A Comparative Study of Government Hospital & Private Hospital Staff & Patient Relationship With Special Reference To Navi Mumbai

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ABSTRACT

The sociology of healthcare is the focus of this study, which looks at the interactions between employees and patients at Navi Mumbai's public and private hospitals. It investigates how social structures, cultural practices, and organizational designs influence these interactions within healthcare settings. The study begins with a sociological overview of health, then delves into the evolving concepts of health, highlighting the critical role of hospital organization and management. It discusses the structural and functional differences between hospitals, emphasizing their importance within the healthcare framework. The main focus over here is a comparative study of government and private hospitals, with a particular emphasis on the staff-patient interactions. The research observes how these relationships differ between the two hospital types and considers the impact on patient care, staff morale, and overall hospital performance. The study aims to discover the strengths and weaknesses of each system, ultimately providing suggestions to enhance staff-patient relationships and improve the quality of healthcare services in Navi Mumbai.

Keywords: Health, Hospital, Management, Healthcare, Patient Interaction, Hospital Organization, Patient Satisfaction, Staff Communication, Quality of Care

INTRODUCTION

A holistic definition of wellbeing, health comprises not only the absence of disease but also one's physical, mental, and social well-being. From a sociological perspective, health is deeply embedded in social structures, cultural norms, and environmental conditions. Factors such as socioeconomic status, education, and access to healthcare play a crucial role in shaping individual and community health outcomes. Overtime, the notion of health has expanded from focusing solely on disease to incorporating a broader understanding that includes quality of life and preventive care. Sociology sheds light on how social factors affect health by presenting health and illness as not just biological issues but also social constructs influenced by external conditions and societal norms. Differences in socioeconomic position can influence the distinctions in approach to patient care and clinical outcomes. Additionally, cultural beliefs and social norms significantly influence health behaviors and attitudes towards healthcare. Recognizing these social determinants is essential for addressing the varied needs of different populations and enhancing health equity. Hospitals are pivotal in the healthcare system, providing essential medical care through complex

structures that require efficient organization and management. Hospitals feature various departments and roles that must collaborate effectively to deliver comprehensive care. Proper management is crucial for overcoming administrative and operational challenges while ensuring high-quality care. The organizational structure of hospitals highlights the necessity for coordinated healthcare delivery, integrating various medical specialties, support services, and administrative functions.

A fundamental aspect of high-quality healthcare is the doctor-patient relationship, which is central to effective treatment and patient satisfaction. This relationship is built on trust, empathy, and open communication, allowing patients to feel understood and engaged in their care. Successful doctor-patient interactions are driven by a doctor's ability to establish rapport, comprehend patient needs, and work together on care plans. These elements are vital for fostering trust and ensuring patients follow treatment recommendations.

Key factors that enhance a positive doctor-patient relationship include effective communication, empathy, and a commitment to personalized care. Research indicates that patients who perceive their doctors as empathetic and attentive report higher satisfaction and better health outcomes. The core elements of this relationship trust, empathy, communication, and respect are critical for creating an effective and supportive healthcare environment. The benefits of a strong doctor-patient relationship extend beyond individual care, impacting overall healthcare delivery and outcomes. In a similar vein, attentive and patient-centered care depends on the nurse-patient interaction. Nurses address both the emotional and medical needs of patients daily, and building a strong relationship is essential for making patients feel valued and understood. This relationship develops through phases: initial rapport-building, active care, and the conclusion of care goals. Effective nurse-patient relationships are shaped by factors such as communication skills, empathy, and stress management, all contributing to a trusting and positive care experience.

This study investigates the differences in staff-patient relationships between government and private hospitals in Navi Mumbai. It explores how distinct organizational structures, management styles, and resources at these institutions influence interactions between staff and patients. By comparing these relationships, the research aims to reveal their impact on patient care and staff satisfaction. Government hospitals, facing challenges such as high patient volumes and limited resources, are crucial for providing essential healthcare, while private hospitals, with their greater resources, focus on personalized and high-quality care. The study seeks to identify effective practices and address challenges to improve healthcare delivery, offering insights into optimizing staff-patient relationships across various hospital settings.

METHODOLOGY
Objectives of the Study
- To understand the organizational structure of hospitals.
- To study the patient and hospital staff relationship in the context of mental, social and economic well-being.

Sampling
The sampling method which the researcher has adopted here is non-probability purposive sampling. The study's sample size consists of twenty respondents, ten from government hospitals and ten from private hospitals.

DATA COLLECTION AND ANALYSIS
Data Collection
Keeping objectives in mind the researcher has collected the data through interview schedule as a tool of primary data collection.

The researcher has also used secondary sources like scholarly articles for the data collection of the research.

Data Analysis
In this study , the researcher has taken help of manually generated computerized data and have found conclusions from the data derived.

CONTENT AND DISCUSSION

In examining the comparative study of staff-patient relationships in government and private hospitals in Navi Mumbai, a variety of sociological theories offer insightful perspectives. These theories help us understand the different ways healthcare staff and patients interact within these settings.

Functionalism Theory views society as a complex system where each part plays a role in maintaining stability and order. Applied to hospitals, this theory helps us understand how both government and private hospitals function to meet healthcare needs. Government hospitals, which handle a wide and varied patient base, contribute to social stability by providing essential services despite challenges like high patient volumes and limited resources. Private hospitals, by contrast, offer specialized, high-quality care and emphasize patient comfort, fulfilling a different role within the healthcare system. Functionalism helps to highlight how each type of hospital supports the overall health infrastructure in Navi Mumbai.

Labelling Theory explores how societal labels affect behavior and interactions. In hospitals, labels based on patient status or conditions can influence staff-patient dynamics. For instance, patients in government hospitals might face stigmatization due to the high volume of cases or perceived lower status, potentially impacting their treatment experience. In private hospitals, labels might be related to socioeconomic status or the level of care received, affecting how interactions and care are perceived. This theory sheds light on how such labels influence patient experiences and staff attitudes in different hospital settings.

Symbolic Interactionism Theory examines how people create and interpret symbols and meanings through social interactions. In hospitals, the way staff and patients communicate, including language and non-verbal cues, significantly affects their relationships. Government hospitals might see more impersonal interactions due to high patient turnover, whereas private hospitals might offer more personalized communication, reflecting a focus on patient satisfaction. This theory helps reveal how these symbolic interactions shape staff-patient relationships.

Social Conflict Theory emphases the supremacy struggles as well as distinctions in social structure. In the hospital context, it helps to analyze how disparities in resources and power affect staff-patient relationships. Government hospitals often face bureaucratic constraints and limited resources, which can lead to unequal treatment and strained interactions. Private hospitals, with their greater resources, may create different power dynamics, potentially improving patient experiences but also introducing new inequalities. This theory highlights how power imbalances affect the quality of care and interactions in both types of hospitals.

Health Belief Model Theory looks at how individuals' perceptions of health risks and benefits influence their behaviors. In hospitals, patients' beliefs about their health, treatment efficacy, and outcomes impact their interactions with healthcare staff. For instance, patients in government hospitals might have varied

beliefs about care quality, affecting their engagement and adherence to treatment. In private hospitals, clients could be more focused through the regarded advanced value of concern. This model helps understand how these beliefs shape staff-patient relationships.

Marxist Theory of Health examines the impact of economic factors and class structures on health and healthcare. This theory can be applied to explore how economic differences between government and private hospitals affect staff-patient relationships. Government hospitals often serve lower-income patients with fewer resources, while private hospitals cater to wealthier individuals with more access to high-quality care. This economic divide leads to different patient experiences and interactions, highlighting how class and economic conditions impact healthcare delivery.

Social Ecological Model Theory of Health considers the multiple layers of influence on health outcomes, from individual to societal levels. In hospitals, this model helps analyze how various factors such as hospital policies, community resources, and individual behaviors affect staff-patient relationships. Government hospitals might be impacted by broader social and environmental factors, while private hospitals may have more control over their internal environment but still face external influences. This model provides insight into how these layers affect healthcare interactions and outcomes.

Social Cognitive Theory explores how individuals learn from observing others and how these observations influence behavior. In hospitals, both staff and patients learn from each other's behaviors and interactions. For example, patients might mimic staff behavior, and staff might adjust their approaches based on patient reactions. This theory helps understand how observational learning impacts staff-patient relationships and care quality.

Peplau's Theory of Interpersonal Relations focuses on the development of the nurse-patient relationship through various phases: orientation, working, and resolution. This theory is precisely pertinent here for interpretating therapeutic interactions. In government hospitals, nurses might face difficulties in developing relationships due to high patient numbers and time constraints. In private hospitals, nurses might have more opportunities for deeper interactions. This theory provides insights into how these relationships evolve and affect patient care in different settings.

The study of attribution theory looks at how people interpret and comprehend the motivations behind both their own and other people's behaviours.. In health facility clinic, both personnel and healthcare recipient feature factors to health concerns and patient care quality. Patients might link their health outcomes to the quality of care or personal factors, while staff might attribute patient behaviors to various influences. Understanding these attributions helps analyze how they shape staff-patient interactions and perceptions of care in government versus private hospitals.

By integrating these theories, the study offers a detailed analysis of how staff-patient relationships differ between government and private hospitals in Navi Mumbai, providing a nuanced understanding of how various social and organizational factors influence healthcare delivery. In exploring staff-patient relationships in government versus private hospitals in Navi Mumbai, it's essential to understand health from a sociological perspective. A comprehensive sense of well-being that includes social relationships, mental clarity, and physical fitness is what is meant by the term "health," which goes beyond simply being free from disease.. It means feeling good in your body, having a positive mindset, and maintaining supportive relationships with others. True health involves balancing these aspects to lead a fulfilling and active life. This state is shaped by various social factors, including socioeconomic status and educational opportunities. Over time, health concepts have expanded from merely treating disease to focusing on overall quality of life and prevention. Hospitals, whether government or private, are organized to address

these needs differently. Government hospitals often deal with high patient volumes and resource constraints, while private hospitals provide more personalized care. The quality of doctor-patient and nurse-patient relationships is crucial, with each hospital type impacting these interactions in unique ways due to their organizational and resource differences.

The literature review also encompasses various scholarly articles that shed light on the dynamics of staff-patient relationships. One article explores how management practices in hospitals impact doctor-patient interactions, emphasizing the role of effective management in enhancing communication and care quality. Another study focuses on how nurse-patient interactions affect patients' sense of meaning in life, underscoring the significance of meaningful relationships for patient well-being. Research on nurse staffing reveals a direct link between adequate staffing levels and better patient outcomes, while another study highlights the importance of doctor-patient communication from both perspectives, linking it to patient satisfaction. Observational research shows how staffing levels affect nurse-patient interactions, and a systematic review assesses the broader impacts of nurse-patient ratios on patient and staff outcomes. Furthermore, a causal analysis study evaluates the components influencing staff insights of patient healthcare and patient experience. Another article connects patients' perceptions of care with hospital safety measures, emphasizing the role of patient feedback. A pilot study investigates how hospital staff meet patients' spiritual needs, and a systematic review addresses the impact of staff well-being and burnout on patient safety, stressing the need for staff support to ensure high-quality care.

FINDINGS OF PATIENTS'

- In government hospitals, most respondents are aged 25-30, while in private hospitals, the majority are 20-25. Government hospitals have a higher percentage of male respondents (60%), while private hospitals have more females (60%). Employment rates are higher in private hospitals (80%) compared to government hospitals (60%). Both types of hospitals have a similar percentage of graduates (60%) and families (80%) are mostly nuclear in both settings.

- Income distributions show that in government hospitals, many respondents earn between 1,00,000-2,00,000, whereas in private hospitals, most earn between 1,50,000-2,00,000. About 60% of government hospital patients and 80% of private hospital patients visited due to past illnesses. In terms of health check-ups, 40% of government hospital patients do them as needed, while 40% of private hospital patients do them annually.

- Private hospitals have better appointment booking satisfaction (60%) than do government hospitals (40%). Waiting times are shorter in private hospitals, with 40% of patients waiting 15 minutes versus 30 minutes in government hospitals. In addition, private hospitals report greater levels of interaction satisfaction 40% rate good to very good, compared to 20% in government hospitals..

- Compared to government hospitals, which have 60% satisfied doctors, private hospitals have 60% highly satisfied doctors. Feedback on treatment quality is very good for 60% in private hospitals but only good for 40% in government hospitals. Guidance from doctors is rated as good by 40% in government hospitals and kind by 40% in private hospitals.

- Financial challenges are more significant in government hospitals (60%) compared to private hospitals, where 40% cite financial management and pain. Communication clarity is preferred by 60% of government hospital respondents and 80% of private hospital respondents. Satisfaction with response to questions is rated as very good by 40% of private hospital patients, compared to 40% in government hospitals.

- Cleanliness is seen as average in government hospitals (60%) but better in private hospitals (40% satisfied to very satisfied). Mental health ratings are similarly positive across both types of hospitals. Staff professionalism is viewed as average in government hospitals and very good in private hospitals Patients in government hospitals assess their overall experience as good, whereas patients in private hospitals view it as very good.

- Both hospital settings see a call for increased meeting times with staff to improve well-being, with 60% of private hospital patients agreeing. Satisfaction with staff is high in private hospitals, with 40% finding it good, compared to 80% of government hospital patients rating it decent to very good. Government hospital patients value good relationships with staff for treatment and social connections, while private hospital patients appreciate staff professionalism and emotional support.

- Reduced readmissions are observed by 60% in government hospitals, whereas 40% of private hospital patients benefit from organized game sessions. Mental well-being support from staff is valued equally in both hospital types. Trust, knowledge, and communication are key factors in staff relationships, with government hospital patients emphasizing trust and private hospital patients highlighting good behavior and communication.

- Advanced technology is seen as beneficial for detecting issues and improving relationships in government hospitals (60%), while private hospitals (40%) see it as enhancing efficiency. Feedback on individual needs is rated very good by 60% in private hospitals compared to good by 40% in government hospitals.

- Recommendations for staff improvement vary, with empathy and positivity suggested for government hospitals and better communication skills for private hospitals. Overall, experience ratings are positive in both settings, with 40% of government hospital patients and 40% of private hospital patients finding their experience good.

FINDINGS OF HOSPITAL STAFF

- Government hospital staff are mainly 25-30 years old (60%), male (60%), and nurses (60%), earning 2,00,000-3,00,000.

- Private hospital staff are mostly 30-35 years old (60%), female (60%), and include nurses and ward boys (40%), earning between 1,00,000-3,00,000.

- Both hospitals emphasize in understanding and communication, with government staff focusing on active listening and reassurance, and private staff on empathy and professionalism. Both hospitals that is government and private face time constraints and find assistance programs and understanding patients' perspectives essential.

CONCLUSIONS

- Effective healthcare depends on the complex interaction between hospital staff and patients, influenced by mental, social, and economic well-being.

- Government hospitals should focus on cultural sensitivity and affordability, integrating mental health and social services.

- Private hospitals must emphasize transparent communication about costs and personalized care.

- Working together with mental health specialists and providing continuous empathy and communication training to staff members are crucial.

- Patients should actively communicate concerns and seek information about available support services.
- The goal is to create a trusting, respectful environment that enhances overall well-being.
- The relationship between hospital staff and patients is shaped by societal structures and influences.
- Government hospitals reflect principles of equity and inclusivity, aligning with sociological views on societal impact on health.
- Private hospitals highlight individual agency and economic factors, with a focus on personalized care.
- Continuous training in cultural competence and communication benefits all hospital staff.
- Patients can use sociological concepts of agency to assert their needs and preferences.
- The hospital-staff-patient dynamic is embedded in broader societal norms and structures.
- Symbolic interactionism shows that staff-patient interactions involve symbolic meanings affecting health perceptions.
- Government hospitals' focus on affordability aligns with social justice principles, recognizing social determinants of health.
- Private hospitals' personalized care reflects individual agency and economic considerations.
- Effective communication, trust, and collaboration are crucial across all hospital settings.

SUGGESTIONS FOR PATIENTS'

- Active Communication: Clearly express your concerns and expectations to hospital staff, and ensure you understand your treatment plan.
- Seek Support Services: Ask about and use available counseling, social services, or community programs for overall well-being.
- Discuss Financial Issues: Openly discuss any financial concerns with your healthcare providers and explore financial assistance options if needed.

SUGGESTIONS FOR HOSPITAL STAFF

- Patient-Centered Communication: Treat patients with dignity and respect while clearly explaining their medical conditions and treatment plans to build trust through empathetic interactions.
- Ongoing Training and Collaboration: Regularly enhance skills with cultural competency training and work with other healthcare professionals using a team-based approach for comprehensive, holistic care.

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