

PRIMARY CARE IN CENTRAL VIETNAM: Measurement, Assessment and Perception of Users and Providers

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SUMMARY

This dissertation aimed to provide an evaluation from different views (users and providers) of the primary care system through validated and reliable instruments for use in Vietnam. Different research methods were used to address this goal in two phases: Phase 1: Development and validation of the primary care assessment tools for use in Vietnam; and Phase 2: Assessment of primary care quality in Central Vietnam from users and providers' view.

Methods and important findings of this work:

- **Phase 1:** Applied strictly standardized guidelines for translation and cultural adaptation of the Primary Care Assessment Tool (PCAT). Afterwards, the validation studies were performed on the data of 3289 users and 150 primary care physicians (PCPs).

→ Both the expanded Vietnamese adult consumer version of the PCAT (VN PCAT-AE 9 scales, 70 items) and the Vietnamese provider version of the PCAT (VN PCAT-PE 9 scales, 116 items) demonstrate adequate internal consistency and validity to be used as an effective tool for measuring the quality of primary care in Vietnam from the perspective of both users and providers.

- **Phase 2:** Users' survey: VN PCAT-AE was used to interview 1662 people who utilized primary health care services at least once over the past two years in various types of facilities in central Vietnam. Providers' survey: a mixed-methods study. VN PCAT-

PE was used to interview 150 PCPs and afterwards, a qualitative study consisting of in-depth interviews with 22 PCPs aiming to gain insight on barriers of primary care services and how to overcome them.

→CHCs were associated with the highest overall primary care quality as well as high scores in nearly all individual domains of primary care quality experienced by users compared with other types of facilities.

→There is a consistency of this evaluation from both the supply and demand-sides such as they rated Ongoing Care and First Contact as the best primary care attributes and the Coordination domain was considered as the poorest performance of CHCs.

→Three challenges that PCPs face during their daily practice: 1) patient factors such as client attitude and knowledge, 2) provider factors such as the burden of administrative work and lack of training opportunities, and 3) contextual factors such as low income and lack of resources including medicines and diagnostics.

CONCLUSION

This dissertation delivers a valid and reliable tool set - VN PCAT-AE and VN PCAT-PE to measure the quality of primary care from the perspective of both users and providers in Vietnam. A combined use of these tool allows to examine the primary care performance on a comprehensive manner, to identify the gap in views between primary care users (demand side) and providers (supply side) in Vietnam.

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FULL TEXT

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