

Original Research Article

Exploring the Behavioural Attitude of the Employees in the Public Health Care System in the State of Kerala

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ABSTRACT

Healthcare sector is one the major sector in a country and the majority of the Indian populations rely on the public health care sector of the country. The Government hospitals in the states of the country have the best doctors and other employees. The present study intends to measure the behavioural attitude of the employees of the Government hospitals in the state of Kerala towards the patients. The results show that the doctors, nurses and staff of these hospitals have a good positive attitude towards the patients visiting these hospitals. Further, the study also revealed that many of these hospitals lack the essential facilities and hence the patients are to visit the private stores for availing different services.

Keywords: Behaviour, Attitude, Healthcare sector, Government Hospitals.

INTRODUCTION

The behaviour of a person normally reflects beliefs and attitudes. Positive attitudes manifest well-adjusted behaviours. The health sector is one of the most important sectors and is considered to be a sensitive one too. In India, healthcare is one of the largest sectors and comprises of hospitals, medical tourism, medical devices etc. There are a large number of government hospitals in the country and the Indian health care sector is seen to be growing at a brisk pace. In India, the two major components of health care are the private and the public. The public health care sector in India has the facilities like All India Institute of Medical Sciences, Government Medical Colleges, General/District/Taluk hospitals, Primary Health Centers and Community Health Centers. A large part of the population depends on this public sector for their medical needs. Some of the Government hospitals are among the best hospitals in India and the treatment is

provided at taxpayer expense. Most essential drugs are provided free of charge to all patients in these hospitals. Government hospitals provide treatment either free or at minimal charges and are much less when compared with the private hospitals.

The health care officials include doctors, nurses and the staff. The behaviour and attitude of these officials have a major role to play in the patients visiting these hospitals look not only for a physical treatment but also a mental comfort. As quoted by Kumar (2003), ^[1] "The health service is the most corrupt service sector in India, as gauged by people's actual experiences, according to a new survey released by the India office of the international non-governmental organisation Transparency International". There have always been issues raised on the behavioural attitude of the employees in the government hospitals. Perception of the people also is skewed that the doctors and others in these

hospitals ask bribes for the services. The focus of this study is on the behavioural attitude of the government employees in the Government hospitals, Ernakulam, Kerala and to check if the patients are directed to other private stores/hospitals to avail the facilities. The study is focused on measuring the behavioural attitude of doctors, nurses and staffs in the government hospitals.

Literature review

The Theory of Reasoned Action (Fishbein and Ajzen, 1975 [2]) and the Theory of Planned Behaviour (Ajzen, 1985 [3]) supports the fact that attitude leads to behaviour. An attitude is generally defined as the way a person responds to his or her environment, either positively or negatively. The attitude hence affects a person's behaviour. Organizational Behaviour by Robbins (2003) [4] defined attitudes as evaluative statements and they can be either favourable or unfavorable-concerning object, people, or events. The favourable statements may provide positive effects regarding the concerned object, person or event whereas unfavourable statement may provide negative effects. An attitude is a positive or negative feeling or mental state of readiness, learned and organized through experience that exerts the specific influence on a person's response to people, objects and situations. The Theory of Planned Behaviour (TPB) has been extensively used to predict the behaviour in the health care sectors. The perceived behavioural control plays a major role in these settings. (Ponnet et.al, 2014; [5] Godin et.al. 2008). [6] Galloway(2011) [7] explained that healthcare practitioners should treat all patients as individuals regardless of age, religion, belief, gender and a holistic patient assessment is to be done. This study also explored the concepts like dignity, values and person centered care for the patients.

There is considerable evidence that quality in healthcare is a product of cooperation between the patient and the healthcare provider in a supportive environment. Healthcare quality can be improved by supportive visionary

leadership, proper planning, education and training, availability of resources, effective management of resources, employees and processes, and collaboration and cooperation among providers Mosadeghrad (2014). [8]

Gill et.al (2012) [9] explain that having trust in doctors is very important and doctors were expected to act in patients' best interest. Patients want unrestricted access to care and they also expect the doctor to be friendly, listening and have a positive attitude. They further state that professional knowledge should be supplemented with effective communication and friendly behaviour of the doctors to deliver good quality medical treatment, care and advice. Johanna and Goossens (2011) [10] in their study explains the different factors that influences the behaviour of nurses which includes the organizational environment, hospital facilities etc along with their personal and professional background.

Frymier and Nadler (2007) [11] states that the behaviour is often the outcome of interest in both persuasions research and practice and because attitudes are thought to affect behaviour and attitude have been a central focus of persuasion. Kumari (2009) [12] assessed the overall satisfaction level of the patient with various aspects of health care and also observed certain improvements are needed in the infrastructure of the hospital. Basu et. al (2012) [13] compared the performance of the private and public sector healthcare systems in low and middle income countries which evaluated various factors like accessibility, quality of the health care, fairness, equity, efficiency etc. Major findings includes in the private sector drug cost is very high and it serves high economics groups whereas in the public sector lack of availability of resources, and need to improve the quality of services. Padma et.al (2010) [14] presented Service Quality as an instrument to identify the dimensions from patient's and attendants' perspectives. Infrastructure and administrative procedures impacted

attendant's satisfaction and Personnel quality, care and trustworthiness influences the patient's satisfaction.

Objectives of the study

The primary objective of the study is to assess the behavioural attitude of the Government employees in the Government hospitals in Ernakulam. The secondary objective is to check if the attitude leads to make the patients avail the services from private hospitals/ stores.

METHODOLOGY

The study was conducted at Government hospitals, Ernakulam. Eighteen hospitals were identified in Ernakulam district. These included the Government Medical College, District / General hospitals, Taluk Hospitals and Community Health centers. The sampling process adapted was convenience sampling and the data were collected by means of the questionnaire. The questionnaire had three parts. The first part measured the facilities available at the hospital, the second part measured the demographic profile of the respondents and the third part measured the attitude of doctors, nurses and staff. The questionnaire comprised of 35 questions. The questions were adapted from the standard attitude scales and reworded/reframed to suit the contexts. The first part, which collected data about the facilities available at the hospitals were measured using dichotomous scale (Yes/No). The questions in the third part (attitude measurement) were measured on a 5 point Likert scale (1-Strongly Disagree to 5- Strongly Agree). A pilot study was done with a sample of 48 respondents and the questions were reframed accordingly. The sample size was fixed at 900.

Analysis

Out of the 900 questionnaires distributed, 813 usable questionnaires were used for the analysis. The statistical software SPSS was used for the analysis. First, the reliability was measured. For this, the method of Cronbach's alpha was used. Table no.1 gives the values for Cronbach's

alpha. It can be seen from the table that the Cronbach's alpha values are above the acceptable values 0.70 (Nunnally, 1978). [15]

Hence the reliability of the data is ensured.

Table No 1: Cronbach's alpha values

	Cronbach's alpha	No.of items
Attitude of doctors	0.837	9
Attitude of nurses	0.839	9
Attitude of staff	0.801	7
Behaviour of patients	0.752	3

Demographic profile of the respondents

The following figures show the demographic profile of the respondents (percentage of males and females and the split up of age groups). It can be seen from the figures that the respondents have 44% males and 56% females. Further, from the data, the respondents were split into four age groups (<30, 31-50, 51-70 and >71). It can be seen that majority of the respondents belonged to age group 31-50.

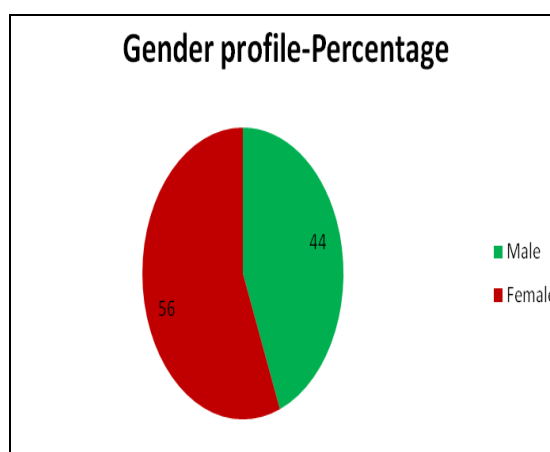


Figure 1: Gender Profile

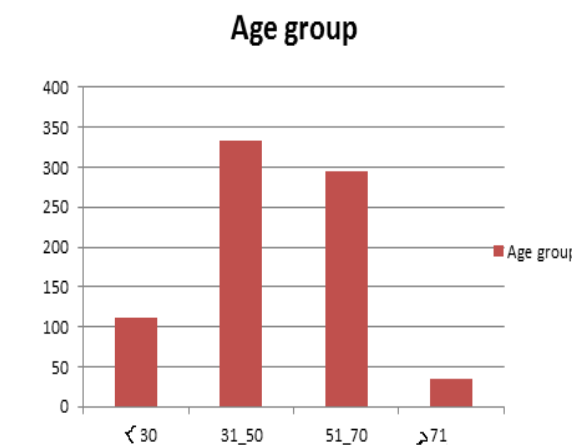


Figure 2: Age group profile

The questionnaire was split into questions that measure the attitude of doctors, nurses and staff. Further the outcome of the attitude was measured by the experiences of the patients. Following are the results of the analysis based on the mean value of the responses collected for the questions on attitude.

Behavioural Attitude of Doctors

Nine questions were used to measure the behavioural attitude of the doctors in the Government hospitals in Ernakulam. The first six questions were framed to measure

the negative attitude and the rest three were framed to measure the positive attitude of doctors towards the patients visiting their hospital. A factor analysis was done to ensure the measurement. The results are as follows.

KMO and Bartlett's Test

Table no 2: Sampling adequacy test for attitude of doctors

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.			.847
Bartlett's Test of Sphericity	Approx. Chi-Square	2843.825	
	df	36	
	Sig.	.000	

Total Variance Explained

Table no 3: Total variance explained for attitude of doctors

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	4.111	45.681	45.681	4.111	45.681	45.681	3.296	36.620	36.620
2	1.515	16.831	62.513	1.515	16.831	62.513	2.330	25.892	62.513
3	.729	8.099	70.612						
4	.679	7.546	78.158						
5	.474	5.269	83.427						
6	.448	4.982	88.408						
7	.424	4.706	93.115						
8	.359	3.983	97.098						
9	.261	2.902	100.000						

Extraction Method: Principal Component Analysis.

Rotated Component Matrix^a

Table no 4: Rotated component matrix for attitude of doctors

	Component	
	1	2
attd1	.741	-.050
attd2	.732	-.191
attd3	.761	-.229
attd4	.713	-.350
attd5	.787	-.100
attd6	.628	-.130
attd7	-.112	.835
attd8	-.273	.825
attd9	-.149	.843

It can be seen from the table that there are two factors extracted. The first factor is the negative attitude and the second factor is the positive attitude. The KMO and Bartlett's test is also significant, hence showing sample adequacy. The descriptive statistics are given in the table no 5 below.

Table no 5: Mean score for attitude of doctors

Factor	Mean	Standard Deviation
Positive attitude	3.97	0.95
Negative attitude	1.79	0.918

This shows that the sample chosen is of the opinion that the doctors have a positive attitude towards patients.

Behavioural Attitude of Nurses

Nine questions were used to measure the behavioural attitude of the nurses in the Government hospitals in Ernakulam. The first five questions were framed to measure the negative attitude and the rest four were framed to measure the positive attitude of nurses towards the patients visiting their hospital. A factor analysis was done to ensure the measurement. The results are as follows

Table no 6: Sampling adequacy test for attitude of nurses

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.835
Bartlett's Test of Sphericity	Approx. Chi-Square	2959.492
	df	36
	Sig.	.000

Table no 7: Total variance explained for attitude of nurses

Total Variance Explained									
Component	Initial Eigen values			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	4.187	46.517	46.517	4.187	46.517	46.517	2.864	31.819	31.819
2	1.285	14.281	60.798	1.285	14.281	60.798	2.608	28.980	60.798
3	.965	10.725	71.523						
4	.631	7.007	78.531						
5	.576	6.398	84.929						
6	.430	4.773	89.702						
7	.409	4.550	94.252						
8	.307	3.407	97.659						
9	.211	2.341	100.000						

Extraction Method: Principal Component Analysis.

Table no 8: Rotated component matrix for attitude of nurses

Rotated Component Matrix ^a		
	Component	
	1	2
attn10	-.230	.646
attn11	-.208	.734
attn12	-.217	.723
attn13	-.188	.732
attn14	-.145	.611
attn15	.739	-.198
attn16	.844	-.282
attn17	.861	-.222
attn18	.815	-.228

It can be seen from the table that there are two factors extracted. The first factor is the negative attitude and the second factor is the positive attitude. The KMO and Bartlett's test is also significant, hence showing sample adequacy. The descriptive statistics are given in the table no.9 below.

Table no 9: Mean scores for attitude of nurses

Factor	Mean	Standard Deviation
Positive attitude	3.818	0.955
Negative attitude	1.942	0.704

It is evident from the table that the nurses are having a positive attitude towards the patients, as perceived by the patients.

Behavioural Attitude of Staff

Seven questions were used to measure the behavioural attitude of the staff in the Government hospitals in Ernakulam. All questions were used to measure the negative attitude of the staff

Table no 10: Sampling adequacy test for attitude of staff

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.833
Bartlett's Test of Sphericity	Approx. Chi-Square	1422.707
	df	21
	Sig.	.000

Table no 11: Total variance explained for attitude of staff

Total Variance Explained						
Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	3.152	45.033	45.033	3.152	45.033	45.033
2	.950	13.576	58.609			
3	.814	11.630	70.239			
4	.703	10.038	80.278			
5	.539	7.696	87.974			
6	.449	6.420	94.393			
7	.392	5.607	100.000			

Extraction Method: Principal Component Analysis.

Only one factor was extracted and the KMO test shows sample adequacy. The descriptive statistics is given in the table below.

Table No 12: Mean score for attitude of staff

	Mean	Std.dev
Attitude	2.33	1.05

The means shows a little higher value than the negative attitudes of doctors and nurses. Further, three questions were asked to check if the patients had to give bribe or go to specific medical shops/labs etc. This was done to cross check if the behaviour of the doctors/nurses/staff led the patients to avail services outside the government hospitals

The descriptive statistics are recorded in table no.7 below

Table No 13: Mean score for patients' behaviour

	Mean	Std.dev
Patients' behaviour	2.06	1.023

The mean values in the above table also show that the respondents disagreed with these statements.

Further, t- test was used to check if there is a difference in the gender perception of the behavioural attitude of the officials in the government hospitals. The test was found to be insignificant ($p>0.05$) suggesting that there is no difference in the male and female perception. Unanimously, it can be seen that the doctors/nurses and staff of the government hospitals in Ernakulam, Kerala has a good positive behavioural attitude towards the patients in their hospitals.

FINDINGS AND DISCUSSION

The findings of the study show that the respondents have felt that the doctors, nurses and staff in the Government Hospitals in Ernakulam have a good behavioural attitude towards them. The high mean score for the positive attitude and low mean score the negative attitude supports the fact that the employees (doctors, nurses and staff) have a positive attitude towards the patients visiting the Government hospitals. Further, it was also seen that the respondents disagreed with the statements that they were asked to avail services, buy medicines etc from the private stores as directed by the employees of these hospitals.

In the case of the health care sector, the employees need to possess technical skills for sure, but they should also learn the art of communicating with people. The patients look for a comforting atmosphere and a good positive attitude from the doctors and nurses in the hospitals. Since they are already in a disturbed state due to their health problems, a good behaviour from the employees plays a major role in their treatment. Several researchers have

pointed out the necessity of a good attitude by the health care professionals in different countries (Fahad et.al, 2014; ^[16] Sanjaya et.al. 2011; ^[17] Nirupam, 2007). ^[18]

A further look was done to know the facilities available at these hospitals. It was found that majority of the hospitals lacked in the essential facilities. The lack of staff, labs, equipment for diagnosis, enough rooms/beds etc. were reported. A depth study into the hospitals revealed that these facilities lacked more in the community health centers and in the hospitals which are away from the city. The lack of these facilities might have an impact on the people to look for other choices. This is in tune with other studies in the related area regarding the lack of facilities in Government hospitals (Cockcroft.et.al, 2011). ^[19] Further, it was found that there is a significant difference in the attitude of the employees in the different hospitals in Ernakulam i.e., there is a variation in the behavioural attitude of the employees in the different hospitals selected for the study. Statistical tests also revealed that there is no variation in the responses according to gender.

Further, a qualitative approach was taken and the respondents were given an open question to comment on the attitude of the employees/ services/facilities etc. A large percentage of the respondents shared a common problem of the unavailability of medicines in the hospitals. Since the medicines are not available they had to go to private medical shops and get them. Another common response was the lack of cleanliness in these hospitals. Yet another common response was on the long waiting time at these hospitals. Some of the comments received are “doctors are not available at hospitals and often on long leave”, “when compared to doctors and nurses, the staff behaves rudely and not ready to offer the services”, “previously I had to give money to doctors and nurses, but now the situation has changed and they don't ask for it”.

Also, the recent times have brought changes to the system and the behavioural attitudes of the employees in these hospitals are found positive towards the patients.

Limitations of the study

The study is cross-sectional and hence the responses might have been influenced by this nature. The responses were collected from the patients during their visit to the hospital and hence the responses might be biased. The study being on the health sector, the sensitivity of the sector would have had an influence in the responses. The respondents being patients at the hospitals would have had a fear to reveal the real circumstances.

Implications for future research

Future research can focus on the different behavioural factors. Also a longitudinal study might provide better results to overcome the limitations of the present research. The study can be extended across the state and a comparison across the districts can be done.

CONCLUSION

The study has taken around 813 responses from the people who have visited the Government Hospitals in Ernakulam district. The study intended to assess the behavioural attitude of the doctors, nurses and staff in these selected hospitals. The findings reveal that the doctors, nurses and staff of these hospitals have a good behavioural attitude towards the patients. The patients had a good feel felt a positive attitude from the employees in these Government hospitals. There was no difference in gender among the perception of the attitude of the employees in the hospitals. It was also seen that there was a lack of adequate facilities in some of the hospitals.

REFERENCES

1. Kumar, S. (2003). Health care is among the most corrupt services in India. *BMJ: British Medical Journal*, 326(7379), 10.

2. Fishbein, M., & Ajzen, I. (1975). *Belief, attitudes, intention, and behavior. An introduction to theory and research*. Massachusetts: Addison-Wesley.
3. Ajzen, I. (1985). *From Intentions to Actions: A Theory of Planned Behaviour. in Action Control* (Kuhlman, J., and Beckman, J. (Eds) ,From Cognition to Behaviour, pp.11-39). Heidelberg: Springer.
4. Robbins, S. P., & Judge, T. (2003). *Essentials of organizational behavior* (Vol. 7). Englewood Cliffs^ eNJ NJ: Prentice Hall.
5. Ponnet, K., Wouters, E., Van Hal, G., Heirman, W., & Walrave, M. (2014). Determinants of physicians' prescribing behaviour of methylphenidate for cognitive enhancement. *Psychology, health & medicine*, 19(3), 286-295.
6. Godin, G., Bélanger-Gravel, A., Eccles, M., & Grimshaw, J. (2008). Healthcare professionals' intentions and behaviours: A systematic review of studies based on social cognitive theories. *Implementation Science: IS*, 3, 36. <http://doi.org/10.1186/1748-5908-3-36>.
7. Galloway, J. (2011). Dignity, values, attitudes, and person-centred care. In *Nursing Care of Older People* (pp. 9-22). Oxford University Press, Oxford, England.
8. Mosadeghrad, Ali Mohammad, Factors Influencing Healthcare Service Quality (July 27, 2014). *Int J Health Policy Manag* 2014; 3: 77-89. doi: 10.15171/ijhpm.2014.65.
9. Gill, V., Bridges, S., Nicholis, C.M(2012) The standards expected of doctors Patient & public attitudes. Final report prepared for the General Medical Council. UK. Retrieved from the National Center for Social Research.
10. van der Kluit, M. J., & Goossens, P. J. (2011). Factors influencing attitudes of nurses in general health care toward patients with comorbid mental illness: an integrative literature review. *Issues in mental health nursing*, 32(8), 519-527.
11. Frymier, A.B. and Nadler, M.K (2007) *The Relationship between Attitudes and Behaviours In Persuasion: Integrating*

- Theory, Research and Practice*, 4th Ed. Kendall Hunt Pub. 42-58.
12. Kumari, R., Idris, M. Z., Bhushan, V., Khanna, A., Agarwal, M., & Singh, S. K. (2009). Study on patient satisfaction in the government allopathic health facilities of Lucknow district, India. *Indian Journal of Community Medicine*, 34(1), 35.
 13. Basu, S., Andrews, J., Kishore, S., Panjabi, R., & Stuckler, D. (2012). Comparative performance of private and public healthcare systems in low- and middle-income countries: a systematic review. *PLoS med*, 9(6), e1001244.
 14. Padma, P., Rajendran, C., & Sai Lokachari, P. (2010). Service quality and its impact on customer satisfaction in Indian hospitals: Perspectives of patients and their attendants. *Benchmarking: An International Journal*, 17(6), 807-841.
 15. Nunnally, J.C., (1978). *Psychometric Theory*. New York: McGraw – Hill.
 16. Fahad Hanif Khan, Raheela Hanif, Rumina Tabassum, Waris Qidwai, and Kashmira Nanji, “Patient Attitudes towards Physician Nonverbal Behaviors during Consultancy: Result from a Developing Country,” *ISRN Family Medicine*, vol. 2014, Article ID 473654, 6 pages, 2014. doi:10.1155/2014/473654.
 17. Sanjaya, S. G., Xu, Y., Quazi, A., & Nandi, S. (2011). Relational impact of service providers' interaction behavior in healthcare. *Managing Service Quality*, 21(1), 67-87. doi:http://dx.doi.org/10.1108/0960452111100252.
 18. Nirupam, M. (2007). Attitudes and Perceptions of Medical Doctors Towards Their Jobs in the State of J&K, India. *International Journal of Health Sciences*, 1(2), 217–222.
 19. Cockcroft, A., Milne, D., Oelofsen, M., Karim, E., & Andersson, N. (2011). Health services reform in bangladesh: Hearing the views of health workers and their professional bodies. *BMC Health Services Research*, 11 doi:http://dx.doi.org/10.1186/1472-6963-11-S2-S8.

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