MOBILE CLINIC USERS’ OPINIONS ON HEALTH CARE SERVICE
PROVISION IN THE MULDERSDRIFT AREA, GAUTENG PROVINCE

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Research report submitted to the Faculty of Health Sciences, University of the
Witwatersrand, Johannesburg, in partial fulfillment of the requirements for the degree
of
Master in Public Health
Johannesburg, 2005
DECLARATION

I Amme Mardulate Tshabalala declare that this research report is my own work. It is being submitted in part fulfillment for the degree of Master of Public Health in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination in any other University.

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Amme Mardulate Tshabalala

10th Day of May 2005
DEDICATION

To Almighty God, Jehovah, who supplied me with strength, courage and support to complete the research project.
ABSTRACT

The use of the mobile clinics for rendering health care services in South Africa is part of the services rendered according to the Primary Health Care Service Package that was officially published in 2001. Mobile clinics have been found to be instrumental in rendering of health care especially in the rural and semi-rural areas. In the majority of these areas, the mobile clinic is the only source of health care provision at community level. Lack of well developed infrastructure and poor roads contribute to inaccessibility of health care services in rural and semi-rural areas. Health programmes are often of poor quality or offer incomplete services. Factors such as lack of knowledge of available health care services, satisfaction with the quality and range of services provided, and unavailability of the mobile clinic service when there is a health need, can result in the mobile health care clinic being less utilized.

The purpose of the study was to address the following question: What are mobile clinic users’ opinions on health care service provision in the Muldersdrift area Gauteng Province? To answer the question three research objectives were formulated. These were to: describe the mobile clinic users’ level of service utilization, to assess their level of knowledge of available health care services and to determine their level of satisfaction with the services provided. To achieve the study objectives, an exploratory, descriptive survey was used as the research design. Three sampling techniques were used in this study. Cluster sampling was used for developing sampling framework for the 35 mobile points.
Stratified sampling used to stratification of the mobile points. A non-probability convenience sampling was then used for final selection of the nine mobile clinic points and for selection of a sample size of 94 mobile clinic users’ to be included in the study. Data were analysed using the Statistical Package 7.0.

The results show that the mobile clinic service was optimally utilized, 59% had used the service more than thrice within a period of six months. The majority of participants (89.3%) had knowledge of all the services being offered on the mobile clinic. Very few respondents (19.5%) were aware of the availability of HIV and AIDS counseling and testing on the mobile clinic. All most all the respondents (98.9%) were satisfied the range of services offered on the mobile clinic. Almost half (48.9%) were not satisfied with the service being offered once a month, (4.4%) with the attitude of the staff, (5.3%) with treatment of common ailments and (2%) said the mobile clinic service was bad.
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>DECLARATION</td>
<td>i</td>
</tr>
<tr>
<td>DEDICATION</td>
<td>ii</td>
</tr>
<tr>
<td>ABSTRACT</td>
<td>iii</td>
</tr>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>iv</td>
</tr>
<tr>
<td>TABLE OF CONTENT</td>
<td>vi</td>
</tr>
<tr>
<td>LIST OF FIGURES</td>
<td>x</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>xi</td>
</tr>
<tr>
<td>LIST OF APPENDICES</td>
<td>xii</td>
</tr>
</tbody>
</table>

## CHAPTER ONE: ORIENTATION TO THE STUDY

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0 INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>1.1 Background</td>
<td>4</td>
</tr>
<tr>
<td>1.2 Problem Statement</td>
<td>5</td>
</tr>
<tr>
<td>1.3 Study Purpose</td>
<td>6</td>
</tr>
<tr>
<td>1.4 Objectives</td>
<td>6</td>
</tr>
<tr>
<td>1.5 Significance of the Study</td>
<td>7</td>
</tr>
<tr>
<td>1.6 Operational Definitions</td>
<td>7</td>
</tr>
<tr>
<td>1.7 Conclusion</td>
<td>8</td>
</tr>
</tbody>
</table>

## CHAPTER TWO: LITERATURE REVIEW

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.0 INTRODUCTION</td>
<td>9</td>
</tr>
<tr>
<td>2.1 Primary Health Care (PHC)</td>
<td>9</td>
</tr>
<tr>
<td>2.2 Development of PHC in South Africa</td>
<td>11</td>
</tr>
<tr>
<td>2.2.1 Primary Health Care delivery</td>
<td>13</td>
</tr>
<tr>
<td>2.3.1.1 The district-based PHC system</td>
<td>13</td>
</tr>
<tr>
<td>2.3.1.2 The PHC service package for PHC facilities</td>
<td>14</td>
</tr>
</tbody>
</table>
CHAPTER THREE: RESEARCH METHODOLOGY

3.0 INTRODUCTION 31

3.1 Research Design 31

3.2 Study Population 32

3.2.1 Research setting 32

3.2.2 Target population 34

3.3 Study sample and sampling methods 35

3.3.1 Mobile points 35

3.3.2 Mobile clinic users 37

3.4 Data Collection 38

3.5.1 Data collection methods 38

3.5.2 Data collection tool 39

3.5 The Pilot Study 39
CHAPTER FOUR: RESULTS OF THE STUDY

4.0 INTRODUCTION
4.1. Data Analysis Approach
4.2. Discussion and Findings
  4.2.1 Section A: Demographic data
    4.2.1.1 Age and sex distribution
    4.2.1.2 Employment status
    4.2.1.3 Level of education
  4.2.2 Section B: Utilization of the mobile clinic service and other resources
    4.2.2.1 Frequency of clinic visits
    4.2.2.2 Reasons for not using the mobile clinic service
    4.2.2.3 Alternate source of treatment
  4.2.3 Section C: Mobile clinic users’ knowledge of available services
    4.2.3.1 Knowledge of mobile clinic services
    4.2.3.2 Knowledge of the type of services
    4.2.3.3 Additional services needed
  4.2.4 Section D: Satisfaction with the mobile clinic
    4.2.4.1 Level of satisfaction with the services
    4.2.4.2 Level of satisfaction with the service times
    4.2.4.3 Attitude of the staff
    4.2.4.4 Satisfaction with management of health problems

4.3 Conclusion
CHAPTER FIVE: SUMMARY, MAIN FINDINGS, RECOMMENDATIONS
LIMITATIONS AND CONCLUSION

5.0 INTRODUCTION 66
5.1 Study Summary 66
  5.1.1 Purpose and objectives of the study 66
  5.2.2 Methodology 67
  5.2.3 Population and sample 67
5.2 Main Findings 68
  5.2.1 Demographic data 68
  5.2.2 Mobile clinic service utilization 68
  5.2.3 Level of knowledge of available services 68
  5.2.4 Level of satisfaction with services 70
5.3 Conclusion 71
5.4 Limitations of the Study 73
5.5 Recommendations 74
  5.5.1 Community-based clinical practice 74
  5.5.2 Education 76
  5.5.3 Research 77

REFERENCES 79
# LIST OF FIGURES

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1</td>
<td>Muldersdrift mobile clinic points and number of service users interviewed</td>
<td>44</td>
</tr>
<tr>
<td>4.2</td>
<td>Level of mobile clinic service utilization</td>
<td>50</td>
</tr>
<tr>
<td>4.3</td>
<td>Number of clinic visits preferred by mobile users</td>
<td>62</td>
</tr>
<tr>
<td>4.4</td>
<td>Attitude of staff</td>
<td>63</td>
</tr>
</tbody>
</table>
LIST OF TABLES

Table 3.1 Description of mobile clinic points 33
Table 3.2 Sampling framework used for selecting mobile points 36
Table 4.1 Age and sex distribution of the respondents 44
Table 4.2 Categories of workers interviewed 50
Table 4.3 Education level of respondents 62
Table 4.4 Description of relationship between sex and clinic visits 50
Table 4.5 Alternate sources of treatment 52
Table 4.6 Knowledge of type of services 55
Table 4.7 Relationship between knowledge of services and clinic utilization 56
Table 4.8 Services most satisfied with 60
Table 4.9 Services least satisfied with 61
LIST OF APPENDICES

Appendix A: Muldersdrift map
Appendix B: Interview schedule
Appendix C: Approval from Post graduate committee
Appendix D: Clearance certificate from Committee for Research on Human Subjects
Appendix E: Letter to West Rand District Council Area, Gauteng
Appendix F: Approval from West rand District Council Area, Gauteng
Appendix G: Information letter
Appendix H: Consent form