community's health requirements. The HSDP has been implemented by the EFMOH; however, there is still a gap in the availability and caliber of services offered to communities (5).The majority of studies in this field indicated that Ireland, South Africa, and Nigeria had the highest levels of satisfaction with psychiatric services, at 90%, 91.9%, and 83%, respectively. Nonetheless, tests carried out in India and Ethiopia revealed low levels of satisfaction (57 and 61.1%, respectively) (6).

It is presumable that one of the factors determining whether an outcome is satisfying or not is if the client's expectations were met. An individual's level of satisfaction is influenced by their social networks, past experiences, and expectations. It also includes both cognitive and emotional components (7).

Increased understanding of the elements affecting customer satisfaction would lead to the adoption of programs that are specifically designed to meet patient needs, as seen by both patients and service providers (8).

In the Sidamma region of Hawassa town, where patient satisfaction with health care services might be a sign of the quality of the healthcare system, this study intends to demonstrate patient satisfaction with outpatient department services and associated factors at public health centers.

## 1.2. Statement of the problem

Client satisfaction encourages service use, service adherence, and improvement of the patient-physician relationship (9). Client's frustration is a result of a number of issues they encounter in the outpatient department, including overcrowding, delays in treatment, improper guidance, etc. (10). Clients have numerous options to receive the best treatments accessible because to the services that are offered and the growing human resource base around the world. As a result, determining the patient satisfaction level is urgently necessary due to quality control, performance, and competitive marketplaces (11).

Client satisfaction is a valid indicator of measurement of quality of care and this day's quality health care is a global concern. In fact, access to high-quality healthcare is a major challenge. Because of the below average quality of medical care, the expenses of maintaining a healthy population and the burden of illness are rising. As well, measurements of the healthcare system should be in line with advancement in patient accessibility, care quality, and satisfaction (11-13).

Treatment outcomes may both impact and be influenced by patient satisfaction with the therapeutic process. Customers that are dissatisfied with a service could get poorer results than other customers. Because they neglect to follow treatment programs, miss more sessions, or leave against medical advice(14).Doctors' bonuses in the US are based on how well their patients are rated. There are already standards in place in the UK that reward medical staff members for meeting quality goals with bonuses that can reach 30% of their base pay (15).

Evidence of differences in patient satisfaction with clinical procedures in several Ethiopian healthcare institutions has sparked interest in evaluating and improving healthcare to increase patient satisfaction (16)It is crucial to find out what patients think and feel about the care they received from their providers and how it was delivered in order to improve the standard of care and make sure that the local health services are meeting patients' requirements(17).

Knowing how satisfied patients are with the care received from a particular health organization is crucial for enhancing the caliber of health service delivery since it shows how well the provider has met the patient's most crucial expectations. Yet, health care management in developing nations appear to have paid little attention to how people feel about their health care systems, and doctors and other medical professionals lack the knowledge and training necessary to meet patients' expectations(17, 18).The sustainability of healthcare services was examined in several studies with an eye toward patient satisfaction using characteristics like pharmacy services, tangible physical services (environment), doctor-patient communication, and laboratory services(19).

According to a survey conducted in several nations, patients were satisfied with the outpatient medical treatments. For instance, patient satisfaction was 55%, 83%, and 68%, respectively, in Mozambique, Tanzania, and Bangladesh. In a comparable study, the University of Gondar Teaching Hospital, Jimma University, and Wolaita Sodo University Teaching Hospital in Ethiopia were evaluated for their outpatient performance, with satisfaction percentages of 22.0%, 57.1%, and 54.2%, respectively (19, 20).

The main factor contributing to Ethiopians' poor health is the country's low socioeconomic development, which has led to low living standards, unfavorable environmental conditions, and a lack of social services(21).A new program by the Ethiopian Federal Ministry of Health called CRC in order to enhance the relationship between patients and doctors and raise patient satisfaction with healthcare services (22).Additionally, ensuring that patients have a favorable experience after receiving medical attention helps forecast their future use of healthcare, compliance with present management, continuity of care, and the overall effectiveness of medical interventions(23).Therefore it is crucial to have an evidence based data in order to reach the growing demands of the population in Sidamma region, particularly Hawassa town were the studies mainly focus on hospitals rather than health centers. Having said this the study aims to provide information on the magnitude of client satisfaction with outpatient department services and associated factors at health centers located in Hawassa town and seeks for a new knowledge that could help prevent the loss of quality health care and wants to reveal clients in hand are the key to prevent the loose of the scarce resource with the growing population at country level.

### 1.3 Significance of the study

This study will have the significance of increasing students' ability and experience on thesis paper development. And the findings of the study which is about client satisfaction without patient department services and associated factors at public health centers in Hawassa town can definitely be used as an important asset both by the facilities in order to improve their services according to the identified problems, by prioritizing those which have to come first and by developing an action plan to sort out a solution which is able to address the identified problems and to keep up those practices which are admired by the clients. Furthermore, the study can also be used Hawassa city administration, Ministry of health to know the current situation about the client's satisfaction in order to enhance their strategies which are aimed at improving the quality of health care and it can also be used as a guideline in order to now the gap found in public health centers since the aim is to have a healthy population with productive life. The study also will be able provide a current information with tangible evidence to help the Sidamma region to keep up with the plan of giving patient centered quality care.

## 2. LITREATURE REVIEW

### 2.1. Magnitude of client satisfaction with outpatient department

To measure patient satisfaction, numerous research were undertaken. According to a survey, the nursing services were rated favorably by 73% of study participants in India, 51.7% in Serbia, 57.8% in the Philippines, 54.8% in Turkey, and 82.7% in Malaysia. In thorough studies carried out in poor nations, the specialists who directly and critically oversee clinical practice discovered that 75% of the cases were not effectively assessed, investigated, managed, and monitored(24).

Patient satisfaction varies widely over the world, from 55% in Mozambique to 99.6% in Kuwait. Similar to Ethiopia, Tigray has low patient satisfaction (43.6%) and Addis Ababa has high patient satisfaction (90.1%) with public hospital routine services (25).

### 2.2 Factors associated with client satisfaction with outpatient department services.

Many socio-demographic parameters, including age, sex, education, occupation, and marital status, as well as other aspects have been linked to patient satisfaction. The availability of services (drugs, requested laboratory and X-ray in the hospital) and accessibility of services (waiting time, cost of services, and transport to the service) were also linked to patient satisfaction. It is also impacted by the courtesy of doctors giving clear explanations of things, searching for information about symptoms, the availability of restrooms, signs and directions, and drinking water(25).According to numerous studies, the following factors contribute to patient dissatisfaction: crowding, cost of care, a lack of medications and supplies, the physical environment (cleanliness of restrooms and exam rooms), politeness and respect, waiting times, disclosure of information about hospital services, protection of privacy, difficulty locating various sections, laboratory procedures, and repeat visits from the doctor for evaluation of

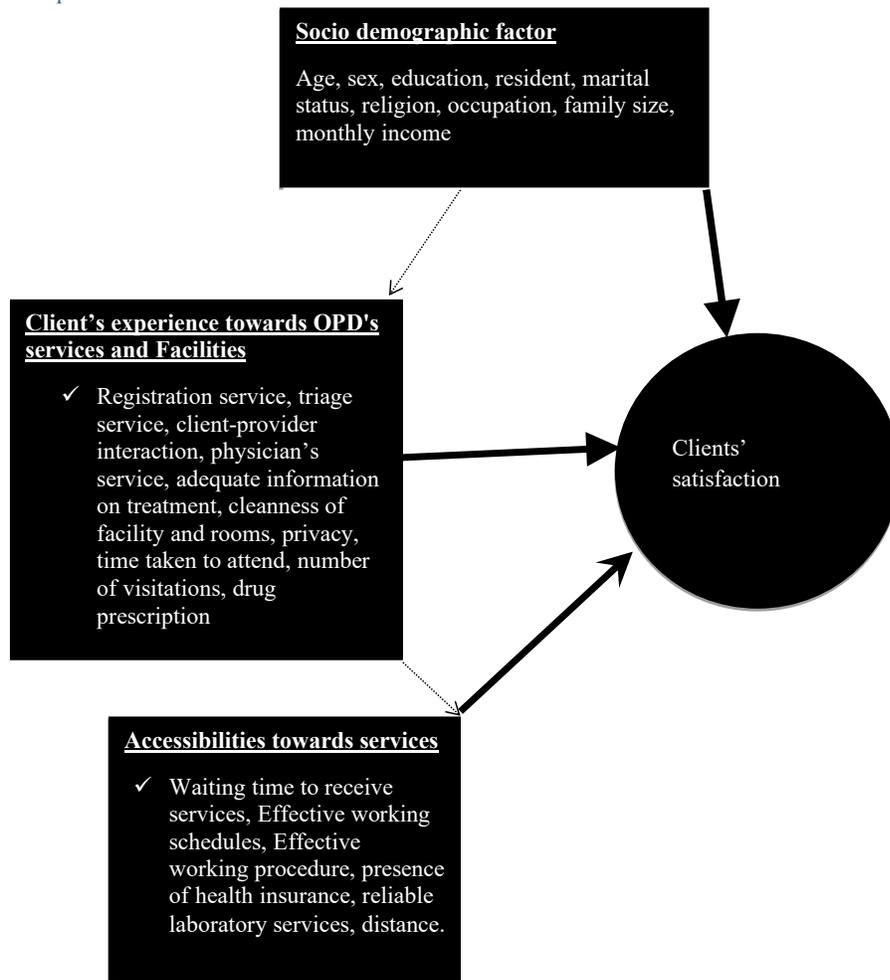
laboratory results(26).According to a survey done at the holy family hospital in Tuchman, Ghana, the mean waiting time at records was the longest, at 74.5 minutes. In Ethiopia, there is a long wait time in the outpatient department of hospitals. Patients at the Jimma University specialized hospital were found to have to wait an average of 4.5 hours before receiving care(27).

The health system improvement initiative is one of the strategies used by the Ethiopian government to improve the delivery of high-quality healthcare services. Customer discontent is still substantial, ranging from 22% to 80.1%, nevertheless(20). Inconsistent findings of the proportion of patient satisfaction toward healthcare services in Ethiopia make generalization difficult at the national level(24).One of the most important aspects of successful business or government policy is satisfaction, which can only be maintained by providing excellent service quality that increases satisfaction (28).

As a result of poor quality of health care, five million people die each year in low- and middle-income countries. It is a leading, preventable killer of people around the globe and is three times higher as many people annually die than HIV and malaria combined(29).The provision of effective, secure, and high-quality healthcare services to individuals in need is one of the six components of health systems identified by the WHO(30)By extending PHCU, the three-tiered health care delivery system now in use at HSDP seeks to enhance community health(21).

According to data from a national household survey, the main causes of discontent among outpatients were patients' perceived convenience, gender, education, and income(31).Clinical results, patient retention, and medical malpractice are all improved and reduced when patients are satisfied(4).

### 2.3. Conceptual Framework



**Figure 1 Conceptual framework client satisfaction with outpatient department services and associated factors at public health centers in Hawassa City, 2023 adopted from different literatures (24, 28, 32)**

### 3. OBJECTIVE OF THE STUDY

#### 3.1. General Objective

To determine the client satisfaction with outpatient department services and associated factors at public health facilities in Hawassa town, Sidamma region, Southern Ethiopia 2023.

#### 3.2. Specific objective

To determine the magnitude of client satisfaction with outpatient department services and associated factors at public health facilities in Hawassa city administration, Sidamma region, Sothern Ethiopia 2023.

To identify factors associated with outpatient department services at public health facilities in Hawassa city administration, Sidamma region, Sothern Ethiopia 2023.

## 4. METHODS AND MATERIALS

### 4.1 Study area and period

The study was conducted in Hawassa city administration at public health centers, Hawassa town, from February 2, 2022 to August 30, 2023, which is the capital city of Sidama region and is located 275 Kms far from Addis Ababa in south direction and 1125 Kms from Nairobi (33). Hawassa city administration is surrounded at the north by Oromia regional state West Arsi zone, at the west by Hawassa Zuria woreda, at the southwest by Boricha woreda, at the southeast by Malga woreda, at the south Shabadino woreda and at the Southeast by Wondogent woreda, and Oromia region. The total surface area of the city administration is about 157.2 Km<sup>2</sup> which is divided into 8 (7 urban and 1 rural) sub-cities. Average population density of the administration is 2451 per sq. Km (40). The total population of Hawassa city according to projections of the central statistics authority of Ethiopia, Hawassa's population is estimated to be 583,686 in 2015 E.C. The city is founded at 7°03'00" north latitude and at 38° 28'00" east longitudes. The maximum and minimum temperature is 34°C and 5°C respectively. The annual average temperature ranges from 20°C-30°C. The city has 7 hospitals among 3 of them are governmental (1 referral, 1 general and 1 public primary) and the rest 4 are primary private and also there are 11 health centers (10 public and 1 NGOs) and 17 health posts (34). Hawassa has a young population. Around 65% of the people are under 25 years of age, and only about 5.5% of the population is over 50 years of age. The annual population growth rate 4.02. 4.8% growth rate in urban and 2.8% growth rate in rural areas of the city. And one can find cultural foods of Sidama region such as Bursame, Cukame, omolcho and many other foods basically to be prepared from Enseat.

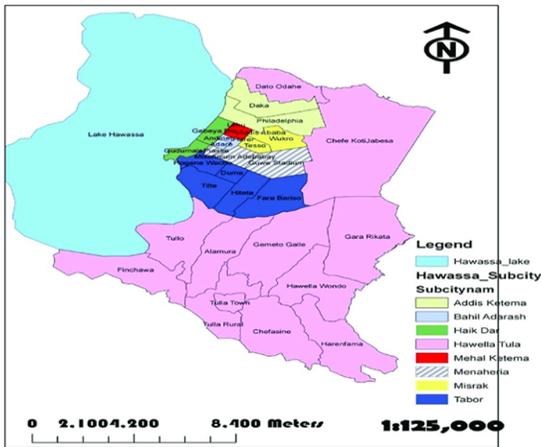


Figure .2. Map of Hawassa city administrations by sub-cities and kebeles (40).

#### 4.2 Study design

Facility based cross-sectional study design was conducted at the selected public health centers, Hawassa town, Sidamma region, southern Ethiopia.

#### 4.3 Population

##### 4.3.1 Source population

All clients who visited public health centers for outpatient department services in Hawassa city administration were the source population.

##### 4.3.2 Study population

Randomly selected adult outpatient department service users at the selected public health centers found during data collection period in Hawassa city administration.

#### 4.4 Eligibility criteria

##### 4.4.1 Inclusion criteria

- All adult clients who visited the selected public health centers for outpatient department services during data collection period.

##### 4.4.2 Exclusion criteria

- Very seriously ill clients who did not have somebody to accompany them and Clients who came for the second time during the study period.

#### 4.5 Sample size calculation

##### 4.5.1 Sample size for objective one

To determine sample size for the first objective, the single population proportion formula will be used. The proportion of clients satisfied with the service was 66.5%(17) from a study conducted in Wolkita, Ethiopia with confidence level of 95% and degree of precision 4%. A non-response rate of 10% is considered and then the total sample size were 587.

$$n = \frac{Z (\alpha/2)^2 * P (1-P)}{d^2}$$

##### 4.5.2 Sample size for objective two

For specific objective two the two-population proportion formula is considered using Epi info version 7.2.2.6 based on the following assumptions: type one error of 5%, power of 80%, and the ratio of exposed to non-exposed 1:1 and by taking adjusted Odds ratio and percent of an exposed group from previous studies (Table 1).

**Table1 Sample size determination for client satisfaction with outpatient department services**

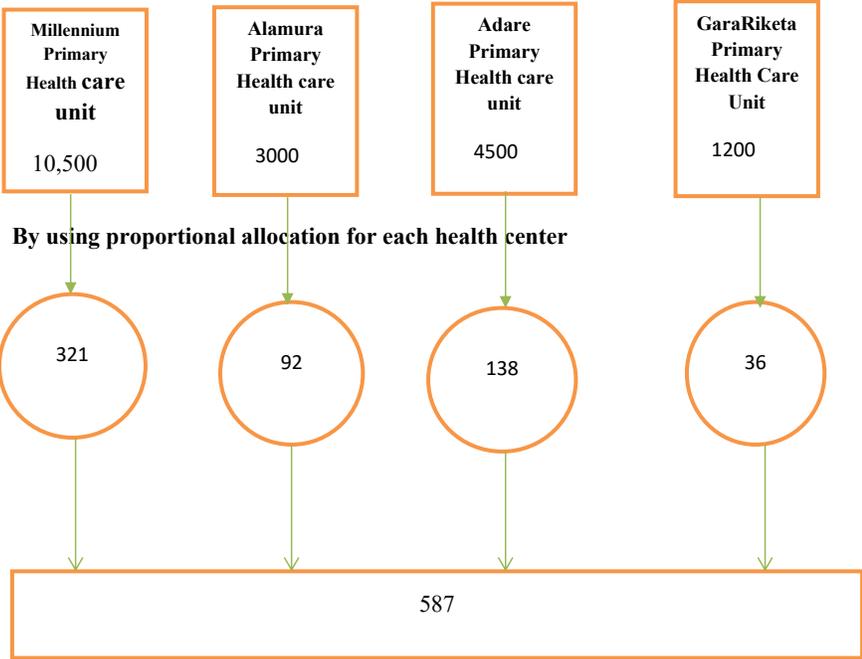
Variables	AOR	CI	Rati o	Powe r	Percent of outcome among unexpose d group	Sampl e size	10%N R	Total sampl e size	Referenc e
<b>Waiting time to visit service provider (in minutes)&lt;3 0</b>	3.16	95 %	1	80	30.5%	114	11.4	125	(35)
<b>Level of education Cannot read and write</b>	1.92 3	95 %	1	80	75%	70	7	77	(19)
<b>Study health centers</b>	4.44	95 %	1	80	11%	110	11	121	(22)

#### 4.6. Sampling procedure and technique

The public health facilities providing outpatient department services was selected by using simple random sampling technique by lottery method. The determined sample size was distributed proportionally based on the number of patients at each healthcare facility. Then, using the "K<sup>th</sup>" value and a systematic random selection technique, eligible patients was chosen from each healthcare facility. (Figure 3)

**Hawassa city administration public health centers**  
**Eleven public health centers**

**By Lottery Method**



**Figure. 3 Schematic presentation of sampling procedure used in client satisfaction outpatient department services at public health centers in Hawassa city administrative 2023.**

#### 4.7. Study Variables

##### 4.7.1. Dependent Variables

- Client Satisfaction

##### 4.7.2. Independent Variables

- **Sociodemographic factors**

Age, sex, marital status, religion, educational status, occupation, partners occupation, residence, monthly income

- **client's experience towards OPD's services and Facilities**

Registration service, triage service, client-provider interaction, physician's service, adequate information on treatment, cleanness of facility and rooms, privacy, time taken to attend, number of visitations.

- **Accessibilities towards services**

Waiting time to receive services, Effective working schedules, Effective working procedure, presence of health insurance, reliable laboratory services, distance.

#### 4.8. Operational definitions

**Outpatient department:** is an area in which the patient is treated in ambulatory care. Satisfaction qualitatively describes patients' positive reactions to services performed(4) .

**Level of client satisfaction:** - Data were checked for completeness and accuracy and entered and analyzed using SPSS version 27 software. Descriptive statistics were computed for different study variables. An overall satisfaction means score of 2.5 is considered as cut-off value to categorize patients. Based on that calculated mean score cut-point scores patients were classified as satisfied (those who scored overall means score above or equal to 2.5) and dissatisfied (those who scored calculated means score below 2.5). Bivariate logistic analysis was conducted to determine predictors of patient satisfaction(17).

#### 4.9. Data Collection Tools and Procedures

A structured face-to-face interviewer-guided questionnaire was used for data collection. The questionnaires were adapted from different literatures. An exit interview of clients who receive outpatient department services was performed after services and consultation on clients' way to home and the data was collected by trained data collectors with the guidance of their supervisors.

#### 4.10. Data Quality Control

The structured questionnaire was prepared in English first and then changed to local language (Amharic language) for better understanding of the data collectors and the respondents and then it was changed to English language again for analysis and presentation by language experts. Two-days training was given for data collectors on the objective of the research, data collection tools and procedures, how to approach potential respondents and how to keep confidentiality. Before conducting the main study, pretesting on 5% of the sample size was done at Hawassa public health centers. The final data collection tool was refined based on the findings from the pretesting. The collected data was carefully checked for completeness and consistencies on daily basis.

#### 4.11 Data Processing and Analysis

The collected data was coded and checked for completeness by manually and the collected data was entered into EPI DATA version 4.6.0.2 for cleaning and to maintain the quality of data, and then exported to SPSS version 27 for data analysis. Data was presented using descriptive statistics in the form of frequency tables, proportions and appropriate graphs and charts. Bivariate analyses was done to see the crude relationship between independent variables and the outcome of interest.

Bi-variable and multivariable binary logistic regression was used to identify associated factors with client satisfaction, variables with a p-value  $< 0.25$  during the bi-variable logistic regression was further entered into the final model, multivariate logistic regression to control confounding effects of other variables and determine independent predictors of client satisfaction.

P-value less than 0.05 and adjusted odds ratio (AOR) with 95%CI was considered as significance level for associations.

#### 4.12 Ethical consideration

The institutional review board (IRB) of the department of public health, Pharma College, Hawassa, campus has granted ethical clearance. The questionnaire that was provided to them was explicitly outline each respondent's rights, and privacy was maintained. The respondent was asked to provide written consent after being given a high level of security, informed about the study's goal and importance, and asked to participate in the study. To protect their privacy, names of respondents won't be listed in the questioner.

#### 4.13 Dissemination of findings

The primary audience for the findings of the study was the School of Public Health as a component of the General Public Health degree. It was then be forwarded to the Hawassa city administration ministry health bureau. The results were also to be distributed to the public health centers which have been chosen. The manuscript was next be sent to scholarly publications in hopes of being published.

## 5. RESULT

### 5.1. Socio-demographic characteristics of study participants

Among a total of 587 calculated sample size, about 576 respondents were participated with a response rate of 98.12%. About 322(55.9%) of study participants were within the age of 18-27 years. With median age and Interquartile range (IQR) of (26,10). Out of all study participants, 383(66.5%) were females. The marital status indicated that 456 (79.2%) were married. Regarding religion 378(65.6%) of respondents were protestants (see table2).

**Table 2. Socio-demographic characteristics of respondents among adult clients receiving outpatient department services at public health facility in Hawassa City,2023(N=576)**

Variables	Category	Frequency	Percentage (%)
Age	18-27	322	55.9
	28-37	165	28.6
	38-47	39	6.8
	≥48	50	8.7
Sex	Female	383	66.5
	Male	193	33.5
Marital Status	Single	105	18.2
	Married	456	79.2
	Other's Specify	15	2.6
Religion	Orthodox	132	22.9
	Muslim	28	4.9
	Protestant	378	65.6

	Other's Specify	38	6.6
Educational Status	No formal education	43	7.5
	Primary school (1-8)	179	31.1
	Secondary school (9-1)	162	28.1
	College and above	192	33.3
Occupational Status	Employed	168	29.2
	Merchant	76	13.2
	Daily laborer	30	5.2
	Unemployed	225	39.1
	Other's Specify	77	13.4
Partners Occupation	Employed	165	28.6
	Merchant	98	17.0
	Daily laborer	52	9.0
	Unemployed	63	10.9
	Other's Specify	78	13.5
Residence	Rural	50	8.7
	Urban	526	91.3
Monthly Income	No income	164	28.5
	<800 ETB	37	6.4
	800-1500 ETB	80	13.9
	>1500 ETB	295	51.2

Others specify for occupation and partners occupation indicates Private, Farmer, CSW, Driver, Cajoler, Housemaid, cook, adjutant, porter, Pastor, Prieste, Retirement, House rent, Waitress/er.

Others specify for religion indicate Adventist, hawaryate, joba, Pagan, Catholic

### 5.2 Study participants experience towards OPD's service.

Out of 576 of total respondents 492(85.4%) of study participants were visited the health center repeatedly. About 422(73.3%) of the respondents did get leading signs while entering the health center, while 394(68.4%) of the total respondents were registered timely. Three hundred thirty (57.3%) were received triage service. Regarding appropriate greeting provision from the health care provider 338(58.7%) were received. Five hundred six (87.8%) of the study participants were treated with respect. Among the total respondents 448(77.8%) were given adequate information on treatment, while 376(65.3%) have got all the laboratory order. About 512(88.9%) of the respondents were treated with their privacy being maintained (see table 3).

**Table 3. clients experience towards outpatient department services of respondents at public health centers in Hawassa town, Southern Ethiopia,2023.**

Variables	Catagorey	Frequency	Percentage (%)
Type of visit	New	84	14.6
	Repeat	492	85.4
Leading sign	Yes	422	73.3
	No	112	19.4
Timely registration service	Yes	394	68.4
	No	182	31.6
Received triage service	Yes	330	57.3
	No	120	20.8
Welcomed with greeting by health care provider	Yes	338	58.7
	No	238	41.3
Treated with respect	Yes	506	87.8
	No	70	12.2

Adequate information on your treatment	Yes	448	77.8
	No	128	22.8
Getting all laboratory orders	Yes	376	65.3
	No	23	23.0
Privacy maintained	Yes	512	88.9
	No	64	11.1
Getting all prescribed drugs	Yes	200	34.7
	No	376	65.3
Service recommendation	Yes	459	79.7
	No	117	20.3

### 5.3. Health facility related responses of clients

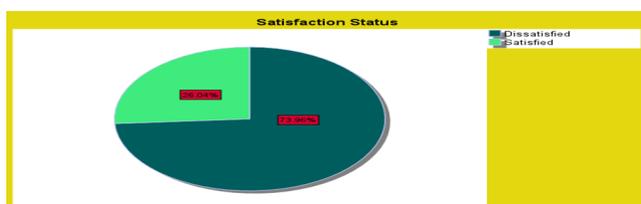
Based on the finding of this study, 530 (92%) majority of the respondents reported that the health centers maintained a clean environment, while 85 (14.8%) of the respondents reported that they experienced health education during the time they spent at the health center. Out of total respondents 311 (54%) more than half of participants were happy with the latrine sanitation. Concerning examination room happiness 507 (88%) were reported to be happy, while 289 (50.2%) of the respondents reported to have found a setup where they could leave their comments (see table 4).

**Table 4. Health facility related response of clients using the outpatient department services at selected public health centers in Hawassa southern, Ethiopia 2023.**

Variables	Category	Frequency	Percentage (%)
Clean environment	Yes	530	92.0
	No	46	8.0
Health education	Yes	85	14.8
	No	491	85.2
Refreshing vegetation	Yes	517	89.8
	No	59	10.2

Latrine sanitation	Yes	311	54.0
	No	167	29.0
Examination room	Yes	507	88.0
	No	69	12.0
Setup to leave comments	Yes	289	50.2
	No	245	42.5

From a total of 576, study participants 74% (CI 70.2%-77.5%). were dissatisfied with outpatient department services at public health facilities in Hawassa, city administration. The overall satisfaction was calculated using mean score. Measuring tools for the dependent variable were tested for association using bivariate and multivariate analysis. where p-value <0.05 were statistically significant (see Figure 4).



**Figure 4. Satisfaction status of clients towards outpatient department services in selected public Hawassa health centers, southern Ethiopia 2023 (N= 576).**

**5.4. Magnitude of client satisfaction with outpatient department services**

Among a total of 576 study participants those who were very satisfied with the waiting time to receive health care service were 177(30.7%), were 262(45.5%) satisfied, while neutral, dissatisfied and very dissatisfied were 5(0.9%),73(12.7%), and 59(10.2%). Other measures were also included (see table 5).

**Table 5. Measurement tools used to determine client’s satisfaction with outpatient department services at the selected public health centers in Hawassa city, SouthernEthiopia,2023 (N=576).**

Measurement tools	Very satisfied N (%)	Satisfied N (%)	Neutral N (%)	Dissatisfied N (%)	Very dissatisfied N (%)
How do you rate your satisfaction level with waiting time to receive health care service	177(30.7)	262(45.5)	5(0.9)	73(12.7)	59(10.2)
How do you rate your satisfaction with provider’s discussion on problem concerns about your health condition?	161(28.0)	301(52.3)	7(1.2)	54(9.4)	53(9.2)
How do you rate your satisfaction with privacy maintained during examination?	400(69.4)	134(23.3)	8(1.4)	14(2.4)	20(3.5)
How do you rate your satisfaction with sufficient investigations that are available?	173(30.0)	286(49.7)	58(10.7)	34(5.9)	25(4.3)

How do you rate your satisfaction with Information given to you about the diagnosis?	171(29.7)	292(50.7)	13(2.3)	51(8.9)	49(8.5)
How do you rate your satisfaction with cleanness of the facility?	78(13.5)	403(70.0)	3(0.5)	67(11.6)	25(4.3)
How do you rate your satisfaction with providers' greeting and friendly approach?	125(21.7)	215(37.3)	11(1.9)	115(20)	110(19.1)
How do you rate your satisfaction with providers' knowledge to perform the health care?	120(20.8)	374(64.9)	16(2.8)	37(6.4)	29(5)
Did you get all prescribed drugs in the health center?	57(9.9)	143(24.8)	97(16.8)	63(10.9)	216(37.5)

#### 5.5. Magnitude of accessibility towards outpatient department services

Out of 576 total study participants clients who were very satisfied, satisfied, neutral, dissatisfied and very dissatisfied were 152(26.4%),359(62.3%), 14(2.4%), 30(5.2%) and 21(3.6%) consecutively among other tools which are listed below (see table 6).

**Table 6. Magnitude of accessibility towards outpatient department services at public health facilities in Hawassa city administration, southern Ethiopia 2023 (N=576).**

Measurement tools	Very satisfied N (%)	Satisfied N (%)	Neutral N (%)	Dissatisfied N (%)	Very dissatisfied N (%)
How do you rate your satisfaction with the opening time of the facility?	152(26.4)	359(62.3)	14(2.4)	30(5.2)	21(3.6)
How do you rate your satisfaction with the service charge?	427(74.1)	104(18.1)	16(2.8)	16(2.8)	13(2.3)

How do you rate your satisfaction with the health insurance service?	94(16.3)	22(3.8)	447(77.6)	9(1.6)	4(0.7)
How do you rate your satisfaction with effective working procedure?	135(23.4)	341(59.2)	6(1.0)	57(9.9)	37(6.4)
How do you rate your satisfaction with the distance of the facility?	133(23.1)	300(52.1)	5(0.9)	117(20.3)	21(3.6)
How do you rate your satisfaction with availability of transport?	146(25.3)	274(47.6)	9(1.6)	79(13.7)	68(11.8)

#### 5.6 Factors associated with client satisfaction with outpatient department services at selected public health facilities.

Logistic bi-variate regression was conducted, where twenty variables were found to have statistically significant association with client's satisfaction with outpatient department services which are age, occupational status, monthly income, number of visitation, leading signs, timely registration service, triage services, appropriate greetings from health care providers, treated with respect, adequate information, getting all laboratory orders, privacy maintained, getting all prescribed drugs, service recommendations for a closer person, clean environment maintenance, health education provision, presence of refreshing enough vegetations, latrine sanitation, examination rooms, and last but not least a place (setup) where they could leave their comments, all having p-value less than 0.25. Nevertheless, according to the findings of multivariable logistic regression eight among twenty variables were found to be statistically significant such as appropriate greeting from the health care provider, getting adequate information on treatment, getting all laboratory orders, getting all prescribed drugs, recommendation of service, cleanness of facility environment and happiness with latrine sanitation.

Respondents who said yes to appropriate greeting from health care providers were 4.84 times more likely to be satisfied [AOR 4.840 (2.407,9.732)]. Similarly, when compared to those who said no to getting adequate information on their treatment participants responding yes were 7.57 [AOR 7.575(3.085,18.601)] times more likely to be satisfied. In the same way, study participants who said yes to getting all laboratory orders within the health center were 4.92 [AOR 4.921(1.340,18.072)] times more likely to be satisfied. In addition, respondents who said yes to

acquiring all prescribed drugs from the health centers pharmacy were 4.38[AOR 4.380(1.571,12.213)] times more likely to be satisfied. Also, study participants whose responses to recommendation of service they used to a family or friend in comparison those who responded as yes were 2.845[AOR 2.845(1.177,6.881)] times more likely to be satisfied. In the same way, participants with the response of yes to facilities cleanness of environment were 4.767[AOR 4.767(1.285,17.686)] times more likely to be satisfied. As well study participants answer us yes towards happiness with latrine sanitation were 2.622[AOR 2.622(1.243,5.531)] times more likely to be satisfied (see table 7).

**Table 7. Factors associated with client satisfaction with outpatient department services respondents at public health facilities in Hawassa town, Southern Ethiopia, 2023.**

Variables	Category	Client Satisfaction		COR (95%)	AOR (95%)	P-value
		Dissatisfied (%)	Satisfied (%)			
Age	18-27	228 (53.5)	94 (62.7)	1.00	1.00	
	28-37	123 (28.9)	42 (28)	1.207(0.790,1.846)	1.075(0.478,2.418)	0.862
	38-47	30 (7.0)	9 (6.0)	1.374(0.628,3.006)	1.596(0.423,6.019)	0.490
	≥48	45 (10.6)	5 (3.3)	3.711(1.428,9.639)	7.921(0.730,85.948)	0.089
Occupational status	Employed	130(30.5)	38(25.3)	1.00	1.00	
	Merchant	58(13.6)	18(12.0)	0.942(0.496,1.787)	2.965(0.726,12.109)	0.130
	Daily laborer	26(6.1)	4(2.7)	1.900(0.624,5.783)	1.151(0.155,8.569)	0.891
	Unemployed	158(37.1)	67(44.7)	0.689(0.435,1.093)	0.951(0.287,3.154)	0.935
	Others specify	54(12.7)	23(15.3)	0.686(0.374,1.260)	0.683(0.209,2.235)	0.529
Monthly income	No income	115(27.0)	49(32.7)	1.00	1.00	
	< 800 ETB	30(7.0)	7(4.7)	1.826(0.751,4.438)	1.058(0.187,5.974)	0.949
	800-1500ETB	66(15.5)	14(9.3)	2.009(1.031,3.912)	1.486(0.327,6.741)	0.608
	>1500	215(50.5)	80(50.3)	1.145(0.751,1.745)	1.145(0.324,4.042)	0.833
Number of visitations	First visit	55(12.9)	29(19.3)	1.00	1.00	
	Second visit	59(13.8)	15(10.0)	2.074(1.006,4.276)	1.517(0.396,5.810)	0.543
	Three visits	27(6.3)	13(8.7)	1.095(0.492,2.437)	1.564(0.349,7.011)	0.559
	Above three visits	285(66.9)	93(62.0)	1.616(0.973,2.683)	1.436(0.545,3.786)	0.464
Leading sign	Yes	330(84.4)	92(64.3)	2.99(1.936,4.646)	2.359(0.991,5.614)	0.052
	No	61(15.6)	51(35.7)	1.00	1.00	

Timely registration service	Yes	371(87.1)	109(72.7)	2.537(1.606,4.008)	0.648(0.309,1.359)	0.251
	No	55(12.9)	41(27.3)	1.00	1.00	
Triage service	Yes	265(78.4)	65(58.0)	2.625(1.664,4.141)	1.829(0.869,3.852)	0.112
	No	73(21.6)	47(42.0)	1.00	1.00	
Provision of welcoming greetings	Yes	301(70.7)	125(29.3)	7.354(4.804,11.258)	4.840(2.407,9.732)	0.001**
	No	37(24.7)	113(74.3)	1.00	1.00	
Treated with respect	Yes	401(94.1)	105(70.0)	6.874(4.030,11.726)	1.365(0.448,4.155)	0.584
	No	25(5.9)	45(30.0)	1.00	1.00	
Provision of adequate information	Yes	380(89.2)	68(45.3)	9.962(6.391,15.526)	7.575(3.085,18.601)	0.001**
	No	46(10.8)	82(54.7)	1.00	1.00	
Getting all laboratory orders	Yes	288(95.7)	88(89.8)	2.517(1.067,5.939)	4.921(1.340,18.072)	0.016*
	No	13(4.3)	10(10.2)	1.00	1.00	
Privacy maintained	Yes	391(91.8)	121(80.7)	2.677(1.572,4.561)	0.842(0.287,2.474)	0.754
	No	35(8.2)	29(19.3)	1.00	1.00	
Getting all prescribed drugs	Yes	181(42.5)	19(12.7)	5.094(3.034,8.551)	4.380(1.571,12.213)	0.005*
	No	245(57.5)	131(87.3)	1.00	1.00	
Recommendation of service	Yes	413(96.9)	104(69.3)	14.052(7.320,26.974)	2.845(1.177,6.881)	0.020*
	No	13(3.1)	46(30.7)	1.00	1.00	
Cleanness of environment	Yes	407(95.5)	123(82.0)	4.702(2.528,8.746)	4.767(1.285,17.868)	0.020*
	No	19(4.5)	27(18.0)	1.00	1.00	
Provision of health education	Yes	72(16.9)	13(8.7)	2.143(1.150,3.995)	0.412(0.130,1.308)	0.132
	No	354(83.1)	137(91.3)	1.00	1.00	
Refreshing vegetation	Yes	396(93.0)	121(80.7)	3.164(1.826,5.481)	1.711(0.547,5.346)	0.356
	No	30(7.0)	29(19.3)	1.00	1.00	
Latrine sanitation	Yes	256(72.9)	55(43.3)	3.528(2.312,5.383)	2.622(1.243,5.531)	0.011*
	No	95(27.1)	72(56.7)	1.00	1.00	
Examination room	Yes	392(92.0)	115(76.7)	3.509(2.095,5.877)	0.834(0.262,2.650)	0.758
	No	34(8.0)	35(23.3)	1.00	1.00	
Set up to	Yes	236(60.4)	53(37.1)	2.586(1.741,3.839)	1.902(0.931,3.886)	0.078

leave comments	No	155(39.6)	90(62.9)	1.00	1.00	
Note: *Significant for P<0.05; **Significant for P<0.001; ***Significant for P<0.0001; COR is crude odds ratio; AOR is adjusted odds ratio						

## 6. DISCUSSION

Client's satisfaction surveys are crucial in acquiring a comprehensive understanding of the client's need and their opinion of the service received. This study was conducted with the objective of determining client's satisfaction with outpatient department services and associated factors at public health facilities in Hawassa town, Sidamma region, Southern Ethiopia 2023. The study found that four hundred twenty-six of total respondents (74%) were dissatisfied. Age, occupational status, residence, number of visitation, leading signs, timely registration service, triage services, appropriate greetings from health care providers, treated with respect, adequate information, getting all laboratory orders, privacy maintained, service recommendations for a closer person, clean environment maintenance, health education provision, presence of refreshing enough vegetations, latrine sanitation, examination rooms, and last but not least a place (setup) were they could leave their comments were factors significantly associated with clients satisfaction with outpatient department services.

In this study, prevalence of client's satisfaction with outpatient department services was 74% which was lower than a study conducted in Cambodia 93.5%(36). the differences in outcomes between these studies may be due to socio-economic and client's experience towards outpatient department service differences among the two countries, whereas the time difference at which the studies were conducted could also play a role since the provision of health service increases from time to time and people's expectation of quality health care service demands also increases.

Another study conducted in North Gonder found that 56.1%(5) of overall client satisfaction and a study conducted in wolkita, southern Ethiopia showed an overall satisfaction of 66.5% (17)which is lower than this study. This might be due to time frame difference between the two studies, growing inflation in our country which lead to a major socio-economic level of

difference among the society and increasing expectations to quality health care provision could be listed out as the probable reasons, also cultural differences of communities of study areas.

Other studies conducted in other parts of Ethiopia on client satisfaction showed the following results, a study from Jimma (South-West Ethiopia) revealed over all client satisfaction to be 27.8%(19),48.2%(4) a study conducted in Awi Zone, North West Ethiopia,63.4%(37) a study conducted in Negele Arsi Woreda, West Arsi Zone Ethiopia, the overall client satisfaction was 58.16 and 68.84%(38) at regular and private wing, East Wollega Zone, Oromia regional state, Western Ethiopia,47%(16) at Yekatit 12 Hospital Medical College, Addis Ababa, Ethiopia, all of the above studies showed a relatively low value to this study. Moreover, some studies conducted in our country showed a higher magnitude of an overall client satisfaction from Gonder and Jimma respectively was 75.4%(22) and 77%(39). These relatively marked differences share their own reasons which may be explained as differences in study design, study area, socioeconomic status, type of service, number of OPD'S and period at which the study was conducted.

Significant association was stated in this study between client's satisfaction and provision of a welcoming greeting from a health care provider client's which said yes were 4.84 times more likely to be satisfied, when compared to those who said no to getting adequate information on their treatment participants responding yes were 7.57 times more likely to be satisfied. In the same way, study participants who said yes to getting all laboratory orders within the health center were 4.92 times more likely to be satisfied. In addition, respondents who said yes to acquiring all prescribed drugs from the health centers pharmacy were 4.38 times more likely to be satisfied. Also, study participants whose responses to recommendation of service they used to a family or friend in comparison those who responded as yes were 2.845 times more likely to be satisfied. In the same way, participants with the response of yes to facilities cleanness of environment were 4.767 times more likely to be satisfied. As well study participants answer which was yes towards happiness with latrine sanitation were 2.622 times more likely to be satisfied. Similarly, in the study conducted in Addis Ababa patients satisfied with the availability of clean latrine were three times more likely to be satisfied(25).

The ability to make educated health decisions is provided by education for patients. A patient who is informed is more aware of what "ideal" care entails and is less likely to accept the

provision of subpar services. About 33.3% of participants are college and above, however the other finding of this study was that educational status has and time spent at the health center has no association with client's satisfaction which has the same result as the study done in Jimma medical center (19).

Which has a difference from the research done in Greece, Athens (15) the discrepancy may be accounted to the difference in the self-report responses which the clients gave, the method used in data collection, study design and time period the studies were conducted in.

The likelihood of this findings being either similar or different has been discussed as such.

## 7. STRENGTHS AND LIMITATIONS OF THE STUDY

### 7.1. Strength

This study or research has put into consideration and addressed a crucial area which could be used as input to the plan that our country must ensure quality health care. And most of the research done on this title are focused on hospitals and those done on health centers are focused on a specific part. However, this research focuses on the overall aspects not only on one part. This research has used a primarily collected data with adequately large sample size. Respondents were interviewed at exit of the health centers which gave them more freedom to respond freely, away from the encounter of health care providers.

### 7.2. Limitations

The study has excluded hospitals and non-governmental health facilities. In this research, a cross-sectional study design was employed, which can only provide an association and not a causal explanation.

## 8. CONCLUSIONS AND RECOMMENDATIONS

### 8.1. Conclusion

The magnitude of client satisfaction status was high, among outpatient department service users in public health centers of Hawassa city administrators which were showing disparities and slight similarities with studies conducted in some parts of Ethiopia. Welcoming greeting from the health care provider, Provision of adequate information on treatment, getting all laboratory orders, getting all prescribed drugs, recommendation of service, cleanness of environment and latrine sanitation were factors independently associated client's satisfaction with outpatient department services.

### 8.2. Recommendations

**To Health Centers:**

To acquire the quality of health care which the country is working on it is crucial to give a special focus on client's satisfaction. Without being able to address factors which are important to our clients it's going to be a clear wastage of time on trying to give an improved service to the consumers. The health care providers should be given training on how to manage clients need in a way that will help to keep the motivation alive. I do not want to pass without appreciating Adare health center for having a design which is suitable for the disabled.

**To Government and Non-Governmental Organizations: -**

I would like to recommend to the government to consider making the design of the health centers more suitable for the disabled since it is crucial to be inclusive and for non-governmental organizations to consider such projects that help the public health facilities to create a suitable environment for the disabled. It is also important to have a continuous assessment on what consumers need and how their needs could be incorporated with the work plan and transformation plan of both parties. It is also best to identify where the problem is on the shortage of drug supplies and get into action.

**Researchers: -**

Researchers should consider on finding on conducting further research to identify variables that may significantly determine client's satisfaction with outpatient department services, such as including variables considering the disabled.

**Federal Ministry of Health: -**

At national level it is important to assess whether quality for health care is being practiced from the lower to the higher hierarchy of health care providers.

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## ANNEXES

### PHARMA COLLEGE HAWASSA CAMPUS SCHOOL OF PUBLIC HEALTH

#### Annex 1: -INFORMATION SHEET AND CONSENT FORM

Information Sheet and Consent Form Prepared for Participants from Hawassa, Ethiopia That Studies for A Study On client satisfaction with outpatient department services at public health centers and associated factors in Hawassa town, sidamma region, southern Ethiopia at Hawassa.

**Introduction:** This Information Sheet and Consent Form Is Prepared by The Investigator Whose Main Aim Is to A Study On client satisfaction with outpatient department services at public health centers and associated factors in Hawassa town, sidamma region, southern Ethiopia at Hawassa.

The Investigator Is MPH Student from Pharma University Collage:

**Procedures:** For A Study I Invite You To Take Part In My Study. If You Are Willing To Participate In This Study, A Study On Client Satisfaction With Outpatient Department Services And Associated Factors At Public Health Centers Health In Hawassa Town, Sidamma Region, Southern Ethiopia At Hawassa. You Need To Understand And Sign The Consent Form. For Those Patients Who Are In A Condition Where They Cannot Respond The Primary Care Taker Can Answer The Questions With Their Consent.

**Risk and/or Discomfort:** By participating in this study, you may feel that it has some Discomfort specially on wasting your time (about 10-15 minutes) but if you comparing its Potential benefits it contributes to the overall improvement of client satisfaction with outpatient department services. There is no risk in participating in this research project.

**Confidentiality and Anonymity** The information that we collect from this research project was be kept confidential by that your name, adders was not be listed in the research and was arranged by coding system and was kept under pass word protected system which does not reveale to anyone except the principal investigator.

**Right to Refuse or Withdraw** You have the full right to refuse for participating (you can choose not to respond some or all of the questions) if you do not wish to answer and also you have the full right to withdraw from this study at any time of interview period. Are you voluntary to participate on the study? Yes-..... No-.....  
If no what is your reason - .....

**Persons to contact:** If you have any question, you can contact any of the following individuals and you may ask at any time you want.

PI: Bezawit Workneh phone: 09 62 23 95 41

Name and signature of data collector

Name ..... signature..... date.....

ANNEX 2 ENGLISH QUESTIONEER

Assessment

Instruction: Choose the answer that seems best for you from the alternatives that are under each question and for those that you give direct answer.

CODE: \_\_\_\_\_

**PART 1: SOCIO DEMOGRAPHIC CHARACTERISTICS**

Code	Variables	Description/ categories	Skip Pattern
1	Age	_____	
2	Sex	1. Female      2. Male	
3	Marital status	1. Never married    2. Married    3. Divorced 4. Widowed    5. Separated	

4	Religion	1.Orthodox 2. Muslim 3. Protestant 4. Catholic 5. Other's specify	
5	Educational Status	1. No formal education 2. Can read and write 3. primary school (1-8 grade) 4.Secondary school (9-12 grade) 5. College/ Above	
6	Occupational Status	1.Employed (gov't or NGO) 2.Merchant (self-employed) 3.Unemployed (Student, housemaid) 4. Daily laborer 5. others specify	
7	Partners occupational status	1.Employed (gov't or NGO) 2.Merchant (self-employed) 3.Unemployed (Student, housemaid) 4. Daily laborer 5. others specify	
8	Residency	1. Rural 2. Urban	
9	Monthly income	1. does not have any 2 <8003.801-1504.>1500	
Other's specify for occupation and partners occupation indicates Private, Farmer, CSW, Driver, Cajoler, Housemaid, cook, adjutant, porter, Pastor, Prieste, Retirement, House rent, Waitress/er Adventist, hawaryate, joba, Pagan, Catholic			

**Part two: Client's experience towards OPD'S services**

1	Number of visitations	1.New (first visit) 3.Third visit 2.Second visit 4. Above three visits
2	What kind of service are you looking for today?	1. ANC 3.OPD 5. Emergency 2. Under five OPD 4. Family planning 6.EPI 7. Medical Service

3	Did you get leading signs while entering the health center?	1.yes 2.no	Skip Pattern
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4	Did you get a timely registration service?	1. yes 2. no	
5	Did you receive a triage service?	1. Yes 2. no	
6	Did the health care provider welcome you with appropriate greetings?	1. yes 2. no	
7	Do you think you were treated with respect?	1. yes 2. no	
8	Did you receive adequate information on your treatment?	1. Yes 2. No	
9	Did you get all laboratory orders?	1. yes 2. no	
10	Do you think your privacy was maintained?	1. yes 2. no	
11	Did you get all prescribed drugs at the health center?	1. yes 2. no	
	Would you recommend the same service for another person (family or friends)?	1. yes 2. no	

**Part Three: Health Facility Related**

1.	Do you think the facility maintained a clean environment?	1. yes 2. no	
2.	Did you receive health education while your stay at the health facility?	1. yes 2. no	
3.	Do you think the facility is refreshing enough with its	1. yes 2. no	

	vegetation formation?		
4.	Were you happy with the latrine sanitation?	1.yes 2.no	
5.	Were you happy with the examination rooms?	1.yes 2.no.	
6.	Did you get a setup where you could leave your comments?	1.yes 2.no	

**Part Four: client satisfaction with outpatient department services**

1.	Are you satisfied with the outpatient department services?	1.Very satisfied 2. satisfied 3. neutral 4. dissatisfied 5. very dissatisfied	
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Q/ N	Question	1.very satisfied	2. satisfied	3. Neutra l	4. dissatis fied	5.very dissatis fied
2.	How do you rate your satisfaction with waiting time?					
3.	How do you rate your satisfaction with provider's discussion on problem concerns about your health condition?					
4.	How do you rate your satisfaction with privacy maintained during examination?					
5.	How do you rate your satisfaction with sufficient investigations that are available?					
6.	How do you rate your satisfaction with Information given to you about the diagnosis?					

7.	How do you rate your satisfaction with cleanness of the facility?					
8.	How do you rate your satisfaction with					

	providers' greeting and a friendly approach?					
9.	How do you rate your satisfaction with providers' knowledge to perform the health care?					
10.	Did you get all prescribed drugs in the health center?					

**Part Five: Accessibilities towards services**

1.	Are you satisfied with the outpatient department services results?	1. Very satisfied 2. satisfied 3. neutral 4. dissatisfied 5. very dissatisfied	
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Q/ N	Question	1.very satisfied	2. satisfied	3. Neutra l	4. dissatis fied	5.very dissatis fied
2.	How do you rate your satisfaction with the opening time of the facility?					
3.	How do you rate your satisfaction with the service charge?					
4.	How do you rate your satisfaction with the health insurance service?					
5.	How do you rate your satisfaction with effective working procedure?					
6.	How do you rate your satisfaction with the distance of the facility?					

7.	How do you rate your satisfaction with availability of transport?					
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**Thank you for your participation!**

Annexes 2: Amharic version questioner

ፋርማሌሌጅ፣ ሀዋሳ፣ ካምፓስ

የማህበረሰብ ጤና መምሪያ

ሰላምደህና አደሩ/ዋሉ

ስሜ \_\_\_\_\_ ነው። እኔው/ሪትቤ ዘዊት ወርቅነህን ወክቼ ነው።፣ እሷ በፋርማሌሌጅ፣

የማህበረሰብ ጤና ትምህርት ክፍል ሁለተኛ ደረጃ የማህበረሰብ ጤና ትምህርት ተማሪ ነች።

በዚህ ምመሰረት በማህበረሰብ ጤና የማስተር ስዲ ግሪፎን ለመጨረስ በሀዋሳ ከተማ በተመረጠ የህዝብ ጤና ተቋማት ውስጥ ተመላላሽ ታካሚዎች ላይ ያላቸውን እርካታ ጥናት በማድረግ ላይ ትገኛለች።



2	የተሳታፊውጾታ	1. ሴት 2. ወንድ	
3	አሁን ያለህበት/ሽበት የትዳር ሁኔታ?	1. ያላገባ 2. ያገባ 3. የተፋታ 4. ባልየሞተባት/በት 5. ሌላ (ይግለጹ)	
4	የተሳታፊው ሃይማኖት?	1. ኦርቶዶክስ 2. ሙስሊም 3. ትሮቲስታንት 4. ካቶሊክ 5. ሌላ	
5	ከፍተኛው የትምህርት ደረጃህ/ሽህንት ነው?	1. መደበኛ ትምህርት ያልወሰደ 2. ማንበብ እና መጻፍ የሚችል 3. የመጀመሪያ ደረጃ (1-8 ክፍል) 4. ሁለተኛ ደረጃ (9-12 ክፍል) 5. ኮሌጅ እና ከዚያ በላይ	
6	አሁን የሚሰሩት የሥራ አይነት	1. ተቀጥሮ (መንግስት ወይም መንግሥታዊ ያልሆነ ድርጅት) 2. ነጋዴ 3. የቀንሰራተኛ 4. ሥራ አጥ (ተማሪ፣ የቤት አመባት) 5. ሌላ .....	
7	የአጋርህ/ሽየሚሰሩት የሥራ አይነት	1. ተቀጥሮ (መንግስት ወይም መንግሥታዊ ያልሆነ ድርጅት) 2. ነጋዴ 3. የቀንሰራተኛ	

		4. ሥራአጥ (ተማሪ፣የቤትአመቤት) 5. ሌላ .....	
8	የመኖሪያስፍራ	1. ገጠር 2. ከተማ	
9	ወርሃዊየገቢግምት (ቡብር )	1. ገቢየለውም 2. <800 3. 801-1500 4. >1500 5. ከዛባላይ	

**ክፍልሁለት: ደምበኛውብተመላላሽህክምናክፍልከነበረውቆይታ**

1	ብተቆዋሙአገልግሎትንሲጠቀሙ	1. የመጀመሪያጊዜው 3. ለሶስተኛጊዜው 2. ለሁለተኛጊዜው 4. ከዛባላይ
2	ምንአይነትአገልግሎትለመጠቀምነውተቆዋሙንየመረጡት?	1. ለእርግዝናክትትል 3. ለተመላላሽህክምና 2. ለህጻናትህክምና 4. ለወሊድመቆጣጠሪያ 5. ለድንገተኛ6. ክትባት 7. ምዲካልአገልግሎት

3	ወይምትመሄድ፣ይፈፈልጋለሁየሚልፅሁፍወደተቆዋሙሲገቡአገኝተዋል?	1. አዎ 2. አይ
4	በካርድክፍልሰአቱንየጠበቀሙስተንግዶአገኝተዋል?	1. አዎ 2. አይ
5	ቦትራጅ /በልየታክፍልውስጥበአግባቡተስተናግደዋል?	1. አዎ 2. አይ
6	ባለሙያውበህክምናክፍልውስጥሰላምታአቅርቦሎታል?	1. አዎ 2. አይ
7	በአክብሮትተስተናግጃለሁብለውያስባሉ?	1. አዎ

		2.አይ	
8	በሚደረግሎት ህክምና ላይ በቁጥጥር ደረጃ ጎልቶ ስለሚገኝ ሰው ምን ዓይነት ጥራት ይኖረዋል?	1.አዎ 2.አይ	
9	ግላዊነቱ በተጠበቀ መልኩ አገልግሎት ለሚሰጥ ሰው ምን ዓይነት ጥራት ይኖረዋል?	1.አዎ 2.አይ	
10	በተቆየው ሁሉም የሥራ ስራዎች ላይ ለሚሰጥ ሰው ምን ዓይነት ጥራት ይኖረዋል?	1.አዎ 2.አይ	
11	በተቆየው የፈለጉትን አገልግሎት አረጋግጥዎትዎታል?	1.አዎ 2.አይ	
13	በተቆየው የታዘዘሎትን መዳኒቶች በሙሉ አረጋግጥዎትዎታል?	1.አዎ 2.አይ	
14	እርስዎ የተጠቀሙትን አገልግሎት ለሌላ ሰው በተቆየው እዲጠቀም ይሞክሩልኝ?	1.አዎ 2.አይ	



ቁ		ረከቻሉ	2.አረከቻሉ	ገለልተኛ	አልረከሁም	ምንምአልረከሁም
2.	አገልግሎቱን ለማግኘት በቆዩበት ስድስት ሰዓት ምን ያህል ረከተዎል?					
3.	ባለሙያው ስልጠናዎን ባደረገው ጊዜ ደስተኛ ነኝ?					
4.	በምርመራው ቅጽ ግላዊነቱ ምን ያህል የተጠበቀ ነበር?					
5.	በቀደምት ምርመራ አይነቶች በመኖሪያው ላይ ያሉት እርካታ?					
6.	ስለ ህመሙ በተሰጠው ረጅም ጊዜ ምን ያህል ረከተዎል?					

7.	በተቆረቆረ ህክምና ላይ ምን ያህል ረከተዎል? ?					
8.	በባለሙያው አቀባበል ስላለው ታሰባጥሎ ምን ያህል ረከተዎል? ?					
9.	ባለሙያው ባለው ሙያዊ እውቀት ላይ ምን ያህል ረከተዎል?					
10.	በተቆረቆረ የታዘዘ ስራ ላይ ምን ያህል ረከተዎል?					

**ክፍል አምስት: ከጤና ተቆረቆሮ አገልግሎት ደረጃ ስንጋሮ የተያያዙ ስተጋብሮች**

1.	በተመላላ ሽህክምና ክፍል ላይ ያሉት እርካታ?	1. እጅግ በጣም አረከቻሉ 2. አረከቻሉ 3. ገለልተኛ 4. አልረከሁም 5. ምንም አልረከሁም			
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ተ. ቁ	ጥያቄ	1. እጅግ በጣም አረክቻለሁ	2. እረክቻለሁ	3. ገለልተኛ	4. አልረክሁም	5. ምንም አልረክሁም
2.	አጠቃላይ በተቁዋሙ የስራ መከፈቻ ስህተት ላይ?					
3.	ለ አገልግሎት በከፊሉ ትኩረት ይሰጣል?					
4.	በጤናማ መደብ ላይ ለአገልግሎት እርካታ?					
5.	ባለሙያው ስራውን በአግባቡ መስራቱ ላይ?					
6.	ተቁዋሙ ከመኖሪያ ጋር ለውሳኔ አርቀቅ ላይ?					
7.	ወደ ተቁዋሙ ባለው ትራንስፖርት ላይ?					

**ለተሳትፎ ያለው ስርዓት ስለሆነ::**