

Psychological Treatment Perceptions among Private Psychological Clinics Patients' in Riyadh City, Saudi Arabia

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Abstract: Background: This study focuses on views of patients treated in private psychological clinics for the purpose of evaluating their perception about the treatment.

Purpose : To explore psychological patients' views on treatment in psychological private clinics, to identify the determinants influencing those patients' satisfaction with the service; for the purpose of evaluating the need of government intervention in improving private psychological clinics' environment in Saudi Arabia.

Methodology: Data was collected using questionnaires; a random sample was used to select the participants from private clinics; a sample consists of 667 patients from 13 hospitals and clinics, was used to represent Riyadh private hospitals and clinics. A descriptive analysis was used to analyze the data.

Findings: Researchers found a variation in satisfaction levels among participants about services provided in private psychological clinics. There is consensus that there is dissatisfaction about the cost of treatment; the time given by physician to see the patients; and waiting for appointments, and beds. Most participants respond positively on the results of treatment, on the communication between staff and physician in clinics, and on how physician explains the diagnosis of an illness.

Conclusion: Research results showed a general consent between participants that they are satisfied with most aspects of services provided by private psychological clinics, and the way physician communicates with them; and unsatisfied with the cost of treatment, the time physician spent with patient, and physician's accessibility out of working hours. Declaration of interest: no support from any organization for the submitted work; no financial relationships with any organizations that might have an interest in the submitted work in the previous three years; no other relationships or activities that could appear to have influenced the submitted work.

Keywords: Psychiatry, Psychology, Cost, Communication, Private Clinic.

I. Introduction

As the Saudi Community perceived the importance of psychological treatment, the demand for such services has increased,[1]. With such increased demand for psychological treatments, desirable clinical indicators are gradually augmented,[2]. Psychologists have considered initiating private psychological clinics, to treat urgent cases, to take advantage of this increase of demand; and to participate in this important role in psychological treatment in Saudi Arabia.

The entry to the private sector of psychotherapy market has a positive impact on the community,[1], to judge these positive impacts, researchers will explore the patient's perception about treatment in private psychological clinics by unavailing factors affecting patient decision for treatment in these clinics. These factors are availability of the appointments and beds,[3]; effectiveness of treatment; communication with physician or other staff who work in private clinics,[4, 5]. Successful patient-physician relationship, is also, considered to be an important factor in the success of psychiatry's treatment. Additionally, cost of treatment factor in private psychological clinics, demonstrate the burden incurred by patient who is receiving treatment at these clinics,[2].

Understanding these factors will help us evaluate the current status and expand our understanding about how physician and other staff communicates with their psychological patients in private clinics, to improve the patient's health outcomes through a clear communication, privacy and confidence,[6].

II. Method

Population and Sampling:

The population of this study is psychological patients who received treatment in 13 private psychological clinics in Riyadh city. The sample size was 667 patients. Researchers used a convenient sampling method in selecting participants for this study.

Measures and procedure:

The study used a questionnaire, prepared by the researchers, for collecting the data. The questionnaire consists of four parts: The first part covered socio-demographic information; the second part covered medical diagnosis of the patient's condition; and the third part, includes fourteen questions, covered factors enhancing of psychological patients to treat in private clinics, and communication between physician and patients. The researchers used five level Likert scale, ranging from "strongly agree" with a value of 5, until "strongly disagree" with a value of 1. The last part of the questionnaire asked participants about their satisfaction of all services that are provided in psychological private clinics.

Validity and Reliability:

To assure the validity, the following were conducted, first the researchers reviewed the relevant literature. Secondly, the study instrument was examined to develop drafts, then was reviewed by expert in the relevant field.

Finally, instruments' reliability was measured using Alpha Cronach's factor which was 0.87 reflecting a good internal consistency.

Table 1: Reliability Statistics

Reliability Statistics of factors enhance treatment in private psychological clinics	
Cronbach's Alpha	N of Items
.764	6
Reliability Statistics for communication between physician and patients	
Cronbach's Alpha	N of Items
.896	8

Research design:

The researchers used a descriptive approach to assess patient's perception about private psychological treatments clinics in Riyadh, Saudi Arabia, because of lack of precedents similar research.

Statistical treatment:

The data was analyzed using descriptive analysis such as: frequencies, percentages, means, and standard deviations. The researchers used Windows Statistical Package for Social Science (SPSS) version 20.

III. Results

Table 2: Socio-demographic data

	Variables level	Frequency	%
Gender	Male	384	57.6
	Female	283	42.2
	Total	667	100.0
Nationality	Saudi	643	96.4
	Non Saudi	24	3.6
	Total	667	100.0
Marital status	Single	280	42
	Married	345	51.7
	Divorced	33	4.9
	Widowed	9	1.3
	Total	667	100.0
Educational level	Illiterate	11	1.6
	High school, less	142	21.3
	Diploma	83	12.4
	Bachelors	359	53.8
	Higher educations	72	10.8
	Total	667	100.0
Age	5 – 15 Y	13	1.9
	> 15 – 25 Y	177	26.5
	> 25 – 35 Y	299	44.8
	> 35 – 45 Y	133	19.9
	> 45 Y	45	6.7
	Total	667	100.0

In this study as table 2 shows majority of the participants in this study were male representing 57.6 percent of respondents; most participants were Saudi national representing 96.4 percent of respondents; and most of participants were married representing 51.7 percent of respondents, and least of participants were widowed representing 1.3 percent of respondents.

Most participants in this study carry bachelor degree representing 53.8 percent of respondents, and illiterate represents 1.3 percent of respondents. Most participants in this study, representing 44.8 percent of participants, were between 25 and 35 years old, and least of participants representing 1.9 percent of participants, were between 5 and 15 years old.

Table 3: Diagnosis

	Variables level	Frequency	%
Diagnosis	Social phobia	67	10
	Anxiety	161	24.1
	Depression	200	30
	Compulsive obsession	88	13.2
	Sentimental disorder	32	4.8
	Schizophrenia	16	2.4
	Unknown	103	15.4
	Total	667	100.0

Majority of participants in this study were patients who was diagnosed with Depression representing 30 percent of respondents, followed by those diagnosed Anxiety representing 24.1 percent of respondents, and least of participants representing 2.4 percent was diagnosed with Schizophrenia (Table 3).

Table 4: Factors enhance treatment in private psychological clinics

STATEMENTS		Strongly disagree	disagree	neutral	agree	Strongly agree	Total	Mean	SD
The reception staff dealing with me respectfully	F	16	29	149	306	176	667	3.87	.921
	%	2.4	4.3	22.3	45.9	25	100		
Nurses dealing with me respectfully	F	15	25	158	329	140	667	3.83	.878
	%	2.2	3.7	23.7	49.3	21	100		
Treatment results generally positive	F	38	77	145	277	130	667	3.58	1.099
	%	5.7	11.5	21.7	41.5	19.5	100		
Waiting for appointments is short	F	73	128	114	253	99	667	3.27	1.239
	%	10.9	19.2	17.1	37.9	14.8	100		
Number of beds is enough	F	45	92	277	186	67	667	3.21	1.023
	%	6.7	13.8	41.5	27.9	10	100		
Prices and costs of treatment appropriate	F	204	241	62	111	49	667	2.34	1.270
	%	30.6	36.1	9.3	16.6	7.3	100		
Mean average								3.35	

Looking at table 2 it shows that participants are different in responding to factors enhance treatment in private psychological clinics with the mean range between from $\mu = 3.87$ to $\mu = 2.34$. The highest mean range was for the reception staff dealing with me respectfully. And the lowest mean prices and costs of treatment appropriate and mean average is 3.35

Table 5: Communication between physician and patients

STATEMENTS		Strongly disagree	disagree	neutral	agree	Strongly agree	Total	Mean	SD
Physician takes into account the confidential information	F	20	11	82	292	262	667	4.15	.912
	%	3	1.6	12.3	43.8	39.3	100		
Physician listens to me well	F	26	82	80	291	208	667	3.89	1.069
	%	3.9	9.3	12	43.6	31.2	100		
Physician Discuss with me treatment methods	F	21	59	97	305	185	667	3.86	1.021
	%	3.1	8.8	14.5	45.7	27.7	100		
Physician Receive me carefully	F	38	53	93	290	193	667	3.82	1.109
	%	5.7	7.9	13.9	43.5	28.9	100		
Physician explain to me diagnosis	F	39	72	97	283	276	667	3.73	1.138
	%	5.8	10.8	14.5	42.4	26.4	100		
The time spent with physician enough	F	75	132	98	246	116	667	3.29	1.276
	%	11.2	19.8	14.7	36.9	17.4	100		
Physician discuss with me side effects of drugs	F	68	133	138	214	114	667	3.26	1.244
	%	10.2	19.9	20.7	32.1	17.1	100		
Physician is accept to contact with me or with my family members any time	F	92	115	232	146	82	667	3.02	1.199
	%	13.8	17.2	34.8	21.9	12.3	100		
Mean average								3.63	

Table 5 shows that participants vary in responding to communication between physician and psychological patients. The mean range between from $\mu = 4.15$ to $\mu = 3.02$. The highest mean range was for physician takes into account the confidential information while the lowest mean was physician is accept to contact with me or with my family members any time with mean average was 3.63

Table 6: The level of satisfaction in psychological patients:

	Variables level	Frequency	%
Level of satisfaction	Strongly disagree	62	9.3
	Disagree	94	14.1
	Neutral	172	25.8
	Agree	257	38.5
	Strongly agree	82	12.3
	Total	667	100.0

About fifty one percent of participants in this study agreed that they are satisfied with services in private psychological clinics. The highest percentage of respondents said agree 38.5 percent, and lowest percentage of respondents said strongly disagree by 9.3 percent (Table 3).

IV. Discussion

Majority of participants in this study were male that may be due to the fact that the researchers are male and they have difficulty access to female patients due to cultural restriction. Most of participants were married; this is probably because of the pressures of life and living conditions, which agree with previous study findings, [7]. Age range of majority of participants were from more than 15 to 35 years old, which support the conclusion of mental disorders were concentrated mostly in age groups from 15 through 44 years by Memish and others, [8]. Most of participants suffer from depression and anxiety, the result of this study supports the results reported by Al-Shehri and others, [7]. Additionally, most of the participants in the study were Saudi nationals; this may be caused by high cost of treatment in these clinics which seems expensive for non-Saudis, and there is no insurance to cover such type of treatment; or because Non-Saudi prefers return home if they need this type of service.

The study findings showed that participants were satisfied with results of treatment in psychological private clinics and the way supporting staff dealt with them, which support the motion that private sector could produce more satisfied patients. On the other hand, percentage of dissatisfied respondents with length of appointments was not high, but it still problematic, because majority of patients prefer treatment in private clinics to avoid length of appointments, which is the case of government hospitals, [9]. Majority of participants consider the cost of treatment in private clinics expensive, and patients has to bear all the cost with no medical insurance to share the cost of such treatment.

Most of participants agreed that physician properly welcome them, carefully listen to them, explain their case, describe appropriate methods of treatment, and maintain the confidentiality of their information. The results support study conclusion of Lee and others, [10], which link good listening and communication to patient satisfaction. On the other hand majority of participants agreed that time spent with physician was not enough which contradicts results reported by Bjørngaard and others, [4]; physician didn't discuss side effects of treatment; and physician was not accessible outside working hours, which contradict with the recommendations suggested by Royal College of Physicians and the Royal College of Psychiatrists, [11].

Private psychological clinics are playing important role in Riyadh's habitant mental health. Community need to look for ways to deal with factors that leads to patients' dissatisfaction with services rendered.

V. Limitations

Even though this study revealed some interesting results, several factors effected the conclusions of this study; firstly, researchers experienced difficulty collecting data from patients suffering from Depression which is reflected unconstructively on the sample size; secondly, the study is conducted only in Riyadh city for patients whose attending the private psychological hospitals and clinics, this makes its conclusions unrepresentative of Kingdom of Saudi Arabia. Finally, there are no studies conducted on psychological patient satisfaction in Saudi Arabia which might enable researchers to compare their findings with.

VI. Conclusion

This was the first study to investigate factors affecting psychological patients' perception about treatment in psychological private clinics in Riyadh city, Saudi Arabia. The study was conducted with the purpose of improving patient satisfaction with services provided at these clinics.

Study findings showed general consent between participants that they are satisfied with most aspects of services provided, and the way physician communicate with them; and unsatisfied with the cost of treatment, the time physician spent with patient, and physician's accessibility out of working hours.

References

Journal article:

- [1]. Koenig H. G., Al Zaben F, Sehlo M. G., Khalifa D. A., et al (2014). Mental Health Care in Saudi Arabia: Past, Present and Future. *Journal of Psychiatry*; 4: 113-130.
- [2]. Qureshi, N. A., Habeeb, A. A., & Koenig, H. G. (2013). Mental health system in Saudi Arabia: an overview. *Neuropsychiatric Disease And Treatment*, 1121.
- [3]. Galletly, C., Bell, S., Burton, C., & Turnbull, C. (2011). Bed accessibility in a private psychiatric hospital. *Australasian Psychiatry: Bulletin Of Royal Australian And New Zealand College Of Psychiatrists*, 19(2), 160-162. doi:10.3109/10398562.2010.540246
- [4]. Bjørngaard, J. H., Garratt, A., Gråwe, R. W., Bjertnaes, O. A., & Ruud, T. (2008). Patient experiences with treatment in private practice compared with public mental health services. *Scandinavian Journal Of Psychology*, 49(4), 385-392. doi:10.1111/j.1467-9450.2008.00658.x
- [5]. Fahmida, A., Wahab, M. A., & Rahman, M. M. (2009). Pattern of psychiatric morbidity among the patients admitted in a private psychiatric clinic. *Bangladesh Journal Of Medical Science*, 8(1-2), 23-28.
- [6]. Agarwal, A. K. (2012). Analysis of patients attending a private psychiatric clinic. *Indian Journal Of Psychiatry*, 54(4), 356-358. doi:10.4103/0019-5545.104824
- [7]. Al-Shehri, S., Sabra, A., Taha, A., Khamis, A., & Hafez, A. (2012). Depression and Anxiety among Males Attending Primary Health Care Centers, Eastern Saudi Arabia: Prevalence and Predictors. *Life Science Journal-Acta Zhengzhou University Overseas Edition*, 9(3), 128-133.
- [8]. Memish, Z. A., Jaber, S., Mokdad, A. H., AlMazroa, M. A., Murray, C. L., & Al Rabeeah, A. A. (2014). Burden of disease, injuries, and risk factors in the Kingdom of Saudi Arabia, 1990-2010. *Preventing Chronic Disease*, 11E169. doi:10.5888/pcd11.140176
- [9]. Lee, J., & Korczak, D. (2014). Factors Associated with Parental Satisfaction with a Pediatric Crisis Clinic (PCC). *Journal Of The Canadian Academy Of Child & Adolescent Psychiatry*, 23(2), 118-127.
- [10]. Karlsson M., Nyström L., & Bergbom I (2012). To Care for the Patient: a Theory Based Clinical Application Research. *International Journal of Caring Sciences*; 5(2): 129-136.
- [11]. Royal College of Physicians and the Royal College of Psychiatrists (2003). *The psychological care of medical patients: A practical guide* (2nd Ed.). London: Royal College of Physicians and the Royal College of Psychiatrists.