Reviewer’s report

Title: Measuring Client Satisfaction and the Quality of Family Planning Services: A Comparative Analysis of Public and Private Health Facilities in Tanzania, Kenya and Ghana

Version: 2 Date: 27 January 2011

Reviewer: Uzor C. Ogbu

Reviewer’s report:

This is an interesting analysis that uses the structure-process-outcome approach to quality of care measurement. It examines the relationship between the structure and process of care and the immediate outcome of patient satisfaction, among health care facilities with family planning services in three sub-Saharan nations. The manuscript refers to studies that have identified a link between patient satisfaction and long-term use of family planning methods. It makes a distinction between public and private health care providers and uses both primary and secondary data on the organization of care and outcomes. The results presented may be useful for policy makers and highlight the importance of examining the link between structure, process, and outcome.

However, after reading the manuscript I have a number of questions and comments.

Major Compulsory Revisions

1. Can the authors give an indication of the period in which this study was carried out? Does it match with the collection of the SPA data?

2. Can the authors include information about the response rate for the exit interviews? While the sample is opportunistic, this does not rule out selection bias among the respondents. Were there differences in the response rates between the public and private clinics?

3. Do the authors have information about the duration of the relationship between the patient and the provider? Are they first time clients or follow-up cases? Could this have any influence on the results?

4. By constraining “problem” to a dichotomous variable, the authors give equal weight to any complaint no matter how small. Can they use it as a categorical variable? The could also comment on this in their discussion.

5. Among the respondents in these countries, there is the likelihood that expectations of quality differed from the outset. In my experience, private providers are presumed to be better than public ones particularly in larger cities. Can the authors address this in their discussion?

6. Are the authors aware of any preferences for particular methods that might
influence patient satisfaction? While this does not negate the subjective measure satisfaction, it has implications for the approach to improving compliance.

7. One of the questions refers to the availability of different contraceptive methods. Can the authors address the possibility that their respondents may not be familiar with all methods? This might introduce bias.

Minor Essential Revisions

1. Page 4, paragraph 2. The authors refer to “incentives to provide services” in this and in the next paragraph. Yet in subsequent sentences, they list deterrents to the provision of services. What incentives do they refer to and how do they differ between public and private providers?

2. Page 5, paragraph 2. Can the authors provide references for the data presented in the last sentence of this paragraph?

3. Can authors include more information about the SPA’s in the text for the benefit of the readers? They are an important part of the comparison and readers will probably like to know more about them without having to refer to the cited references.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.