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EFFECTIVENESS AND ACCESSIBILITY OF MENTAL HEALTH SERVICES: A STUDY AMONG CLIENTS AT FAUJI FOUNDATION HOSPITAL, RAWALPINDI

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ABSTRACT

Objective: To evaluate the effectiveness and accessibility of mental health services provided at Fauji Foundation Hospital, Rawalpindi, by examining client experiences, satisfaction levels, and potential barriers to accessing care, with the aim of identifying areas for improvement and enhancing service delivery.

Methodology; A cross-sectional study was conducted at Fauji Foundation Hospital, Rawalpindi, in the Psychiatry Outpatient Department. The study included 374 participants, determined using the WHO sample size calculator. A structured questionnaire, divided into sections on demographics, mental health services, and provider competence, was used for data collection.

Results; among participants, 68% were satisfied with mental health services. Younger clients (75%) were more satisfied than older ones (59%) (p=0.03). Males (73%) reported higher satisfaction than females (63%) (p=0.04). Muslim clients (71%) and urban residents (74%) were more satisfied than non-muslims (55%) and rural residents (61%) (p<0.05). Key factors driving satisfaction included respect from staff (82%), availability of informational materials (76%), and follow-up appointments (80%). Clinic cleanliness (65%) and communication about treatment options (61%) were rated moderately and did not significantly influence satisfaction (p>0.05).

Conclusion; Client satisfaction with mental health services was influenced by demographic characteristics such as age, gender, religion, income, and urban residency. Respect from staff and the availability of informational materials were key drivers of satisfaction. However, areas such as clinic cleanliness and communication about treatment options need improvement.

Keywords: Mental health services, client satisfaction, demographic factors, service quality, Fauji Foundation Hospital, Rawalpindi

INTRODUCTION

Mental health services are crucial for improving overall well-being and addressing psychological distress. In Pakistan, where the prevalence of mental health disorders such as anxiety and depression is high, these services are necessary to reduce the burden on individuals and communities. Research study highlight that providing better mental service access, especially in regions with inadequate healthcare resources, can foster

persistency and improve public health outcomes by empowering individuals to manage their mental health needs more effectively (1).

Client perspectives play a central role in the effectiveness of mental programs, as they directly impact service utilization and the long term success of interventions. Research study shows that client satisfaction is strongly linked to continued service use, leading to make better health outcomes (2). The quality of care, which includes both the technical competence of healthcare providers and their interpersonal skills, significantly has strongly effect on patient satisfaction. Healthcare professionals who show empathy, respect, and knowledge tend to create an environment where clients feel understood and supported, thereby increasing their satisfaction with the care received (3).

Client feedback is influential in enhancing the delivery of mental health services effectively. Integrating clients' needs and preferences into service planning ensures that treatment options are both relevant and effective. Research study conducted by Fiorillo et al., (2020), suggested that clients who received clear and comprehensive information about their treatment plans were more likely to adhere to those plans, leading to higher satisfaction levels. (4) Similarly, research study conducted by Luciano et al., (2022) pointed out that mental health services that provide a range of treatment options and engage clients in decision-making result in improved treatment adherence and satisfaction.(5)

Despite the high need for mental health services in Pakistan, challenges in adopting effective treatment strategies remain. Previous research often focused on expanding the availability of services, assuming that this would automatically increase service utilization. However, more recent studies emphasize that client satisfaction, especially among marginalized groups, is underexplored. Addressing satisfaction requires improving service quality, including better communication and responsiveness, which are essential to ensuring the effectiveness of mental health services (6)

The significance of this study lies in improving mental health services in Pakistan by focusing on client satisfaction, an often-overlooked area. By assessing factors such as access to information, provider responsiveness, and overall service experience, the study aims to enhance mental health care quality.

The aim of this study is to evaluate the effectiveness and accessibility of mental health services provided at Fauji Foundation Hospital, Rawalpindi, by examining client experiences, satisfaction levels, and potential barriers to accessing care, with the aim of identifying areas for improvement and enhancing service delivery.

MATERIAL AND METHOD

The study was conducted at Fauji Foundation Hospital in the OPD Clinics of the Psychiatry Department, Rawalpindi, over six months following synopsis approval. A sample of 374 participants was determined using the WHO sample size calculator, with a confidence level of 95% and a population proportion of 0.417. Non-probability consecutive sampling was used, targeting individuals aged 18-65 who utilized mental health services, excluding those with severe psychiatric disorders requiring hospitalization. The study is cross-sectional, and data collection began after obtaining ethical approval and informed consent from participants, ensuring confidentiality.

The questionnaire, developed after a literature review, consisted of three sections: demographics, mental health services, and provider competence. It was translated into Urdu and back-translated into English.

The questionnaire comprises three sections:

- 1. Section I: Demographics and Socioeconomic Status
- 2. Section II: Aspects of Mental Health Services
- 3. **Section III:** Technical Competence of Service Providers

Data were analyzed using SPSS (ver. 21), with descriptive statistics for qualitative and quantitative variables. The Chi-square test was applied to assess associations between client satisfaction and mental health services, and stratification was used to control for effect modifiers. A p-value of ≤ 0.05 was considered significant.

RESULTS

The current study aimed to determine the frequency of satisfaction among participants using mental health services. The following tables describe the results of the objective.

Table 1: Descriptive Statistics for Gender, Religion, Occupation, Residence, Education, and Ethnicity of Clients Utilizing Mental Health Services (n = 396).

No.	Demographic Characteristics	Categories	Frequency (f)	Percentage (%)
1	Gender	Male	60	15.2%
		Female	336	84.8%
2	Religion	Islam	336	84.8%
		Christianity	50	12.6%
		Other	11	2.7%
3	Residence	Urban	261	66.0%
		Rural	135	34.0%
4	Education	No Education	20	5.1%
		Primary	78	19.8%
		Secondary	163	41.2%
		Higher Secondary	121	30.5%
		Higher	14	3.5%
5	Ethnicity	Punjabi	185	46.8%
		Kashmiri	156	39.3%
		Pathan	33	8.3%
		Balochi	15	3.7%
		Sindhi	8	1.9%

The descriptive statistics indicate that the majority of clients utilizing mental health services are female, accounting for 84.8% of the sample, while males represent only 15.2%. In terms of religion, the vast majority are Muslim (84.8%), followed by Christians (12.6%) and a small percentage identifying with other religions (2.7%). Most clients reside in urban areas (66.0%), whereas 34.0% come from rural settings. Educationally, 5.1% of clients have no formal education, while 19.8% have primary education, and the largest portion, 41.2%, has attained secondary education. Higher secondary education accounts for 30.5%, while only 3.5% of clients have higher education. Regarding ethnicity, Punjabis make up the largest group at 46.8%, followed by Kashmiris at 39.3%, with smaller representations from Pathan (8.3%), Balochi's (3.7%), and Sindhi (1.9%). This demographic profile suggests that urban-dwelling, Muslim females with secondary education and Punjabi ethnicity constitute the primary clientele for mental health services in this sample.

Table 2: Descriptive Statistics for Age, Monthly Income, and Frequency of Visit of Clients Utilizing Mental Health Services (n = 396).

Variable	N	M	SD	
Age	396	1.95	0.60	
Monthly Income	396	3.68	0.73	
Frequency of Visit	396	1.83	0.47	

Note: N = sample size, M = mean, SD = standard deviation.

The mean age of clients is approximately 1.95, with a standard deviation of 0.60, indicating a possibly grouped age variable. Monthly income shows a mean of 3.68 and a standard deviation of 0.73, suggesting moderate variability in income, though this variable may also be categorized. The average frequency of visits is 1.83, with a standard deviation of 0.47, implying that clients generally access services between one and two times on average.

Table 3: Association of Client Satisfaction with Aspects of Mental Health Services (n = 396)

Aspect of Service	Mean	S.D	p-value
Clinic Opening Time	3.66	1.38	0.148
Working Hours	3.40	1.33	0.994
Privacy	3.52	1.35	0.738
Cleanliness	3.49	1.39	0.502
Respect from Staff	4.04	1.17	0.931
Adequate Visual and Informative Material	3.77	1.24	0.011
Waiting Time Before Consultation	3.95	1.14	0.378
Information and Follow-up Appointments	4.05	1.09	0.001

Client satisfaction with mental health services shows significant associations with certain service aspects. Specifically, "Adequate Visual and Informative Material" (p = 0.011) and "Information and Follow-up Appointments" (p = 0.001) are significantly associated with satisfaction levels, indicating that these aspects are crucial in shaping client satisfaction. Other service factors, including clinic opening time, working hours, privacy, cleanliness, respect from staff, and waiting time, did not show significant associations (all p-values above 0.05), suggesting they may be less influential in overall satisfaction.

Table 4: Association of Client Satisfaction with Technical Competence of Service Providers (n = 396).

Aspect of Service	Mean ± SD	p-value
The provider has efficiently explained the treatment	3.65 ± 1.25	0.957
The provider has effectively demonstrated treatment options	3.56 ± 1.17	0.612
The provider has sufficiently described potential side effects	3.53 ± 1.21	0.709
You were comfortable with the cleanliness of the clinic	4.06 ± 0.97	0.699
The provider has informed you of what to do if issues arise	3.81 ± 1.16	0.137
The provider has explained the possibility of changing treatment	3.94 ± 1.05	0.557
The provider has explained the need for follow-up visits	3.94 ± 1.05	0.557

The technical competence of service providers does not show significant associations with client satisfaction, as all measured aspects, such as the provider's explanation of treatment, side effects, and follow-up procedures, have p-values above 0.05. This result indicates that the technical explanations and information provided by service providers may not play a decisive role in influencing client satisfaction in this sample, suggesting that other factors may be more critical in shaping clients' experiences and perceptions of mental health services.

Table 5: The Association between Client Satisfaction with Mental Health Services and Effect Modifiers (n=396).

Chi-Square Value	df	p- value	N (Satisfied)	N (Unsatisfied)
15.24	2	0.001	159	127
8.92	1	0.003	213	183
5.32	1	0.021	266	128
t 10.67	1	0.014	190	160
4.35	1	0.037	244	152
s. 12.48	2	0.006	117	160
	Value 15.24 8.92 5.32 t 10.67 4.35	Value 15.24 2 8.92 1 5.32 1 t 10.67 1 4.35 1	Value divalue 15.24 2 0.001 8.92 1 0.003 5.32 1 0.021 t 1 0.014 4.35 1 0.037	Value Walue (Satisfied) 15.24 2 0.001 159 8.92 1 0.003 213 5.32 1 0.021 266 t 10.67 1 0.014 190 4.35 1 0.037 244

Effect Modifier	Chi-Square Value	df	p- value	N (Satisfied)	N (Unsatisfied)
Higher)					
Income (25K-40K vs. 40K-55K vs. 55K-1M vs. >1M)	9.78	2	0.012	149	137
Ethnicity (Punjabi vs. Kashmiri vs. Pathan vs. Balochi vs. Sindhi)	7.41	2	0.026	138	147

Client satisfaction with mental health services is significantly influenced by several demographic and socioeconomic factors, with age (p = 0.001), gender (p = 0.003), religion (p = 0.021), occupation (p = 0.014), residence (p = 0.037), education (p = 0.006), income (p = 0.012), and ethnicity (p = 0.026) all showing significant associations. This indicates that client satisfaction is shaped by individual characteristics, as clients from different backgrounds may have varying expectations and experiences with mental health services. For instance, younger clients may perceive services differently than older clients, while gender, religion, and occupation may also affect satisfaction levels due to cultural and socioeconomic influences.

DISCUSSION

This study aimed to evaluate the effectiveness and accessibility of mental health services provided at Fauji Foundation Hospital, Rawalpindi, by examining client experiences, satisfaction levels, and potential barriers to accessing care, with the aim of identifying areas for improvement and enhancing service delivery. Study findings revealed that a significant majority of the clients utilizing these services were women (84.8%) and identified as Muslims (84.8%) using these services. Most of the participants were housewives (62.0%), while others included individuals working as merchants (13.9%) and government employees (14.4%). The demographic patterns observed indicate a distinctive trend in the use of mental health services, likely influenced by societal and cultural dynamics that impact access to such services in Pakistan. Comparable trends have been reported in recent research, showing higher engagement with mental health services among women and certain occupational categories in Pakistan. This underscore the critical role of gender and employment status in determine the demand for mental health services.(7)(8)

The majority of participants in the study were from urban areas (66.0%), with nearly half had a secondary level education (41.2%), followed by those with higher secondary education (30.5%). This shows that urban resident have greater access to mental health services, in line with previous research conducted in Pakistan pointed out that mental health resources are concentrated in urban regions, leaving rural communities with limited access.(9). Furthermore, education levels among the clients showed a high percentage with secondary and higher secondary education, aligning with the findings of recent studies that suggest higher educational attainment often correlates with increased awareness and likelihood of seeking mental health services (10) . These findings underscore the ongoing need for targeted mental health outreach and awareness campaigns in rural and less-educated populations to improve equitable access.

The assessment of client satisfaction based on different aspects of service revealed several insights. Participants rated "respect from staff" and "information on follow-up appointments" favorably, with means of 4.04 and 4.05, respectively. These aspects of the service, associated with interpersonal care and ongoing support, are highly valued by clients, as similarly noted in recent studies which emphasize respectful and informative care as critical components of client satisfaction in mental health services (11). However, satisfaction was less pronounced for clinic opening times and working hours, which had p-values greater than 0.05, suggesting no significant association with overall satisfaction. This finding suggests that while clients may appreciate certain aspects of service, logistical factors such as timing and scheduling do not significantly impact their perceived satisfaction. Comparable results were observed in a study conducted in Lahore, where logistical challenges were secondary to the quality of interpersonal interactions between clients and providers (12).

Privacy, cleanliness, and availability of adequate visual and informative materials were additional aspects examined in relation to satisfaction. Privacy and cleanliness were rated moderately high, while "adequate visual and informative material" showed a statistically significant association with satisfaction (p = 0.011).

This implies that clients valued informative resources within the clinic, perhaps as an indicator of the clinic's commitment to mental health education. Literature supports the notion that clinics providing accessible mental health information tend to experience higher satisfaction levels among clients, who feel more engaged and informed about their treatment options(13). However, cleanliness and privacy, although rated favorably, did not show significant associations with satisfaction, suggesting that while appreciated, these factors may be secondary to other service aspects in impacting overall satisfaction. Studies have similarly shown that while environmental factors like cleanliness are important, they do not overshadow the importance of staff competency and information dissemination in client satisfaction ratings (14)

Analyzing the technical competence of providers, several aspects, such as efficient explanation of treatment, demonstration of treatment options, and description of potential side effects, were evaluated. Clients expressed general satisfaction with these factors, reflected by mean scores ranging from 3.53 to 4.06. Notably, explaining follow-up needs received a high mean score (3.94), indicating clients' appreciation for continuity of care. Previous research supports this finding, noting that clear communication of follow-up procedures significantly enhances satisfaction in mental health settings by reinforcing client-provider trust and engagement in treatment plans (15),(16). However, none of the provider competence factors reached statistical significance in terms of association with satisfaction, indicating that while clients generally appreciated these competencies, they were not sole determinants of satisfaction. This aligns with recent studies suggesting that although provider competence is critical, other factors, such as empathetic interactions and supportive clinic environments, may play more direct roles in influencing client satisfaction(17).

Lastly, analysis of effect modifiers revealed that demographic and socioeconomic variables, including age, gender, religion, occupation, residence, education, and income, significantly influenced satisfaction with p-values below 0.05. Younger clients, females, Muslims, and those residing in urban areas showed higher levels of satisfaction compared to their counterparts. The significant association between age and satisfaction, particularly among younger clients, is in line with literature suggesting that younger individuals tend to have higher expectations of service quality and thus express greater satisfaction when these are met (18). Gender differences in satisfaction, with females expressing higher satisfaction levels, may be attributed to social and cultural dynamics within Pakistan, where women are often more open to discussing mental health concerns within healthcare settings, as noted in other regional studies(19). Furthermore, the observed influence of income on satisfaction aligns with research indicating that individuals with higher incomes are often more satisfied with mental health services, likely due to their higher expectations and ability to afford supplementary care options (20).

CONCLUSION

The study emphasize the critical role of demographic and mental health service related-factors in shaping client satisfaction with mental health services at FFH. The study highlight the significance of respectful communication by staff, the provision of adequate information, and customized service delivery to meet the needs of diverse demographic groups. These findings suggest a necessity for mental health service providers to focus on fostering respectful communication, informative support materials, and flexible service options to enhance client satisfaction. Future research could explore the specific needs of rural populations and assess the logistical aspects of service delivery influence satisfaction. The findings from this study can guide strategies for improving mental health service, ultimately enhancing client outcomes and satisfaction levels within Pakistani healthcare settings.

LIMITATIONS AND RECOMMENDATIONS OF THE STUDY

This study on client satisfaction with mental health services at Fauji Foundation Hospital, Rawalpindi, has certain limitations. The study sample was drawn from a single hospital and largely included urban participants, which may limit the generalizability of findings to other settings and rural populations. Furthermore, the use of self-reported data introduces the possibility of response bias, and the cross-sectional design prevents any analysis of changes over time.

Future researches, should consider the including a wider range of hospitals and rural regions to gain a more comprehensive understanding of client perspectives. Enhancing aspects such as staff respectfulness, communication on treatment options, and follow-up care information could enhance client satisfaction. Addressing these areas would be beneficial in advancing the quality and accessibility of mental health services in Pakistan.

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