



UTILIZATION OF COMPLAINT BOXES IN 7 DE ABRIL HEALTH CENTRE: A NEEDS ASSESSMENT REPORT



February, 2018

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LIST OF ACRONYMS

GCR	Girl Child Rights
SRH	Sexual Reproductive Health
AGYW	Adolescent Girls and Young Women
IECs	Information, Education, and Communication materials
ESCR	Economic, Social, and Cultural Rights
ICESCR	International Committee on Economic, Social, and Cultural Rights
HIV/AIDS	Human Immunodeficiency Virus/ acquired Immunodeficiency Syndrome
SAAJ	Serviços de Saúde Amigos de Adolescentes e Jovens
VT&C	Voluntary Testing and Counselling
GISUHERI	Girls Stand Up for your Health Rights
T.B	Tuberculosis

1.0 Background

Girl Child Rights (GCR) with financial support from the US Embassy is implementing the *“Improve provision of sexual reproductive health services to Adolescent Girls and Young Women through effective utilization of suggestion boxes”* project in Chimoio district, Manica Province.

In the ambit of the mentioned project, GCR conducted a needs assessment to inform of the current status of usage for the complaints boxes by the health co-management committee and AGYW. The assessment findings will be used as a yardstick for development of guidelines for the utilization of the boxes, development of IECs, and monitoring tools

1.1 The problem

Complaint/ suggestion boxes are universally utilized as a complaints handling system that not only provides feedback on the quality of services but also can offer organizations with a variety of benefits such as reduced corruption, improved service delivery and enhanced overall project effectiveness. In rural areas where there is limited access to the internet and mobile telephone applications that facilitate customer complaints lodging, suggestion boxes play vital role as they are communally used and do not bear any cost on the use in terms of mobile telephone services data packages

The fore mentioned benefits notwithstanding, the utilization of complaints/suggestion boxes has diminished over time due to the evolution of technology on one hand and the dwindling interest in lodging complaints by clients and of monitoring lodged complaints by organizations on the other.

The 7 de Abril Health Centre with support from different development agencies has in the past installed suggestion/ complaints boxes where clients are meant to lodge their grievances concerning the quality of services they access. While the inception stage of the initiatives registered many health centre clients lodging complaints, the number of complaints reduced by the end line of the projects. It is however not clear whether this is due to the fact that clients’ grievances are resolved and thus reduced complaints lodging or

lack of interest to continue lodging complaints due to limited feedback from the health centre during the entire process.

1.2 Objectives of the assessment

The needs assessment will be guided by the following objectives

1. To evaluate the 7 Abril health centre organizational commitment toward the utilization of complaints/ suggestion boxes
2. To ascertain if Are there are trained dedicated and passionate complaints handling personnel at the 7 de Abril health centre
3. To examine 7 de Abril health centre internal policies that guide the way in which complaints are handled
4. To Provide recommendations for the effective usage of the suggestion boxes by health co-management committee and AGYW

1.3 Methodology

Participatory methods of data collection were used including the spokes group activity and in-depth case studies to solicit opinions from both AGYW and health co-management committee members. The spokes activity was administered to groups of 6-10 participants and enabled discussion on a wide range of matters concerning the use of complaint boxes. In-depth case studies on the other hand will involve unstructured conversations with selected respondents to gather their opinions.

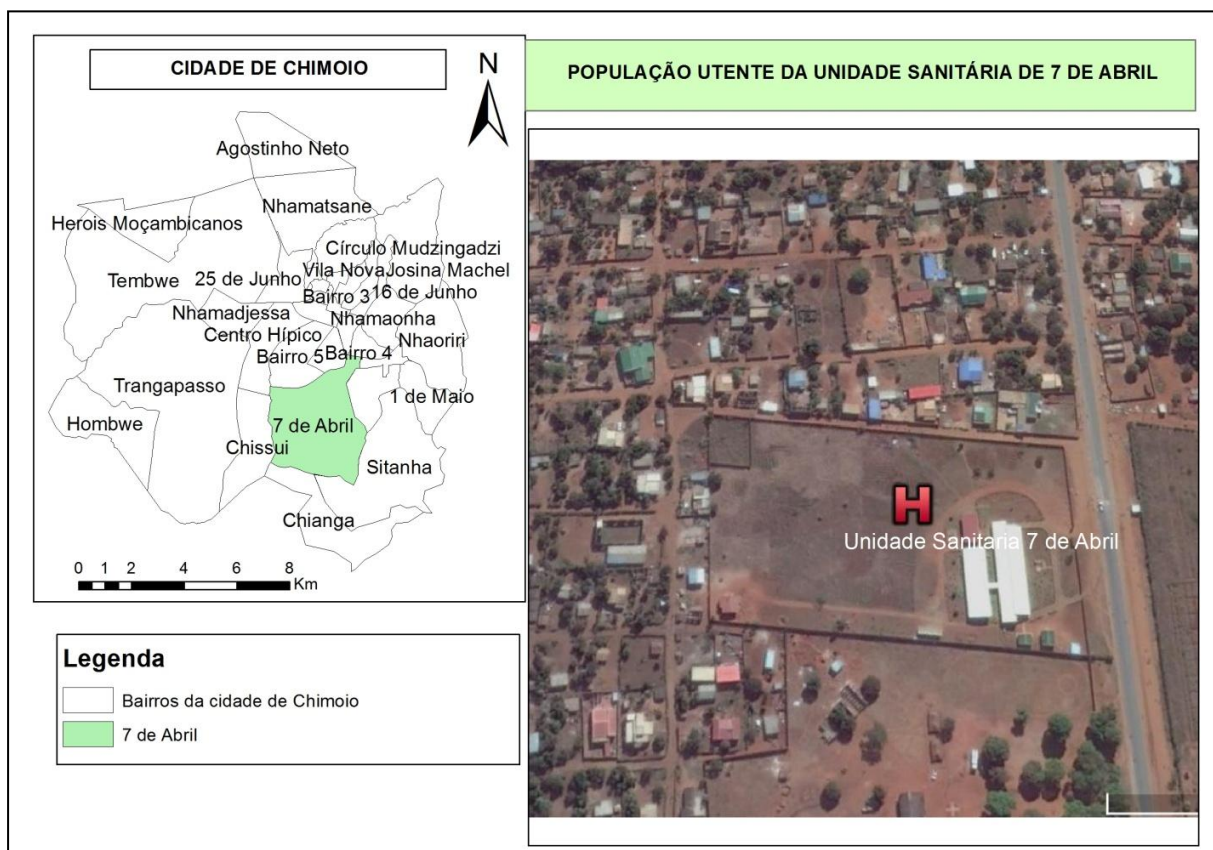
1.4 Assessment area of coverage

The assessment was be conducted in January in 7 de Abril community of Chimoio town, Manica province

1.5 Assessment target population

The assessment reached out to 7 de Abril Health centre clients, 119 females aged 15-24 who access health centre services, 10 health centre co-management committee members, and the 2 health centre management team

Respondent category	Age group	Number of respondents
Adolescent girls	15-19	59
Young women	20-24	60
Health centre management staff		02 (1 Female, 1 Male)
Health co-management committee members		10 (3Female, 6 Male)
Total number of respondents		131



2.0 LITERATURE REVIEW

2.1 Access to health Information

Health information plays a crucial role in the prevention and treatment of disease. Efforts to highlight the importance of health information have tended to focus on the obligation of states to create health information systems or collect disaggregated data about health outcomes and other indicators. These aspects of health information are indeed important. However, there has been comparatively little attention devoted to the importance of providing information to individuals and healthcare providers regarding the prevention and treatment of injury and disease. “Health information” includes a number of different types of information.

Four different types of health information

1. Health education for the general public concerning the promotion of health and the prevention and treatment of disease and injury, including information about available health services (“health education”),
2. Information about the treatment of illness and injury when care is provided by a family member or other individual without formal training (“lay healthcare information”)
3. Information about the treatment of illness and injury when care is provided by a formally trained health worker (“professional healthcare information”)
4. Information about health policies and laws necessary to enable participation in decision-making about health service provision (“health policy information”).

Health information is an essential determinant of the human right to health. The Committee on Economic, Social and Cultural Rights (ESCR Committee), the international body charged with monitoring state compliance with the ICESCR, has made clear that the right to health extends “not only to timely and appropriate health care but also to the underlying determinants of health, such as access to health-related education and information, including on sexual and reproductive health.”

Access to health information also plays an important role in realizing women's rights. The state should provide "access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning. Men and women should enjoy the same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights and ensure that women have access to adequate health care facilities, including information, counselling and services in family planning. Article 14 of the Protocol to the African Charter on the Rights of Women in Africa (the Maputo Protocol) similarly calls on states to take "all appropriate measures to provide adequate, affordable and accessible health services, including information, education and communication programmes to women especially those in rural areas.

Health information plays a critical role in ensuring women's right to health. All appropriate measures should be taken to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning. These services must include health information, particularly information about family planning.

Information about health education

State agencies have a particular duty to provide health education with respect to certain topics, including HIV/AIDS, sexual and reproductive health, traditional practices, domestic violence, the abuse of alcohol and the use of cigarettes, drugs and other harmful substances. The duty to provide health education extends to disseminating appropriate information relating to healthy lifestyles and nutrition, harmful traditional practices and the availability of services.

For example, information, such as community education about the importance of skilled birth attendance and health care during pregnancy, can increase the use of health services during pregnancy and labour and thereby reduce maternal mortality

The right to health requires that health workers are adequately trained and that they have access to the information they need to deliver effective care

Duties Regarding Specific Types of Information

There are several different types of health information sources that have been identified as particularly important. Generally, information about health services, including their availability and location and health education about health risks and healthy behaviours.

Health education should include information concerning “HIV/AIDS, sexual and reproductive health, traditional practices, domestic violence, the abuse of alcohol and the use of cigarettes, drugs and other harmful substances

Health education is particularly important for adolescents. Adolescent girls and young women lack adequate access to information and services necessary to ensure sexual health and responsible stakeholders should ensure the rights of female and male adolescents to sexual and reproductive health education by properly trained personnel in specially designed programmes that respect their rights to privacy and confidentiality.

Programs for adolescents should raise awareness about, preventing and treating sexually transmitted infections, including HIV/AIDS, and sexual violence and abuse; and counsel adolescents on avoiding unwanted and early pregnancies

2.2 Complaints Handling Mechanisms

These are means of soliciting suggestions and providing feedback about services delivered to citizens. Well designed Complaints Handling Mechanisms can provide organizations with a variety of benefits such as reduced corruption, improved service delivery and enhanced overall project effectiveness.

Characteristics of effective complaints handling mechanisms;

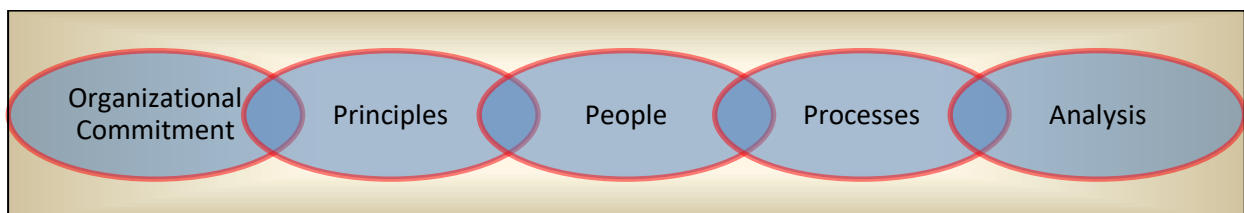
- Multiple channels for receiving complaints;
- Fixed service standards for complaint resolution;
- Prompt and clear processing guidelines (including reviewing procedures and monitoring systems);

- An effective and timely complaint response system to inform complainants of the action taken.
- Clear, formal and transparent internal mechanisms for addressing complaints (e.g. a complaints handling unit, complaints handling committees, designated complaints officers)
- Project officials responsible for complaints handling have the authority to take or demand remedial action
- Officials responsible for complaints handling obliged to take action on all complaints
- Project-affected people feel that they can lodge complaints without fear of retaliation

The Importance of Complaints Handling Mechanisms

- Promoting transparency and accountability
- Deterring fraud and corruption;
- Providing project staff with practical suggestions/feedback that allows them to be more accountable, transparent and responsive to beneficiaries;
- Assessing the effectiveness of internal organizational processes;
- Increasing stakeholder involvement projects

Five building blocks of effective complaints handling mechanisms



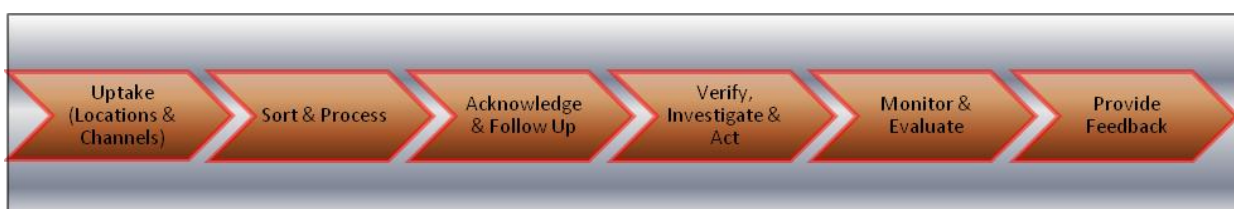
- **Organizational Commitment:** committee members recognize and value complaints as a means of strengthening public administration, improving public relations, and enhancing accountability and transparency. Complaints handling is integrated within the committee's core activities.
- **Principles:** Effective complaints handling mechanisms embody six core principles in their functioning – fairness; objectiveness and independence; simplicity and accessibility;

responsiveness and efficiency; speed and proportionality; and participation and social inclusion.

- **People:** Dedicated and passionate complaints handling personnel are essential to the success of a complaint handling mechanism. The committee should provide members working on complaints handling with the necessary training so that they can effectively carry out their roles.
- **Processes:** Complaints handling processes play an important role in project activities. The six stages of the complaints handling “value chain”—uptake; sorting and processing; acknowledgement and follow-up; verification, investigation and action; monitoring and evaluation; and feedback—are clearly outlined and publicized by project management and staff.
- **Analysis:** The committee should regularly analyze complaints reports and other monitoring and evaluation data. Complaints data provides management with insights into the effectiveness of programs and can be used to identify problem areas improve internal processes and enhance service delivery (in order to minimize the number of complaints in the future).

2.3 The complaints handling process

The complaints handling process comprises of six steps – complaint uptake; complaint sorting and processing; acknowledgement and follow-up; complaint verification, investigation and action; complaint monitoring and evaluation; and feedback



Uptake refers to the methods by which the project will collect complaints. Taking into account technology, funding and capacity constraints, the project should have multiple uptake locations (at the community, village, district, provincial/regional etc) and multiple

uptake channels (mail, email, telephone, project website, project staff, text messaging (SMS), strategically placed complaints boxes, etc).

Sorting and Processing refer to the internal policies that guide how different types of complaints are categorized, who they are referred to, and how they are addressed. Various types of complaints typically require different follow up actions. For example, some complaints can be resolved by means of a simple explanation or apology while others may require more extensive investigations. As such, complaints need to be categorized, assigned priority and routed to the appropriate entity. Moreover, standardized internal processes need to be in place to guide how complaints are logged. Complaints can either be logged manually or, if resources allow for it, by using a computer based system that will allow the project to identify trends in the data across time and geographic locations.

Acknowledgement and Follow Up refers to the processes by which complainants are informed of the receipt of their complaint and provided with periodic progress updates. Clearly defined timetables for acknowledgement and follow-up activities need to be established. Moreover, these timetables should be disseminated widely to various stakeholder including communities, civil society and members of the media to enhance accountability. The initial acknowledgement should: outline the complaint process; provide contact details and preferably the name of the contact person that is responsible for handling the complaint; and note how long it is likely to take to resolve the complaint. Complainants should periodically be updated on the status of their complaints according to a clearly defined timetable.

Verification, Investigation and Action refers to the processes of gathering information about the complaint to determine its validity and resolving the complaint. The merit of complaints should be judged objectively against clearly defined standards. Complaints that are straightforward (such as queries and suggestions) can often be resolved quickly by contacting the complainant. Complaints that cannot be resolved at one level of the system should be referred to a higher level and/or outside entity for verification and further investigation according to a clearly defined timetable. Project staff should ensure that investigators are neutral and do not have any stake in the outcome of the investigation.

Potential actions include responding to a query or comment, providing users with a status update, imposing sanctions or referring the complaint to another level of the system for further action. Generally speaking, the project should take some action on every complaint.

Monitoring and Evaluation is critical to the success of any complaints handling mechanism. Monitoring refers to the process of tracking complaints and assessing the extent to which progress is being made to resolve them. Evaluation refers to the analysis of complaints data so that policy and/or process changes can be made to minimize similar complaints in future. Analyzing complaints data helps management reorient project processes in order to increase project effectiveness.

Feedback refers to the process of informing complaints handling mechanism users and the public at large about the results of investigations and the actions taken. Providing feedback about how complaints are resolved is critical as it enhances the visibility of the complaint handling mechanism among beneficiaries and increases users' trust in the system (which makes it more likely that they will lodge complaints). Projects can provide feedback by contacting the complainant directly (if his or her identity is known) and/or posting the results of cases in high profile locations like public notice boards and conveying the results through radio broadcasts and other media. The project should also inform complaints handling mechanism users about their right to an appeal if they are dissatisfied with the decision.

3.0 FINDINGS

The needs assessment was conducted basing on 5 building blocks for the use of complaints boxes as a complaints handling mechanism. These include; organizational commitment, principles, people, processes, and complaints analysis.

3.1 Organizational commitment

In evaluating organizational commitment toward the utilization of complaints/ suggestion boxes, the assessment sought responses about; the role of the co-management committee, composition of the committee, issues discussed during committee meetings, youth representation, integration of complaints handling in planned activities, existence of a complaints handling system, existing complaints response mechanisms, existence, location and utilization of complaint box, and users' awareness about the existence of the complaints boxes

The role of the health co-management committee

The 7 de Abril Health centre co-management committee members mentioned during the spokes group discussion that they are engaged in the activities listed below;

- Linking the health centre with the community
- Responsible for planning health centre activities related with the community
- Identifying community health priorities
- Coordinating health related activities with community activists
- Identifying community health problems and referring them to the responsible authorities for remedies
- Conducting disease prevention and treatment campaigns in the community
- Working with community and religious leaders
- Evaluating and monitoring the quality of health services offered by the health centre
- Mobilizing patients to adhere to the services offered
- Promoting personal and communal health'

- Advocating for the provision of quality services by the health centre
- Educating the about better life conditions
- Identifying the communities most pressing problems

From the responses above, it is apparent that the committee is tasked with many responsibilities that are linked with the community and the health services they receive from the health centre. There is however no mention of how the co-management committee promotes accountability from the community concerning the services provided.

There co-management committee hence needs to include in its plans the effective use and monitoring of accountability mechanisms like the complaints/ suggestion boxes where health centre users' grievances are heard and the health centre held accountable.

How the health centre co-management committee promotes access to information

The assessment also sought to find out how the health centre committee promotes access to information. During the spokes group discussion committee members revealed that they promote access to information in the following ways

- Through debates and lectures where people's views and opinions are gathered
- Sensitization and promotion of sanitary and health practices
- The committee promotes openness during debates and communicates any information of public interest to the community
- The committee builds the capacity of communities through meetings in local places like schools, churches, water points, milling centres, and markets

Challenges the committee faces in regards to access to information

- Sometimes the committee members are denied access to health information
- Community members do not adhere to the sensitization campaigns organized by the committee
- The work of the health committee is sometimes considered politically motivated by community members

How can the challenges be overcome?

- Use of audio visual means of information dissemination
- Avoid actions and language that is partisan in nature
- More capacity building needed for activists and refresher trainings on the topics already covered on health rights and access to information

The composition of the health centre co-management committee

It was discovered through the discussions with the committee members that the committee is composed of 10 steering committee members including 3 women and 7 men. Committee meetings are held once a month and last for 2 hours. Besides the steering committee members, there are other members whose number was not revealed who are represented by the mentioned 10 under different departments.

The composition of the committee in its current state does not include youths or AGYW and this partly contributes to low priority accorded to the age group despite the fact that their health issues like unwanted pregnancies, unsafe abortions, sexual transmitted infections, and gender based violence present great challenges to the health centre

It is recommended that AGYW be represented on the health centre co-management committee as a means of ensuring that their pressing health issues including those raised in the complaint boxes are heard and followed up to the point of resolution

Issues discussed during committee meetings

In assessing the issues discussed during the committee meetings the assessment aimed at finding out the priority matters of the committee and whether health centre's complaints handling is among the priority areas for discussion.

The following are the issues discussed during the health co-management committee meetings according to the respondents;

- Human rights
- Issue concerned with improving the provision of services to hospital users
- Suggestions and complaints lodged in the complaints boxes

- Major community health problems and how the health centre can intervene
- Community hygiene matters
- Strategies for revitalizing the health centre co-management committee
- Prevention of domestic violence
- Girls' education and domestic violence
- Most frequent diseases in the community

Are youth well represented in the complaints handling process?

Youth involvement and participation is very vital in the handling of complaints owing to the fact that the complaints themselves come from the age group. In light of this the assessment examined the effective involvement of youth in the complaints handling process. When asked if they are involved, 100% of the respondents were not aware that they can participate in the complaints handling process.

Other respondents reported that the youth are not effectively involved and are only when there is an issue to solve regarding them

The Health centre co-management committee should ensure that youth especially AGYW are involved and represented in activities pertaining to complaints handling

Are issues of SRH tackled?

As to whether the committee prioritizes issues of sexual reproductive health and rights, respondents informed that matters of sexual reproductive health are a major concern of the committee especially unwanted pregnancies among AGYW.

It was further reported by health workers interviewed that the components of SRH involved in their planning include; post abortion care, pre-natal and post natal care, family planning and voluntary testing and counselling.

Is complaint handling integrated in the planned activities of the co-management committee?

It was not clear as to whether complaint handling is prioritized as the respondents revealed that the co-management committee did not previously have a plan for handling complaints

but rather left the role to the medical team who interface with health centre clients on a regular basis. Committee members however informally receive complaints from community members who access the health centre which they refer to the respective departments for resolving.

The health centre co-management commitment should incorporate complaints handling among the key activities with clear timelines and specify who is responsible for the realization, reporting, and monitoring of the activity.

Whereas the project guidelines stipulate that the committee should devote 10 minutes of the meeting to discuss complaints, activities like public lectures, sexual reproductive health and rights sessions, radio programmes, among others should be used as platforms to disseminate information about the use of complaint boxes.

Has the health centre got a complaints handling system?

Respondents revealed that the health centre has a way of handling complaints following the process of; collecting complaints, analysis, referral, and resolving of the cases. Other respondents added that “usually the person who was mentioned in the complaint is called upon and informed of the complaint against him/her, if possible in the presence of the complainant”

The responses above highlight that the health centre has in place practices that foster complaints handling from the point of recording the complaint, referral, to resolving the problem. The well outlined process notwithstanding; there is no clear mechanism to ascertain that the complainant receives feedback about the progress of the process. It is thus a one way type of communication with no feedback loop.

How does the health centre respond to the raised complaints?

According to the co-management committee members the 7 de Abril health centre has means of responding to clients complaints and this is through verification and analysis of the complaints lodged and subsequently coming up with solutions to the matters raised.

Has the health centre got a complaints box?

There are three complaints/ suggestion boxes at the health centre; one installed under the Girls Stand Up for your health Rights (GISUHERI) project and the other two installed in December, 2017 under the “effective utilization of suggestion boxes” initiative implemented by GCR. The boxes are located at the maternity section and pharmacy, places that are frequently visited by health centre clients.

Location of the complaint boxes

Respondents were asked if the boxes are accessible and if not to make suggestions of the best locations for the boxes. Some respondents asserted that the boxes are located in easily seen and reachable places. Others suggested that each department should have a suggestion box in order to improve on the verification and follow up of issues raised.

Some respondents, mainly AGYW suggested that a box should be located on the fence wall so that other community members can be able to lodge complaints without necessarily entering the health centre.

The respondents’ suggestion of having a suggestion box each department should be explored with the view of improving the verification and follow up of issues raised for the respective departments

Are the health centre users aware of the existence of the suggestion boxes?

Question	Response	Number of responses	Percentage of responses
Are you aware of the existence of complaints boxes at the health centre?	Yes	15	33%
	No	22	49%
	I am not sure	8	18%

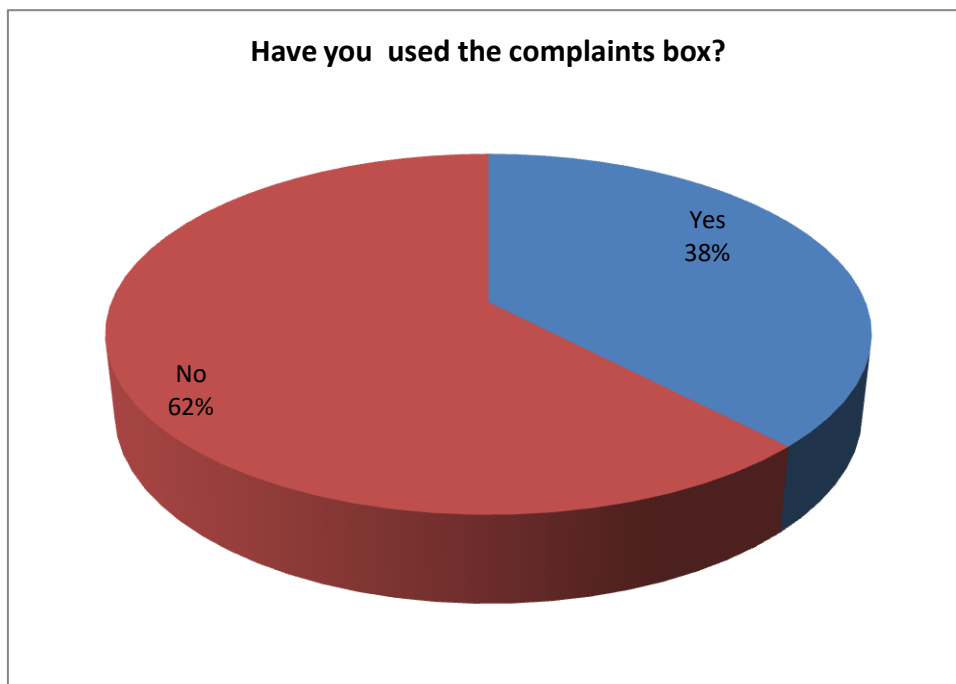
As indicated in the table above, 33% of the AGYW retorted that they are aware of the existence of the suggestion boxes, while 49% are not aware and 18% said that they were not aware of their existence or not.

It was reported during focus group discussions that AGYW who participate in Sexual reproductive health rights sessions are aware of the existence of the boxes due to the information dissemination efforts of GCR activists among AGYW.

There is need for more publicity about the existence of the complaints/suggestion boxes among health centre clients in the communities to ensure their effective usage in providing feedback on the services accessed by all age groups

Use of the complaints/ suggestion box by AGYW

AGYW were asked if they have used the complaints box and 38% revealed that they have while 62% have not used it. While the most recent minutes of the health centre co-management meeting indicated that there were 92 complaints lodged, 30% were from older age groups. There is thus a considerable percentage of AGYW who are not aware of the need to use the complaint box.



There is need for the 7 de Abril Health centre to disseminate information in the community about the existence of the complaints/ suggestion box and the relevance of using it in improving the quality of services provided

Who participates in the meetings where complaints are handled?

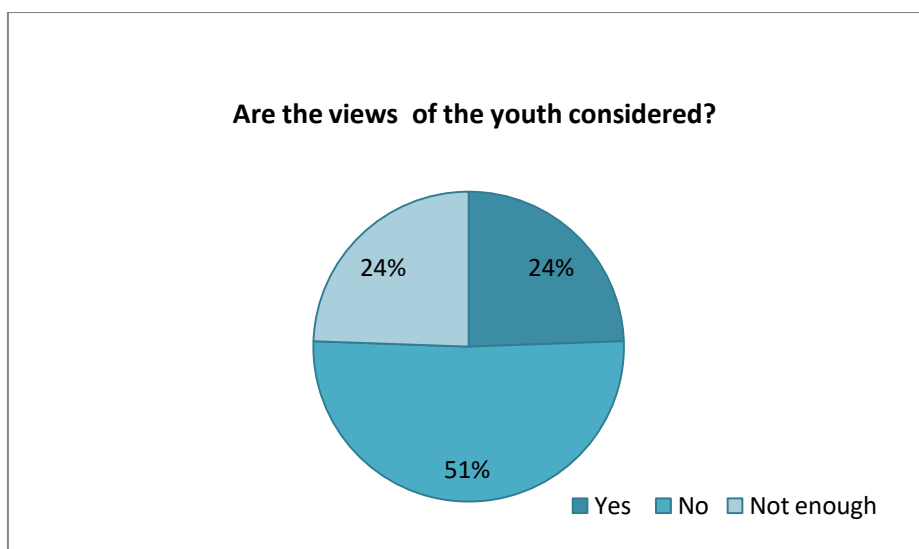
Meetings where complaints are handled are mainly attended by; the health centre co-management, head of nursing department, all department representatives, community activists, and the health centre director.

Are youth and adolescents represented and their views considered?

Question	Response	Number of responses	Percentage of responses
Are the views of youth considered?	Yes	11	24%
	No	23	51%
	Not enough	11	24%

The table above shows the responses to the question as to whether the views of the AGYW are considered. 24% agree that the views of the age group are considered, 51% said that they are not considered, while 24% reported that they are not considered to enough.

Much as most complaints about service provision come from youths, their participation in complaint handling meetings is weak and sometimes they are not represented at all. 100% of the AGYW who participated in the assessment revealed that they have never participated in meetings where complaints are handled.



3.2 PERSONNEL HANDLING THE COMPLAINTS

Who manages/ monitors the use of the complaints/suggestion boxes?

According to the respondents, the health centre director, chief nurse, and the president of the co-management committee are charged with the task of managing and monitoring the use of the complaint boxes. In addition, they are the custodians of the complaints box keys and are responsible for opening the boxes on the day of reading the complaints.

It is apparent from the findings that the health centre has in place a committed team to handle the complaints. An effective complaints handling mechanism should have in place dedicated and passionate complaints handling personnel

Did those who handle the complaints receive the necessary training to effectively do their work?

It was highlighted by some respondents that there has never been training on complaints handling at the health centre. The only training the committee members received was at the inception of the US Embassy supported project.

Members working on complaints handling should be provided with the necessary training so that they can effectively carry out their roles. Refresher trainings should be conducted for those who already received training

3.3 COMPLAINTS HANDLING PROCESSES

Are there internal policies that guide the way in which complaints are handled?

The assessment aimed at establishing whether there are internal policies that guide how different types of complaints are categorized, who they are referred to, and how they are addressed.

100% of the respondents that participated in the assessment revealed that the health centre lacks policies of guidelines to direct the complaints handling process

Standardized policies or guidelines ought to be formulated for the co-management committee and the health centre users to orient them on the complaints handling processes. These should be easy-to-use and a language understood by all.

Besides policies and guidelines, there should user-manuals for both the hospital clients and the co-management committee. The co-management committee manual should be rich with content of how to register, analyze, refer complaints, and provide feedback to clients. The health centre clients' manual on the other hand should specify how to write a complaint, where to lodge the complaint, and necessary actions to take in case of dissatisfaction with the complaints handling outcomes

Are the complainants informed of the progress of their complaints?

Both AGYW and the co-management committee members revealed that complainants are not informed of the progress of their complaints because they neither leave behind their identification nor their telephone contacts.

Furthermore, there are no specific meetings organized to offer complainants feedback on the progress of their complaint.

Complainants should be informed of the receipt of their complaints and provided with periodic progress updates

The complaints form should include the telephone contact of the complainant so that they can be contacted for feedback about the progress made on the complaint

Meetings ought to be held to provide feedback about the progress of the complaints. The meetings should be considerate of different stakeholders; community, media, and civil society.

Complainants should also be informed of the time it would take to respond to their complaints

Who does the monitoring?

Monitoring puts into consideration the process of tracking complaints and assessing the extent to which progress is being made to resolve them. Respondents asserted that the co-

management committee, health centre director, chief nurse are charged with handling the monitoring process.

Hospital user groups' representatives should be involved in the monitoring process to ensure that client views, grievances, and interests are well captured and responded to.

3.4 FEEDBACK ON COMPLAINTS HANDLING PROGRESS

Are complainants informed of the results of investigation and actions taken?

While co-management committee members reported that complainants are sometimes given feedback when they have left their contact details, AGYW lamented that there are given any feedback on the results of the investigation and actions taken concerning the complaints lodged

"It is not easy to give feedback because complainants do not leave behind their contact details", mentioned a co-management committee member

Which channels are used to give complainants feedback?

Respondents revealed that feedback is provided through;

- Lectures, monthly meetings with the community,
- The community leader in case he knows the complainant's physical location,
- Telephone calls in case the complainant left his/her contact

3.5 ANALYSIS OF COMPLAINTS

How often are reports about complaints used to improve the provision of services?

The assessment was also conducted in a bid to find out if; the committee regularly analyze complaints reports and other monitoring and evaluation data, how often the analysis is done, and how reports used to enhance service delivery in order to minimize the number of complaints in the future.

Co-management committee members highlighted during focus group discussions that analysis reports are shared with the departments concerned with recommendations on how to improve their service delivery. They added that each department is informed of the issues raised about it

The committee should regularly analyze complaints reports and other monitoring and evaluation data and use it to enhance service delivery in order to minimize the number of complaints in the future

4.0 ASSESSING THE SPECIAL NEEDS OF AGYW

AGYW also responded to the questions below concerning the services they access

What are the Information needs of adolescent girls and young women?

- Information about their rights and obligations
- Information and empowerment on how to say No to unwanted sexual relationships
- Information about education opportunities
- Information on how they can express themselves and have their voices heard

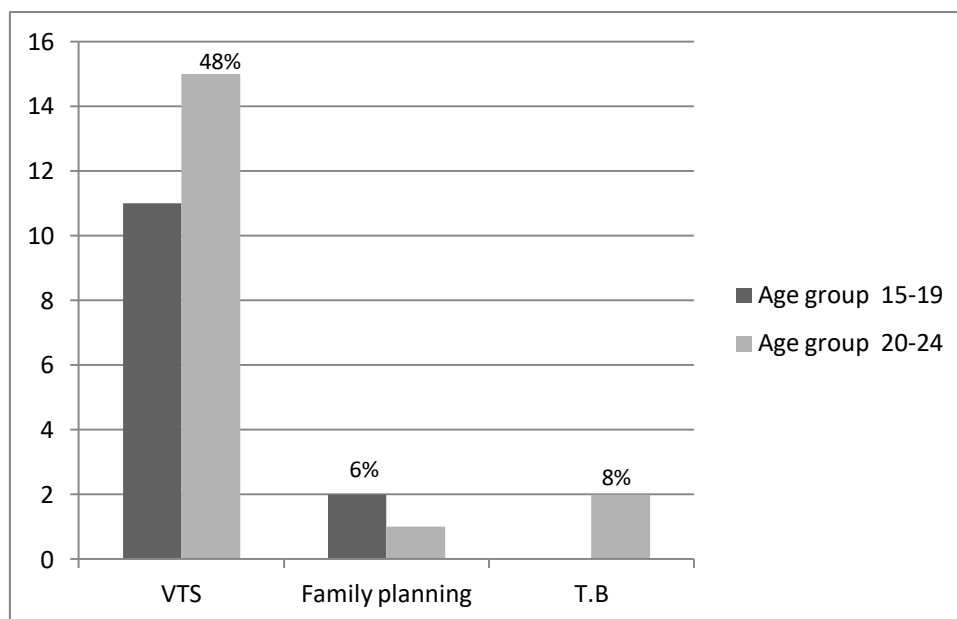
Health Information needs

- Information about family planning
- Information about HIV/AIDS prevention and treatment
- Information about the prevention and treatment of STIs
- Information about TARV; pre-TARV
- Information about early pregnancies and the risks involved
- Information about menstruation and hygiene
- Information about gender based violence

Which Services are frequently accessed by AGYW?

31 respondents revealed to have accessed the services offered by the health centre shown in the diagram below;

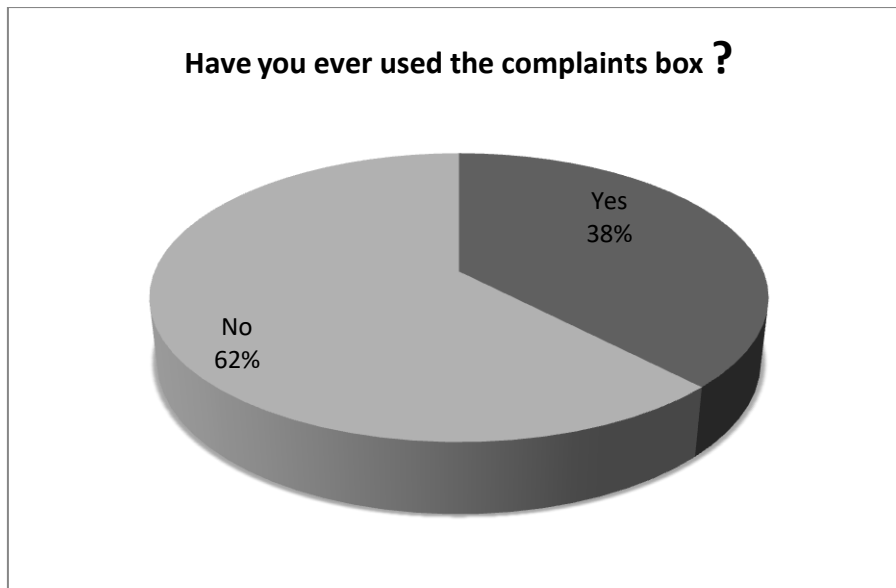
Age group	Services accessed		
	VTS & counselling	Family planning	T.B diagnosis
15-19	11	2	
20-24	15	1	2
Total	26	3	2



Have you ever used the complaints/ suggestion box at the health centre?

AGYW were asked if they have ever used a complaints box to report about the quality of services they accessed and 38% have ever used while 62% have never used the complaints box.

Have you ever used the complaints/ suggestion box?	Yes	45	38%
	No	74	62%



Which groups of people in your community are more likely to have limited access to information about the health centre services?

- Women lack information and are always dependent on their husbands as the only sources of information they need for almost every decision they need to make.
- The elderly also lack information due to the language barrier challenge
- Persons living with mental and physical disability,
- Adolescents and youths,
- The elderly,
- Political parties' affiliates

What can be done to help more people access information about the health centre services?

- More sensitization campaigns in the communities to help them know their rights especially the right to access information and gender equality. This can be achieved through educative lectures,
- Messages should be communicated in local languages and pictures as well to help all groups of people in the community understand
- There is need to refer some cases to the social Action sector

- Sensitization campaigns should not be politically motivated and the language used should be non-partisan

5.0 RESPONDENTS' RECOMMENDATIONS

Health centre co-management committee members and AGYW who participated in the assessment provided the responses below as to whether they are satisfied with the use of the complaint/ suggestion boxes or not, and further made recommendations on how their use can be improved.

Are you satisfied with the use of complaint boxes by clients?

Health co-management committee members were asked if they are satisfied with the way the health centre clients use the complaint boxes and they affirmed that they are. This is because the boxes are used in a positive way in order to improve service delivery and the functioning of the health centre.

Others said they are satisfied because AGYW leave many complaints / suggestions which help improve the services provided by the health centre

Are you satisfied with the way the health centre responds to the complaints?

AGYW and health centre co-management committee members also responded to the question as to whether they are satisfied with the way the health centre responds to the complaints and some said they are satisfied because the complaints are read and resolved with the respective departments where they were directed

Others said they were not satisfied because it is difficult to follow up and give feedback when the complainants do not leave their contact details on the complaint form.

What actions can be taken to improve awareness about the existence of the suggestion boxes?

According to the respondents the following actions should be taken;

- Offering more information about the location and accessibility of the boxes

- Conducting sensitization sessions about the advantages of using the complaints box

What can be done to ensure that more health centre users especially AGYW use the complaints/ suggestion box?

- Informing the users about the advantages of using the boxes
- Providing basic and easy to understand information on how to lodge complaints and use the boxes
- Provide information about the complaints boxes at the SAAJ section
- Through massive dissemination of information about the importance of using complaint boxes on community radio and TV

What can be done to improve the utilization of the complaints boxes by the co-management committee and the health centre management?

- There is need for more training on the handling of complaints
- Need to install complaint boxes at all departments for effective monitoring of complaints
- There is need for massive dissemination of information about importance of using complaint boxes in improving service delivery and accountability
- Guidelines should be formulated to guide users on how to lodge complaints, make reference, and give feedback to complainants
- There is need to improve the frequency of opening the boxes to read complaints to enable response to cases that might require immediate intervention. 30 days might be so many for some cases.

6.0 CONCLUSION AND RECOMMENDATIONS

Conclusion

The assessment evaluated 7 de Abril Health centre use of complaint boxes and established that there is organizational commitment toward complaints handling which is manifest in the existence of 3 complaint boxes as complaints handling mechanisms. It was also discovered that the health centre has in place personnel that are charged with the responsibility of leading the complaints handling process. On the other hand, the health centre lacks internal policies, tools, and guidelines to give direction on how to handle complaints.

Recommendations

Organizational commitment

1. The co-management committee needs to include in its plans the effective use and monitoring of accountability mechanisms like the complaints/ suggestion boxes where health centre users' grievances are heard and the health centre held accountable.
2. It is recommended that AGYW be represented on the health centre co-management committee as a means of ensuring that their pressing health issues including those raised in the complaint boxes are heard and followed up to the point of resolution
3. The Health centre co-management committee should ensure that youth especially AGYW are involved and represented in activities pertaining to complaints handling
4. The health centre co-management commitment should incorporate complaints handling among the key activities with clear timelines and specify who is responsible for the realization, reporting, and monitoring of the activity.
5. Whereas the project guidelines stipulate that the committee should devote 10 minutes of the meeting to discuss complaints, activities like public lectures, sexual reproductive health and rights sessions, radio programmes, among others should be used as platforms to disseminate information about the use of complaint boxes.

6. The respondents' suggestion of having a suggestion box each department should be explored with the view of improving the verification and follow up of issues raised for the respective departments
7. There is need for the 7 de Abril Health centre to disseminate information in the community about the existence of the complaints/ suggestion box and the relevance of using it in improving the quality of services provided

People handling the complaints

1. Members working on complaints handling should be provided with the necessary training so that they can effectively carry out their roles. Refresher trainings should be conducted for those who already received training

Complaint handling processes

2. Standardized policies or guidelines ought to be formulated for the co-management committee and the health centre users to orient them on the complaints handling processes. These should be easy-to-use and a language understood by all.
3. Besides policies and guidelines, there should user-manuals for both the hospital clients and the co-management committee. The co-management committee manual should be rich with content of how to register, analyze, refer complaints, and provide feedback to clients. The health centre clients' manual on the other hand should specify how to write a complaint, where to lodge the complaint, and necessary actions to take in case of dissatisfaction with the complaints handling outcomes
4. Complainants should be informed of the receipt of their complaints and provided with periodic progress updates
5. The complaints form should include the telephone contact of the complainant so that they can be contacted for feedback about the progress made on the complaint
6. Meetings ought to be held to provide feedback about the progress of the complaints. The meetings should be considerate of different stakeholders; community, media, and civil society.

7. Complainants should also be informed of the time it would take to respond to their complaints
8. Hospital user groups' representatives should be involved in the monitoring process to ensure that client views, grievances, and interests are well captured and responded to.
9. The committee should regularly analyze complaints reports and other monitoring and evaluation data and use it to enhance service delivery in order to minimize the number of complaints in the future

REFERENCE

Fact Sheet: Right to Participation Available at <http://www.unicef.org/crc/files/Right-to-Participation.pdf>. 21

International Convention on the Elimination of All Forms of Discrimination against Women (Women's Convention), G.A. Res. 34/180 (entered into force Sept. 3, 1981)
Feedback Matters - Designing Effective Complaints Handling Mechanisms, (Demand for Good Governance "How To" Learning Note Series)

Annex 1: Assessment tool

An assessment of the utilization of complaints boxes in 7 de Abril Health centre

Assessment questions for health co-management committee members

What is the role of the health co-management committee?
What is the composition of the committee? How many women and how many men?
What is your role on the committee?
How long have you been a committee member?
How often does the committee meet?
What issues are discussed during committee meetings?
Are youth and adolescents represented during the committee meetings? Are their views considered?
Are issues of sexual reproductive health elaborated or given priority? (Please explain)

Has the health centre got any complaints handling system? (please mention if any)
How does the hospital respond to complaints from the clients?
Does the hospital have a suggestion/ complaints box? Where is it located? Do you think it is well located and accessible to the health centre clients? If not, what is the best place to place the suggestion box and why? Are hospital users aware of the existence of the complaints/suggestion box?
How many suggestion boxes should the health centre have and why?
Who manages the box? How often are the complaints read?
Who participates in the meetings where complaints/ suggestions are read?
Is there a manual or guidelines that guide user on how to use the suggestion box/ lodge complaints?
How often is the suggestion/ complaints box opened?

Are you satisfied with the usage of the complaints box by hospital clients? (Please explain)

Are you satisfied with the way the hospital responds to the complaints/ suggestions left in the box?
(Please explain)

What actions are taken to raise awareness about the existence of the suggestion box?

Are meetings held to offer complainants feedback on the progress of the matters raised in the boxes? How often?

What can be done to improve utilization of the health centre complaints box?