

**SERVICE QUALITY PERCEPTION AND LEVEL OF SATISFACTION AMONG
OROMIA AIDS RESOURCE CENTER YOUTH BENEFICIARIES, SOUTH –EAST
ETHIOPIA**

**By
Belay Aurgessa Edo**

**Indira Gandhi National Open University
School of Social Work**

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Addis Ababa, Ethiopia**

SERVICE QUALITY PERCEPTION AND LEVEL OF SATISFACTION
AMONG OROMIA AIDS RESOURCE CENTER YOUTH BENEFICIARIES,
SOUTH-EAST ETHIOPIA

MSW Dissertation Research Report

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Prepared by BelayAurgessa Edo

Enrollment No : 099130777

Project Supervisor: Tilahun Abegaz (Mr.)

Indira Gandhi National Open University
School of Social Work

May, 2014

Addis Ababa , Ethiopia

DECLARATION

I here by declare that the dissertation entitled: Service quality perception and level of satisfaction among Oromia AIDS Resource Center youth beneficiaries, South-East Ethiopia submitted by me for the partial fulfillment of the MSW to Indira Gandhi National open University,(IGNOU), New Delhi is my own original work and has not been submitted earlier, either to IGNOU or to any other institution for the fulfillment of the requirements for any other program study.

I also declare that no chapter of this manuscript in whole or in part is lifted and incorporated in this report from any earlier work done by me or others.

Place: Addis Ababa, Ethiopia

Date: May/15/2014

Signature_____

Name: Belay Aurgessa Edo

Enrollment No:099130777

Address: Addis Ababa

Telephone: 0911669632

E-mail: getuargee@yahoo.com

CERTIFICATE

This is to certify that Mr.Belay Aurgessa Edo who is a student of MSW from Indira Gandhi National open University, New Delhi was working under my supervision and guidance for his project work for the course MSWP-001 his project work entitled, Service quality perception and level of satisfaction among Oromia AIDS Resource Center youth beneficiaries, South-East Ethiopia.

Place: Addis Ababa, Ethiopia

Name of Supervisor_____

Signature _____

Address of Supervisor_____

Date:_____

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ACRONYMS

AIDS	-----	Acquired Immune Deficiency Syndrome
ARC	-----	AIDS Resource Center
ART	-----	Anti-Retroviral Treatment
BSS	-----	Behavioral Surveillance Survey
CBOs	-----	Community Based Organizations
CDC	-----	Center for Disease Control
DHS	-----	Demographic Health Survey
IEC	-----	Information, Education, Communication
ISY	-----	In-School Youth
FDRE	-----	Federal Democratic Republic of Ethiopia
FMOH	-----	Federal Ministry of Health
FBOs	-----	Faith Based Organizations
FHAPCO	-----	Federal HIV/AIDS Prevention and Control Office
GOs	-----	Governmental Organizations
HCT	-----	HIV Counseling and Testing
HI	-----	Human Immunodeficiency Virus
NARC	-----	National AIDS Resource Center
NGO	-----	Non-Governmental Organizations
OARC	-----	Oromia AIDS Resource Center
OSY	-----	Out of -School Youth
PLWHA	-----	People Living with HIV/AIDS
PMTCT	-----	-Prevention of HIV from Mother to Child Transmission
RHS	-----	Reproductive Health Service
STIs	-----	Sexually Transmitted Infections
TB	-----	Tuberculosis
UNAIDS	-----	United Nations program on HIV/AIDS
VCT	-----	Voluntary Counseling and Testing

ABSTRACT

Cognizing of the drastic impact of the deadly disease HIV/AIDS, it was soon after the first evidence of the virus in Ethiopia that in 1998, a National HIV/AIDS Policy was endorsed by the parliament. The National HIV/AIDS Policy calls for information, education and communication (IEC) programs to inform the population about the risk factors and encourage people to adopt protective behavior (The FDRE,1998). As integral part of informing ,educating and communicating the community about HIV virus , the government of Ethiopia established the National AIDS Resource Center in Addis Ababa city and other Regional AIDS Resource centers in each region .Hence ,Oromia AIDS Resource Center (OARC) which is found in Adama town is the AIDS Resource Center which is established for the provision of different IEC services on Reproductive Health, HIV/AIDS, Sexually Transmitted Diseases (STDs), and Tuberculosis (TB).(OARC,2005)

This study was conducted for assessing the service quality and level of satisfaction among the youth beneficiaries of Oromia AIDS Resource Center which is found in South East Ethiopia ,Adama town. While conducting this research to assess and understand the service quality perception and level of satisfaction among OARC youth beneficiaries, the researcher used descriptive research which require using the mix of both quantitative and qualitative techniques and simple random sampling method to select the samples from the targeted youth .

To collect the necessary quantitative data in response to the major research questions, the researcher used self-administered close ended questionnaires. Additionally, to get the deeper views and perception of the study population, un structured interviews and focus group discussions were also conducted. And also document review and personal observation were an integral part of this research.

Using the attendance sheet of the service users which is found in the Resource Center as a sampling frame and using simple random sampling method ,a total of seventy six sample youth respondents were selected and included in the study. And also an in-depth interview was also conducted with a total of twenty three interviewees and also a discussion was also conducted with a total of twelve Focus Group discussion participants.

In this way ,various data and information which are vital for assessing and measuring the service quality perception and level of satisfaction of the youth beneficiaries on the adequacy and quality of the ARC infrastructures and its services comprising the internet, library, Audio-Visual, printing and photo copy services and the adequacy ,competency and preparedness of the OARC staff from the views and opinion of the youth beneficiaries and other attributes which are believed to examine and measure the level of satisfaction they have on the quality of OARC services were collected , analyzed and interpreted. As an integral part of these, other information which are vital for identifying the major strengths and constraints that may affect the service quality and effectiveness OARC werealso adequately collected, analyzed and interpreted.

Accordingly, as the field level findings reveal, substantial number of the youth beneficiaries addressed by this study have highly valued and recognized the usefulness of the services provided by OARC. While assessing the views and opinions of the beneficiaries regarding the usefulness of the resource center services, substantial percentage of them agreed on the usefulness of the ARC services comprising: 86% on the internet services, 80% on the library services, 89% on the printing ,82% on photo copy , 82% on the printing and 71% on Audio-Visual services.

However, the opinion of the beneficiaries on the adequacy of each service is quite different. Only few of them agreed on the adequacy of the Resource Center Services.(Only 22% reported on the adequacy of the internet services, 18% on the library,1% on the printing,14% on photo copy service and 9% on the audio-visual services). Considerable percentage of them ,64% and 68% said the internet service and the library services are somehow adequate and 88% of them said the printing service is not adequate ,86% said the photo copy service is not adequate and 78% of them said the audio-visual service is not adequate. This shows that despite the existence of high understanding on the usefulness of the resource center services, the effort made to respond their demand through availing adequate services is not comparable with the prevailing demand of the users.

Similarly, while assessing the general level of satisfaction they have on the overall quality of the resource center services, a part from those relatively good satisfaction rates reported on the internet services (83%) , library service (76%,) office facilities (91%) and on staff support (84%), high dissatisfaction rate were reported on the overall service quality of the photo copying, printing and Audio –visual services of the Resource Center.

Also, the good satisfaction rates which are observed on the office facilities, internet and library services are not mean without limitations. Even though, considerable of the respondents reported the general satisfaction they have on the office location & its facilities and on the library and internet services, same proportion of them were dissatisfied with the adequacy and cleanness of the toilet rooms (78% dissatisfied & 13% very dissatisfied) and 76% of them were neither satisfied nor dissatisfied with the waiting time to get the internet service.

With the same scenario, while assessing the overall satisfaction level of the beneficiaries regarding the accessibility and adequacy of the AIDS Resource Center infrastructure including the accessibility of the office location, its opening hours, the adequacy of the office space, furniture's and utilities, generally a good level of general satisfaction (91%) was reported. The highest level of dissatisfaction (78%) and very dissatisfaction rates (13%) were also reported on the adequacy and cleanness of the toilet rooms.

The other undisputable finding from the assessment conducted on the general satisfaction rate of the beneficiaries was on the staff support. Substantial percentage of the respondents (84%) reported the overall satisfaction they had on the staff support. However, slight variation of opinion was observed on the adequacy, competency and preparedness of the staff. Accordingly, while 57% of the respondents said the staff number are somehow adequate, only 5% of them said the staff number is not adequate. Similar trend was observed on the competency and preparedness of the OARC staff. Accordingly, while 46% of the respondents say the staff are somehow competent and moderately prepared (51%), the remaining few of them said the staff are not competent (4%) and not prepared at all (4%).

CHAPTER ONE

INTRODUCTION

1.1-Background of the Study

Since its first identification in the early of 1980's, the pace at which the deadly HIV/AIDS virus is spreading and claiming life is quite dramatic. The 2010 report of UNAIDS on the global AIDS epidemic shows, worldwide there are 1.7 million people who have died due to AIDS, 2.5 million people have become newly infected and a total of 34.2 million people are living with the virus. Compared to other countries of the world, Sub-Saharan Africa has remained the most affected region of the continent. It is estimated that 23.5 million newly infected people have resided in sub-Saharan Africa. (UNAIDS, 2011).

The unfortunate fact is that Ethiopia is among those countries which are highly affected by the HIV epidemic. According to the Country Progress Report on HIV/AIDS response, with an estimated adult prevalence of 1.5%, Ethiopia has 800,000 people living with HIV/AIDS and about 1 million AIDS orphans. (HAPCO, 2012).

Cognizing of the drastic impact of the virus, it was soon after the first evidence of the virus in Ethiopia that in 1998, a National HIV/AIDS Policy was endorsed by the parliament. The policy underscores the need to empower women, the youth and other vulnerable groups to take action to protect themselves against HIV/AIDS. The National HIV/AIDS Policy also calls for information, education and communication (IEC) programs to inform the population about the risk factors and encourage people to adopt protective behavior (The FDRE, 1998).

As integral part of informing ,educating and communicating the community about this deadly virus,the government of Ethiopia established the National AIDS Resource Center in Addis Ababa city and other nine Regional AIDS Resource centers in each region .Hence Oromia AIDS Resource Center (OARC) which is found in Adama town is the center which is established for the provision of different IEC resources materials on Reproductive Health, HIV/AIDS Sexually Transmitted Diseases (STDs), and Tuberculosis (TB). (OARC,2005)

It is a governmental organization which was launched in March 2005 through an innovative and visionary public and private partnership between the National AIDS Resource Center, Oromia HIV/AIDS Prevention & Control Office, Federal HIV/AIDS Prevention and

Control Office, CDC and it is funded by the Global Fund to Fight AIDS, TB, and Malaria; and President Bush's Emergency Plan for AIDS Relief. (OARC,2005)

Replicating the activities of the National ARC, Oromia AIDS Resource Center shoulders the objectives of providing up-to-date information on HIV/AIDS, STDs, and TB. The AIDS Resource Center serves as a hub for hosting resources and, High-speed computer terminals with internet access services that are free of charge: including library collections on HIV/AIDS, VCT, PMTCT, ART, STDs, TB and other health-related materials. The library has periodicals, policy guidelines on HIV/AIDS, general and scientific books, brochures, videos, CD-ROMs, DVDs, audiocassettes, audio-visual services.(Oromia AIDS Resource Center, 2005).Throughout all these efforts , reducing the prevalence of high risk behaviors among the youth through designing and availing youth targeted behavioral change programs and services is one of the major objectives of OARC.(OARC,2005)

However ,while reviewing literatures ,despite the fact that several IEC interventions has been steadily growing over the last decade, program specific studies which integrate the views and perception of the beneficiaries on the adequacy and quality of the services which are designed for them in developing countries remains few. The few that are available tend to focus only on National scale BSS only addressing the statistical distribution of the virus among the studied population With out linking the adequacy and the quality of the HIV/AIDS prevention programs and services designed for the studied population.

Hence, even though assessing the statistical distribution of the epidemic on the studied population have substantial contribution in reflecting the magnitude of the disease among the studied population , when every behavioral change study is supplemented with practical evaluation of the views and perception of the beneficiaries on the adequacy and quality of all prevention efforts that are availed to them ,it will have substantial contribution in attaining the desired behavioral change. So, since the central theme of this research is to study the adequacy and quality of the Oromia AIDS Resource Center Services in view and perception of the youth beneficiaries, the findings from this research can serve as valuable input in improving the services of the Resource Center and also can be used to plan other effective interventions programs. Further, the study can also serve as a springboard by providing valuable information for other researchers who intends to investigate the issue further.

1.2-Statement of the Problem

It is a bare fact that service quality determines outcome and the influence of good quality perceptions on one's inclination to utilize services is beyond dispute. And also, poor service quality perception may, in fact, discourage the target population from using the available HIV/AIDS services and can also result in misunderstanding and even it can result resistance to behavior change. However, despite the fact that HIV/AIDS prevention and control intervention programs has been steadily growing over the last decade, most studies conducted on these programs have gaps in conducting an in-depth study on the adequacy and quality of these programs in view of the targeted beneficiaries.

As the literatures reviewed by the researcher reveals, in most developing countries studies focusing on assessing the views and perceptions of beneficiaries about the adequacy and quality of services which are designed for them and the satisfaction level they have on the services they are getting have been largely ignored. Users' satisfaction and service quality data has not been adequately collected and published to help the improvement of the prevention efforts. The few that are available tend to focus only on the statistical distribution of HIV/AIDS among the studied population. In effect, misunderstanding of the target communities needs and service quality perception and level of satisfaction has led to an underutilization of the existing HIV/AIDS services and it has hindered the overall achievement of the desired behavioral change.

Several studies reviewed by the researcher also reveal this. Particularly, despite the availability of various youth targeted HIV/AIDS prevention programs, high risk taking behavior such as watching pornographic films; drinking alcohol, chewing kchat and the practice of unsafe sex among the Ethiopian youths are still prevalent and makes them highly vulnerable to the risk of HIV infection. To reverse this situation through targeted and innovative approach, there is a need to conduct a deeper assessment and study on the adequacy and quality of those HIV/AIDS prevention services which are designed for the targeted population. Therefore, this study intends to fill this gaps through conducting an in-depth study on those variables and attributes which have significant contribution for measuring the adequacy and quality of OARC services and the satisfaction level of Resource Center youth beneficiaries.

1.3-Objectives of the Study

1.3.1-General objective

The general objective of this study is to assess the service quality perception and level of satisfaction among the youth beneficiaries of Oromia AIDS Resource Center South-East Ethiopia.

1.3.2-Specific objectives

The specific objectives this study are:

- To assess types of services which have been provided at Oromia ARC
- To examine the youth beneficiaries opinion about the adequacy of Oromia ARC services
- To examine the service quality perception of OARC youth beneficiaries
- To assess the level of satisfaction of the youth beneficiaries on the services they are getting from OARC; and
- To identify major strengths and constraints that may affect the service quality and effectiveness of the OARC's services to the youth beneficiaries in Adama town

1.4-Research Questions

Towards the realization of the above objectives, the necessary data were gathered by assessing the deeper reflections of the studied population on the following research questions:

- a. What are the major services that are provided by Oromia AIDS Resource center?
- b. What are the views and opinion of the beneficiaries on the adequacy of the infrastructures and services provided by OARC?
- c. What is the perception of the youth beneficiaries on the quality of the services provided by OARC?
- d. What are the satisfaction levels of the youth beneficiaries on the services they are getting from the AIDS Resource Center?
- e. Which services/facility provision(s) of the OARC are users satisfied with?
- f. What services/facility provision(s) of the OARC are users dissatisfied with?
- g. What are the major challenges that affect the achievement of OARC objectives?

1.5-Study Variables and Operational Definitions

While assessing the service quality perception and level of satisfaction of OARC youth beneficiaries, the following variables were the key issues which were subjected to the critical and deeper investigation of the researcher.

- 1) **Perception:** is an opinion, view or general feeling about something (Microsoft Encarta, 2007). In this study attitude is defined the views and perception of the beneficiaries towards the services of the center
- 2) **Quality:** The levels of excellence which characterize the service provided the center based on accepted quality standards of ARC.
- 3) **Satisfaction:** the feeling of pleasure that comes when a need or desire is full filled or happiness with the way that something has been arranged or done.

1.6-Limitation of the Study

Data and information collected from those sample respondents who are accessing the AIDS Resource Centre service were the major inputs of this research. In addition to this, secondary data from different reports and documentations of the Resource center were utilized. However, the system of documentation of archives in the Resource Centre was not adequate enough to generate the required outputs. Beside this, the lack of adequate literature to review the subject under study, the lack of transparency and biasness of some respondents and the lack of adequate time and financial constraint to include other regions ARC in this study are also other limitations.

1.7 Structure of the Dissertation Research

This dissertation Research report is divided in to five chapters. Accordingly, chapter one addresses, back ground of the study, statement of the Problem, objectives of the study, and research questions, definition of key terms and limitation of the study. Chapter two discusses on Literature review – this gives an in-depth review of the literature related to the research topic. Chapter three addresses the research design and method – details of the research approach to study the research topic is given in this chapter. And chapter four discuss on analysis, presentation and description of the research findings. And the last chapter presents conclusions and recommendations – these are discussed based on the research outcomes. The list of references is appended to the thesis.

CHAPTER TWO

LITERATURE REVIEW

2.1-Prevalence of HIV/AIDS among

Globally Young people aged between 15-24 years account for 40% of all new adult (15+) HIV infections. Some 4.9 million young people (15-24) were living with HIV in 2011.75% were living in sub-Sahara Africa. Around 890, 000 young people (aged 15-24) were newly infected with HIV in 2011.2400 and young people aged 15-24 were infected with HIV every day of 2011. (UNAIDS ,2011)

Young people throughout the world and particularly those in developing countries have been exposed to these health risks because they do not have adequate information, knowledge or guidance about STIs, HIV/AIDS, SRH and related problems.(Kiragu K, 2001).Beside this, the lack of adequate comprehensive national youth SRH policies and strategies that specifically address young people's needs is what is commonly observed in most countries.(WHO ,2002) .Other studies have also identified the lack of youth-friendly health facilities as a major barrier that young people face in obtaining appropriate and timely health services related to SRH problems. (Senderowitz J,1999).

The unfortunate fact is that Ethiopia is among those countries which are highly affected by the HIV epidemic. According to the Country Progress Report on HIV/AIDS response, with an estimated adult prevalence of 1.5%, Ethiopia has 800,000 people living with HIV/AIDS and about 1 million AIDS orphans. (Federal HAPCO, 2012).The same report reveals that 2.6% of the age group 15 to 24 years are living with the virus. HIV prevalence is estimated to be 6 to 9 percent among young men aged 15–24, and 10 to 13 percent among young women in the same age group. (Federal HAPCO, 2012)

Some studies reveal that Ethiopian youth have similar problems with young people elsewhere. Although they have profound reproductive health needs, these have been neglected for many years. Their needs of SRH information and services have not been recognized (Abubeker, 2004).Other studies also reveal that, in Ethiopia there is scarcity of special youth SRH and HIV/AIDS prevention and treatment services, whether integrated with the existing health facilities or free standing and ideally providing basic services and reliable information to young people in affordable, confidential and youth friendly environment. (MOH, 1998).

2.2-AIDS Resource Centers and their Importance

As the literatures reviewed by the researcher reveals, AIDS Resource Centers have an important part to play in improving access to information and support a wide range of learning activities by making information available. They can play valuable role in improving the health of a nation through collecting and organizing materials that are useful to a particular group of people, such as health workers. Materials may be very varied, including training manuals, handbooks, reference books, directories, leaflets, posters, games, videos and samples of equipment .(Health link worldwide, 2003).

A Resource Center can be any size, from a trunk of books or a few shelves, to a whole room or several rooms. A resource center may be part of an organization or an organization in its own right. It may serve staff within the same organization, people from other organizations, members of the public, or a mixture. It may be staffed by a volunteer or someone for whom it is only part of their job, or by a team of professional librarians and information scientists who are responsible for different aspects of managing the collection and providing information services.(Health link worldwide, 2003).

AIDS Resource Centers gather information and materials to meet the needs of resource center users develop and maintain an effective ordering system for new materials including entering new materials into register and classifying and cataloguing materials. The larger the resource center, the more important it is to have systems for knowing what materials it contains and where to find them. With a small resource center consisting of a couple of bookcases, it is easy for someone to look at all the materials and find what they need. .(Health link worldwide, 2003).

Also there is a need to ensure the Resource Center is user-friendly and accessible, including assisting users to identify materials ,develop activities in which users can share ideas and concerns on the role of the resource center ,work with users to identify activities that information could support, and provide materials for those activities promote the services of the resource, encourage and promote the use of information and also produce regular statistical reports on the functioning and use of the resource center. Whatever the size, all resource centers

have the same aim to meet the information needs of a particular group, or groups, of people.(Health link worldwide, 2003).

2.3-AIDS Resource Center in Ethiopia

The government of Ethiopia is committed itself to strengthen prevention and control activities soon after evidence of HIV/AIDS in Ethiopia. In 1998, a National HIV/AIDS Policy was endorsed by parliament. The policy underscores the need to empower women, the youth and other vulnerable groups to take action to protect themselves against HIV/AIDS.(Federal HIV/AIDS Prevention and Control Office ,2012)

As an integral part of informing the general population about the danger posed by the deadly virus, in December 2002 the National AIDS Resource Center (ARC) which is found in Addis Ababa was launched. The Resource Center serves as Ethiopia's Premier source of HIV/AIDS information and as a hub for a host of user-driven resources and services, such as a comprehensive multimedia reference collection, high-speed computer terminals with Internet access, audiovisual equipment, databases of information pertaining to HIV/AIDS, and a toll-free HIV/AIDS telephone hotline (AIDS Resource Center , <http://www.arc.org/>)

In addition to its user driven services, the NARC also supports local partners in developing strategic, targeted behavior change communication (BCC) tools and approaches. Beside these, the NARC Provide technical assistance in the development/maintenance of regional ARCs in all regions. These include materials acquisition; establishment of a networking system between regional ARCs and ARC; and providing the regional ARCs access to the NARC's databases and resources. It also adapts centrally produced communication materials for the specific region, and facilitates the national hotline activities in the regions (AIDS Resource Center , <http://www.arc.org/>)

From this review, it is clear that the youth are still susceptible to the risk of HIV infection. This is because they do not have adequate information, knowledge or guidance about STIs, HIV/AIDS, SRH and related problems. Also, from the above reviewed literatures, AIDS Resource Centers have an important part to play in improving access to information and support a wide range of learning activities by making information available. They can play valuable role in improving the health of a nation through collecting and organizing materials that are useful to a particular group of people, such as the youth.

2.4-Measuring Service Quality of AIDS Resource Centers

There is a general agreement that in addition to availing the services, knowing the views and perception of the beneficiaries about the adequacy and quality of the service designed for them and their level of satisfaction is also vital. In their groundbreaking study on service quality, Berry et.al. (1992) wrote: “customers are the sole judge of service quality. Customers assess services by comparing the service they receive (perceptions) with the service they desire (expectations)”. Customer needs and, by association, expectations are the basis for determining an organization’s ability to attract, satisfy, and retain customers. Organizations thus have to assess, analyses, and continually update their understanding of customer needs and expectations.

Users need assessment and user satisfaction measurement outputs assist library management to: set strategic objectives that help meet user’s needs; set appropriate priority areas; preempt problems; justify present funding or increased funding from administrators, policy makers, donors etc.; allocate resources in such a way as to ensure that the library concentrates, in the words of McClure (Steward, 1997), on “what makes a difference” to users

In the introduction to their book on performance measures for academic libraries McClure. (1990) write: “accountability has been one of our society’s major concerns... librarians are increasingly interested in knowing how well their libraries satisfy users and in gathering data they can use in planning, internal decision making and communicating with... administrators”. All libraries (public, academic, and specialist) need to develop plans regarding their goals, service priorities, resource allocation etc. For these, plans should be effectively developed and implemented through regular gathering and analysis of performance data (Steward, 1997).

McClure, (1990) has developed the following four users satisfaction measures that can be used as a base for further inquiry into user’s needs and expectations also as a guiding framework for delving into the wider literature on library user’s needs and satisfaction.

1-Materials Availability and use :

McClure et.al. (1990) state that measures and indicators falling into this group deal with the adequacy and appropriateness/usefulness of library materials, and the ease of access to these materials.

2-Library Facilities:

According to McClure (1990), user seating and workstations/computers are examples of 'library facilities' and one measure to gauge user's satisfaction with library facilities as "proportion of time, on average, that a facility is busy". **While addressing this issue other authors include the following user need and/or satisfaction indicators under Library Facilities: provision of such facilities as toilets, phones and a café; access to photocopying and printing facilities at a reasonable price; adequacy of space and seating (LaTrobe University, 2001).**

3-Library Information Services:

According to McClure (1990), measures falling into this group relate the extent to which users are aware of the various services and facilities of their library.

4-General Satisfaction:

The general satisfaction look at (1) user accessibility to a library (2) the library environment and its ease of use (3) user's expectations and perceptions on varied aspects concerning library staff/employees. And, among the measures for this indicator are: the number of opening hours a library offers; "where the library is—location, transport routes to it, parking facilities, proximity to home, work or place of study"; how resources within the library are organized—catalogues, classification systems, signposting etc; "the library environment—how comfortable people find it, the lighting and heating"; the degree to which "services are provided effectively and courteously" to users; the degree to which the number and quality of staff matches with user's needs;

A Study which was conducted in Malawi for assessing the level of satisfaction among the National Library users using the above four measures revealed Quiet environment; Clean and orderly environment; Seating facility provision; Internal library signage; Air-conditioning and heating facility provision; availability of relevant academic, reference, and 'leisure' books; availability of newspapers and magazines; Publicity/promotion of library services and material; Library use training/education provision; availability of professional staff with a positive attitude towards users were rated as the most important current services/facilities of the National Library. (Stan G. Kaunda)

The same study also revealed library closing time; library cleanliness; comfortability of library chairs; collection of books on Malawi or by Malawians; Positive staff attitude; quiet environment were among those Services/Facilities of the National Library which users were satisfied with. And Security of library and user's material; access to toilet facilities; Library opening time; space inadequacy in the library; noisy atmosphere in the library; Identification of, and access to, library staff/employees; mechanism for locating and accessing library material; materials booking and renewal process; Inadequacy and lack of relevance of books; Inadequacy and lack of relevance of newspapers/magazines were some of the issues where users were dissatisfied with. (Stan G. Kaunda)

And also while assessing Services/Facilities Participants want, the same study also revealed, free access to toilet facilities; enhanced security of library and user's material; noise free environment; earlier opening time; adequate and quality signage in the library; Photocopying service; computers with internet facility; adequate seating facilities; adequate space; adequate staff that can be easily identified and accessed; staff with a positive attitude towards users; Publicity of library services/facilities including new material; Publicity of library rules, regulations, and procedures to users for collecting, and adopting/implementing, user's suggestions and opinions more effective materials booking and renewal process were the services/facilities which were most wanted by users of the library. (Stan G. Kaunda)

Another sizable portion of users of the National Library Service had also displayed a high level of importance to adequate provision of, and ease of access to, newspapers and high level of importance to availability of computers with Internet facility and provision of photocopying facilities. In line with the observation from the literature users of the National Library also have high demand for staff/employee adequacy and staff professionalism. (Stan G. Kaunda)

Critique on these literatures is that, firstly, even if the measurements used in this study are useful, they may not adequately cover the areas that are AIDS Resource Center youth beneficiaries are interested with. Secondly, most of the studies available in the literature were based on research done on libraries. Academic libraries and AIDS Resource Centers have tangible differences: the service base in ARCs is potentially bigger and more diverse. Finally, most ARCs do not systematically develop and conduct user needs assessment and/or user satisfaction.

So, this study intends to fill these gaps by conducting an-in depth study on the service quality perception and the level of satisfaction among the youth who are benefiting from the services of OARC in Adama town. Accordingly, the adequacy and service quality of the AIDS Resource Center and level of satisfaction of the youth beneficiaries were assessed from the point of view of the users and service providers. The study also identified the existing gaps and forwarded suggestions on how to design and implement youth-friendly AIDS Resource centers in the country.

CHAPTER THREE

RESEARCH METHODS

This section of this report addresses the brief description of the research design, the study site, the population of the study, the study participants, sampling method, the data collection tools, data analysis and interpretation procedures and ethical concern of the study.

3.1. Research Design

As the objective of this study is to assess and understand the service quality perception and level of satisfaction among OARC youth beneficiaries, the design of this research was descriptive in nature which require using the mix of both quantitative and qualitative techniques. It is descriptive because the general socio-economic characteristics of the study group and their service quality perception and level of satisfaction are described in detail.

And also the quantitative method employed in this study was simple statistics .using this method users opinion on the adequacy and quality of the services and the level of satisfaction they had on the services of OARC were expressed in frequencies and percentages. For this purpose, self-administered close ended questionnaires were utilized.

In addition to this, as qualitative research is useful while developing explanations of users opinion on service quality related perception, using this method was preferred for understanding some of the research issues that are related to the service quality perception of the beneficiaries. Accordingly, in order to seek answers and to gain full insight and rich information on the views and opinion of the beneficiaries on some of the research questions that tend to require in-depth qualitative information; a qualitative research method was used. Towards this, to get the deeper views and perception of the study population, un structured interview and focus group discussions with service users were also conducted. Document review and interview with key informants and OARC staff were an integral part of this research.

3.2-Study Site

This study was conducted in Adama town which is found in the Eastern Zone of Oromia Regional State. It is located 100 km in Southeast of Addis Ababa on the highway to Djibouti. As the socio economic profile obtained from the Ethiopian central statistical authority shows ,the city is subdivided into 14 kebeles and has an estimated total population of 217,230 (108,110 male and 109,120 female). It is a business center and is characterized by a highly mobile population. Due to its strategic location at the heart of Oromiya region and the country as a whole, high volumes of travelers pass through the town each day

Adama has one government hospital, one private hospital, two government health centers, one NGO health center, two health posts, 33 private clinics, three NGO clinics, and 34 pharmacies. The two government health facilities (the hospital and health center) provide all HIV/AIDS-related services . The prevalence rate of HIV in this city is estimated to be 9% which implies that there is a high risk of HIV transmission (Private sector program- Ethiopia,2007.)

The reason for selecting Adama town as an area of this study was due to the fact that it is the only area where the establishment of Oromia AIDS Resource Center is found in the region. The Oromia AIDS Resource Center (OARC) which is found in Adama town is among the nine Regional AIDS resource centers of Ethiopia which is established for the provision of different information services on HIV/AIDS, Sexually Transmitted Diseases (STDs), and Tuberculosis (TB). Replicating the activities of the National ARC the resource center , OARC has the objectives of providing up-to-date information on HIV/AIDS, STDs, Tb and other health-related materials. The library has periodicals, policy guidelines on HIV/AIDS, general and scientific books, brochures, videos, CD-ROMs, DVDs, audiocassettes, audio-visual services. (OARC,2005)

In these an all-out efforts, the prevention of HIV among the youth is the major focus areas of the Resource center. As the data obtained from the resource center reveals among those who come to the center the youth comprise the largest number. As the preliminary data obtained from the resource center shows, on average a sixty male and female in school (ISY) and out school youths (OSY) come on daily basis and benefit from the services of Resource center. (OARC,2005)

3.3- Study Population

The population of the study were all in-school and out of school youth within the age range of 15-24 who are benefiting from OARC. OARC has its own systematically registered beneficiaries list. As the data obtained from this document reveals the Resource center has a total of 1250 regular attendants of the Resource center comprising a total of 650 youth who were in the range of 15-24 years of age. And this document was used as a source of population frame to select sample youth beneficiaries who provide the necessary data and information while assessing the service quality perception and level of satisfaction of the youth beneficiaries.

3.4-Participants of the Study

It is an established fact that The quality of any research depends on a clear and precise definition of the target group and in the establishment of clear boundaries that identifies who is included and for what reason, and who is not. Cognizant of this, since the major objective of this study is to know the service quality perception and level of satisfaction of OARC youth beneficiaries, fulfilling the Ethiopian law age criteria of youth and using OARC services were used as a criteria to identify the study participants. Hence, only those beneficiaries who are in the age range of 15-24 and also who were registered by OARC as regular attendants and beneficiaries of its services were included in this study.

While selecting the study participants, the registration sheet of beneficiaries which consist the list of 650 youth (420 Male and 230 female) was taken from OARC. Then, from this list a total of 76 respondents were randomly selected and studied. To collect quantitative data, close ended questionnaires were administered to seventy six (76) randomly selected youth.

In order to substantiate data collected from these respondents, a focus group Discussion was held with another twelve (12) respondents. During the focus group discussion, questions that were believed to be best in eliciting personal opinion on the performance and quality of OARC services were forwarded to the group and opinions of the respondents were gathered accordingly. Moreover, to obtain additional insightful data, interviews were conducted with eight (8) youth, two (2) OARC staff and five governmental and community representatives separately.

3.5-Sampling Method

While conducting this study, the researcher used OARC youth beneficiaries' attendance sheet as sampling frame and simple random sampling method was used to draw random sample. Accordingly, first the registration sheet of 650 youths who are regular attendants of the AIDS Resource centerservice was taken from OARC and from this sampling frame,the list of 76 (40male and 36 female) youths wererandomly selected. Subsequent to this, the researcher communicated with the OARC staff to know the date and time when adequate number of the selected youth come to benefit from the center. Accordingly, the appropriate time was identified and adequate samples of those volunteer individuals were approached and asked if they would be volunteer to participate in the study.

In order to get their informed consent the purpose of the study, confidentiality of all information and his/her right to terminate if there is a feeling of discomfort were also told for each respondent. And, after obtaining their consent to participate in the study,a total of seventy six randomly selected youth comprising 40 male and 36 female respondents were included in the study. In addition to these, five (5) key informants and twelve (12) focus group discussion (FGDs) participants were selected from service providers, users and government line departments.

3.6-Data Collection Tools

In every forms of research developing the appropriate data collection tools which are vital for collecting the necessary data and information from both primary and secondary sources is very important. Accordingly, to collect the necessary data required for this study,self-administered close ended questionnaire,interview and Focus Group Discussion guide were developed and utilized. After developing all these categories of primary data collection tools, they were pre tested and used in Amharic after translating the questions from English to Amharic. Then again the Amharic version responses were translated into English for analysis.

To substantiate data collected through primary data collection methods, various documents were analyzed, pertinent data regarding OARCs was gathered and the office facilities arrangements and infrastructures of the ARC were physically observed by the researcher. And the following section briefly address the details of the major data collection tools which were used by the researcher .

3.6.1-Self-administered questionnaires'

While conducting this study, self-administered close-ended questionnaire was developed for collecting data from sample respondents. In the second stage, to secure relevant information about the target population, contact was made with OARC staff. Then the questionnaire was pre-tested, standardized and finalized. The questionnaires consist of structured issues that solicit quantitative data. Accordingly, the questionnaire was categorized into three sections. The first section captures the socio-demographic data of the respondents.

The second address the level of service utilization and the views and opinion of the respondents on the adequacy of the ARC facilities, services they most wanted and used and user's opinion on the importance of the different services. The third focus on assessing the level of user's satisfaction on the quality of the services through questioning which service/facility of the ARC are users satisfied with and which service/facility of the ARC are users dissatisfied with.

Division of the questionnaire into the above dimensions was to facilitate ease of analysis and evaluation of the study results, and improve OARC ability to effectively focus on the necessary organizational changes required to help meet user's needs and expectations. Accordingly, in order to collect their service quality perception and level of satisfaction, close-ended questionnaire was developed and distributed for 76 respondents. Finally, the respondent's response for the research questionnaire was coded; the collected data was cleared and entered into the Statistical Package for Social Science (SPSS) windows version for analysis.

3.6.2-Focus group discussion

In this study, a focus group discussion was used to collect qualitative data. Accordingly, an unstructured Focus Group Discussion guide was prepared and utilized. While gathering the data, focus discussion participants were asked to discuss and give their opinion and reflection on the following discussion points: the knowledge they have about the objectives and service provision procedures of OARC, their views and perception about the benefits brought by the services they are getting from OARC, their opinion on the quality of the services provided by OARC, the level of satisfaction they have on the services of the Resource center, of the resource center, the major strengths and limitations of the Resource Center services and also their

suggestion and possible solutions to overcome those problems for the better improvement of the services were discussed thoroughly.

3.6.3-Interview guide

In order to substantiate data collected through the questionnaires', interviews were conducted with eight (8) youth beneficiaries, two OARC staff and five (5) key informants who were represented from governmental offices and the community separately.

3.6.3.1-Interview guide for the Youth

The interview guide which was developed for the youth respondents contains mostly open ended questions. For this, questions which address the respondents' opinion/perception on the quality of the Internet, library, Audio- video and Printing services, the resource center location and its accessibility to users (steps, layout, and narrow corridors), the adequacy of its service opening hours, the sitting rooms & furniture's and the adequacy of the available resource materials and the major strengths and constraints of the Resource Center and other questions that were believed to be best to improve the performance and quality of services accessed by the youth were developed and forwarded to the respondents.

3.6.3.2-Interview guide for key informants

In order to have better understanding and to obtain additional insightful data, an interview was conducted with five (5) key informants who were represented from zonal youth association, zonal health, youth, social affairs staff and Community based organization leaders. Since these individuals who are represented from these organizations are the main stake holders who are in charge providing the necessary technical support they were believed to be key informants that can provide data on the overall performance of the OARC.

In view of this, a key informant interview guide was developed and questions addressing the overall performance and benefits of OARC for the community in general and for the youth in particular and other issues were raised and replies were recorded.

3.6.3.3-Interview guide for OARC Staff

In order to have better understanding of the major objectives, organizational setup and the service provision procedure of OARC, an in-depth interview was conducted with two OARC staff. For this, the necessary interview questions which are tailored to this research objective

were developed and raised during the interview session. Accordingly, in order to get the holistic data and information about the ARC, questions addressing the brief description of the major objectives and services of the resource center, the formats used to collect the ARC materials, the mechanisms and systems employed to store the AIDS resource materials, for processing and accessing the information, for ensuring the standard for quality of the services and professional qualification of IT man power and for insuring the availability of essential and updated HIV/AIDS resource materials were developed.

As integral part of this effort, questions addressing the existence of any survey which was conducted to assess the ARC user's service quality perception and level of satisfaction, the major strengths and constraints of the Resource Center and recommendations to improve these constraints were raised by the researcher and replies were recorded.

3.6.4-Personal observation

Physical observation checklist was also the other tool used by the researcher to gather pertinent data regarding the availability, adequacy and accessibility of the Resource Center office facilities, Information technology infrastructures including the computers, the library and audio-visual collections sitting rooms and so on.

3.6.5-Secondary data sources

To enrich the primary data, secondary data and information from different sources including the periodic reports of the Resource Center, internet, books, documents and recordings of the ARC were also gathered and reviewed.

3.7-Data Analysis and Interpretation

It is true that analysis of research data involves collecting the necessary information, reducing, and organizing it in various ways and drawing conclusions. Hence, in this research the primary step in analyzing quantitative data was checking the questionnaire for consistency and errors. Accordingly, data that contained incomplete information were excluded. Subsequent to this, each questionnaire was coded and the collected data was cleared and entered into the Statistical Package for Social Science (SPSS) windows version 16.0 for analysis and interpretation. The quantitative data collected in this way were tabulated according to their frequency and percentage and then analyzed accordingly.

Moreover, the qualitative data collected from of the focus group discussions were changed into complete narratives. In addition to these, information and hand written notes taken during the interviews with the youth Key informants and OARC Manager were narrated and reviewed for analysis.

In this qualitative analysis the researcher summarized them by identifying similar ideas and concepts and generated a list of key themes. Accordingly, interrelated concepts were identified, summarized and further organized into categories and themes. Then the emerging concepts and themes were summarized and used to provide explanations for the findings and complement the quantitative findings. Moreover, direct quotes of respondents were also incorporated to give better explanation. The cumulative combination of all these methods was believed to be helpful to understand and analyze the service quality perception and level of satisfaction of the youth beneficiaries.

3.8-Ethical Consideration

In the process of the study, the following ethical issues were considered. Before conducting the study the purpose of the study was clearly explained for all the study participants and information obtained from the respondents was promised to be kept confidential. And, after ensuring their willingness, they were asked to give their informed consent through putting their signature on the informed consent formats prepared by the researcher.

In addition to this, the necessary efforts were made so that the languages in the data collection tools would consider the culture, religion and the comprehending level of the respondents

CHAPTER FOUR

RESEARCH FINDINGS AND ANALYSIS

This section discusses with the major findings and analysis of the study. The major findings are presented according to the thematic areas of the research objectives. The findings were analyzed based on the research questions and the existing literature. Elementary quantitative techniques and direct sayings of the key informants and focus group participants were also used to present and analyze the data.

4.1-Socio-Demographic Characteristics of Respondents

4.1.1-Age and sex composition

A total of seventy six youth with the age range of 15 to 24 years took part in the study and out of them 40 (53%) were male and 36 (47%) were female. The age of the study participants ranges from 15 to 24 and their average age was 19.

4.1.3-Religion

Respondents were asked to indicate their religion during the survey .And, out of the total respondents, 68(89%)were from orthodox Christian background and the remaining 7% were Protestants and 4% were Muslims.

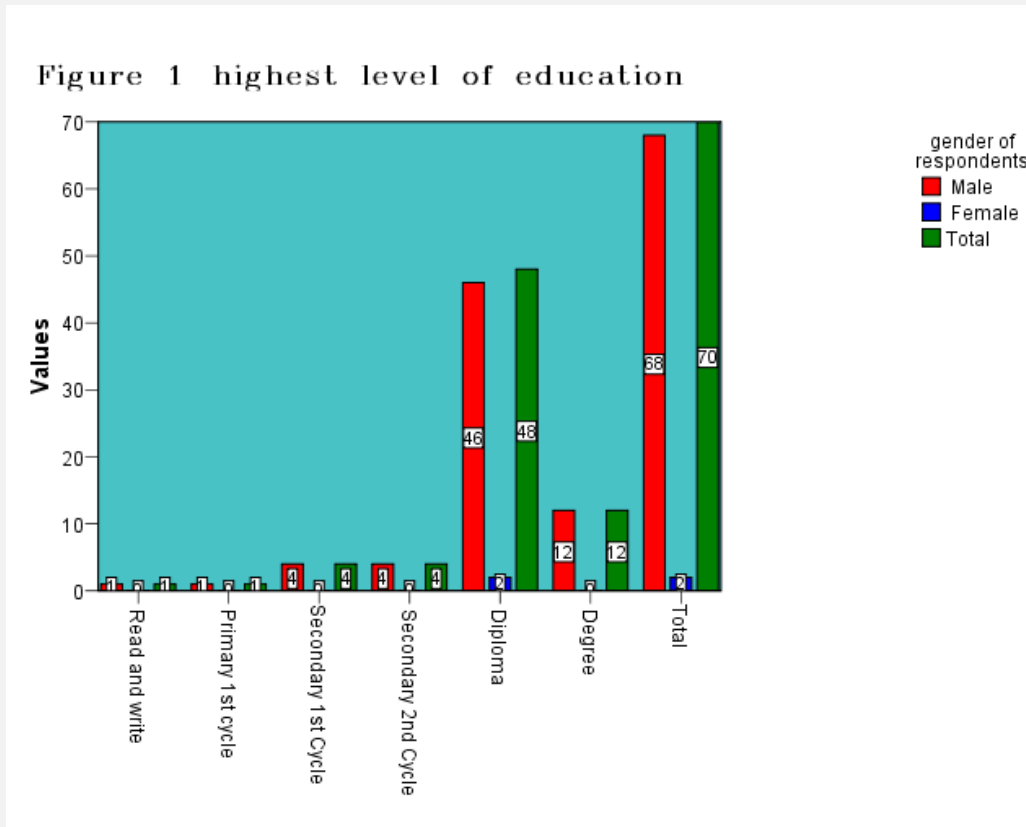
4.1.4-Marital status

One of the socio-demographic variables included in the questionnaire was about the respondent's marital status. Of the total studied population 72 (95%) of them were never married, 2(3%) married and the remaining two respondents were either divorced or separated.

4.1.5-Education

All of the respondents had attended education. And 45(59%) of them were with Natural science back ground and 31(41%) were with social science back ground. The majority of respondents, (53%)of them were attending Diploma and 25% of them were attending Degree Program and the remaining 14% were in secondary 2nd cycle and 5% were attending secondary 1st cycle.

Figure 1- Higher Educations of Respondents



4.1.6-Occupation

Of the total respondents, the majority of them 56 (74%) were students, 9(12%) of them were salaried employed, 9(12%) of them were unemployed and 2(3%) of them were self-employed.

4.1.7-Residence

The majority of respondents 70(92%) reported that they live in Adama town while the remaining 6(8%) of them reside outside Adama town.

4.2-Users Source of Information About the Resource Center Services

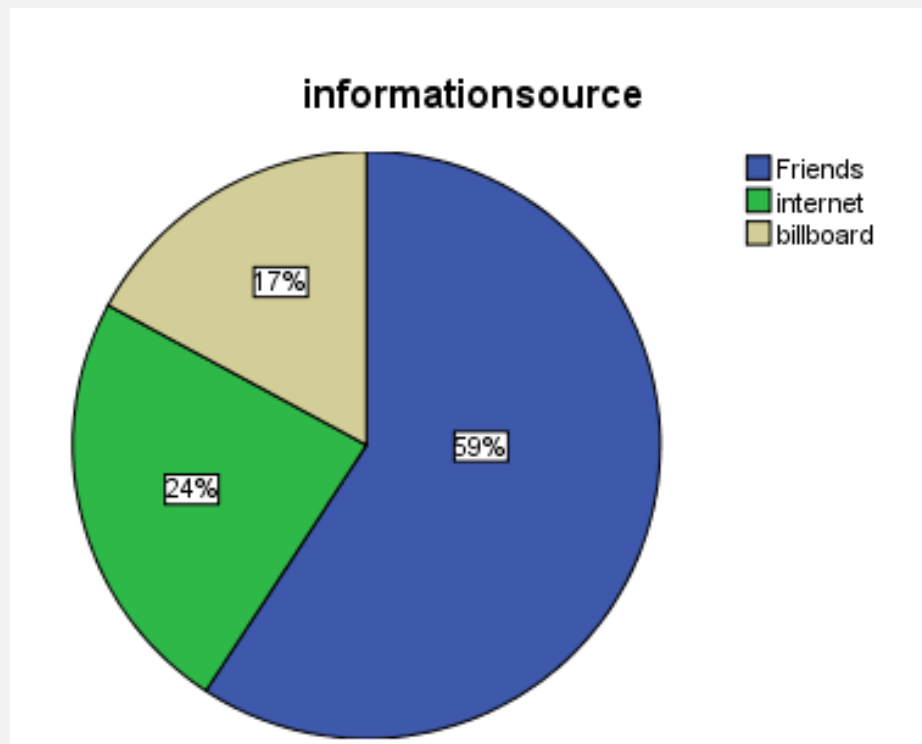
AIDS Resource center needs to ensure that it continues to meet users’ needs, by involving users in developing the collection and services, promoting its services to users, and keeping in touch with organizations working in similar fields to share information and ideas.(Health link ARC Manual, 2003).And also, since knowing how the AIDS Resource Center users became aware about the services of the Center is critical for determining the best ways in

promoting the Resource Center services among the population, respondents were asked about how they came to know about the existence of the ARC services.

As the findings regarding this reveals that significant proportion of the respondents 45(59%) reported that they learned from their friends and 18(24 %) from internet and 13(17%) reported to have known about the center through billboard and no case was reported on other means such as radio and Television.

While conducting an interview with the ARC staff, the issue of how the Resource Center promotes its service throughout the community was raised. While responding to this issue, “ apart from the billboard which is standing at the gate of the Resource Center and those locally produced brochures we distribute to the beneficiaries who came to the center, we have not made adequate effort for promoting the services of the Resource Center through other means.” However, compared to the strategic importance of these medias to address wider segments of the community there is a need to promote the service through them.

Figure 2: Source of Information



4.3-Users Experience and Frequency their Visit

Respondents were also asked about for how long they have been benefiting from the center and how much frequently they come to the center .And, as the findings from the analysis conducted on the respondents data reveals, the vast majority of the respondents,62(82%) have more than one year experience, 6(8%) of the them have less than one year experience and the remaining 8(11%) have only one month experience.

While assessing the frequency of their visit 29(38%) said on bi weekly basis ,25(33%) on weekly basis,16(21%) of them on monthly basis and few of them6(8%) on daily basis.

4.4-Users Awareness about the OARC Objectives

One of the most important tasks of a resource center is to make information available and encourage people to use it, by offering a range of information services. Information services should improve access to information, not only for people who can come and visit the resource center, but also for those who are based far away, or who cannot come in for other reasons.(health link, 2003).

Also, since the provision of adequate information about the AIDS Resource Center objectives have substantial contribution in enabling the youth beneficiaries to efficiently utilize theservices and in enhancing the frequency of their visits, respondents were asked if they have received any forms of orientation /information about the objectives of the center and its services from the Resource Center staff.

Among the total respondents 57(75%) of them did not received any orientation on their first day of their visit and only 19(25%) of them have reported getting the necessary orientation.

In focused group discussion one of discussant said that.

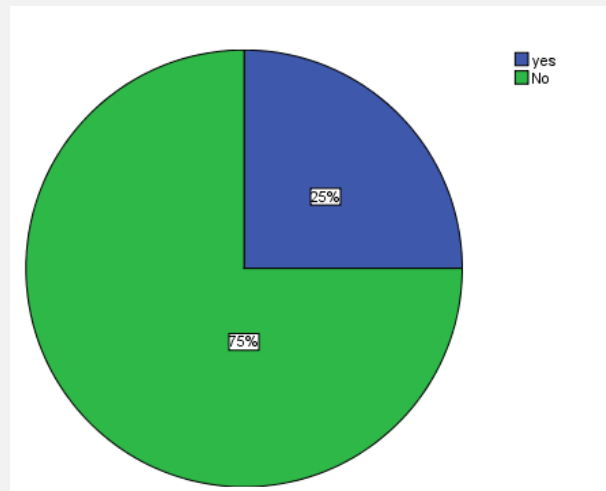
“I heard about the services of OARC from my friend before a year ago .Since then I come regularly to the center, usually on a biweekly basis to use the internet service. However, throughout my experience I have never got any orientation about the major objectives of the resource center particularly the objective it shouder to prevent the spread of HIV/AID and mitigate its adverse impact. The only information I got from the resource center staff was about how to use the internet and the library services.”

The majority of other discussants also said that apart from using the Resource center services particularly that of the internet for different purposes, we didn't receive any information

or support from the Resource center staff on those issues which are related to the major objective of the center which focus on preventing the spread of HIV/AIDS.

They also pointed that, having this information will substantially help us to properly access and get the necessary information and knowledge from the Resource center which help us to prevent ourselves from HIV/AIDS.

Figure 3: Percentage of Users Who Received Orientation About the Objectives of OARC



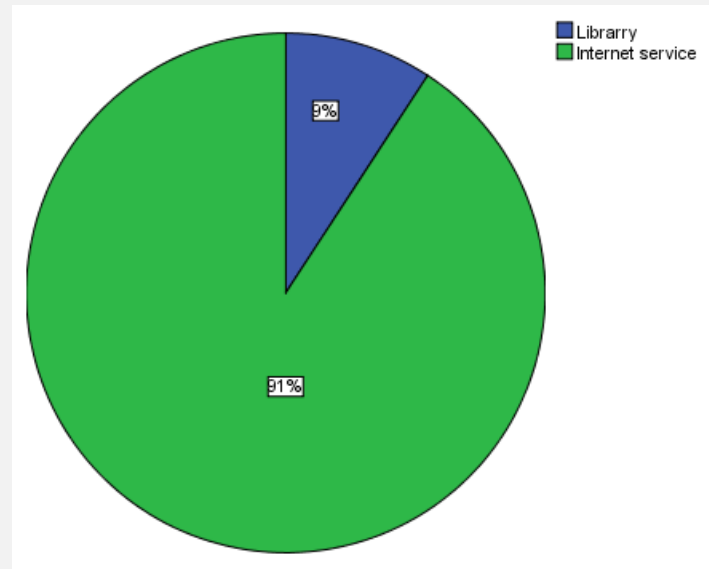
4.5-Reasons for Visit and Most Used Service

Ensuring that people in both rural and urban areas, have access to reading/information materials which they may require in connection with their studies, their professional or other work, for the maintenance of literacy, for recreation, for general enlightenment and in Information and Knowledge Management is among the major tasks of ARC(health link). Accordingly respondents were asked to respond the reasons of their coming to the OARC. And the finding shows, the majority of the respondents 61(80%) reported for using the internet, 7(9%) for updating themselves with new scientific development 7(9%) for reading books.

In addition to these, knowing the need of the youth beneficiaries through assessing type of service they mostly used has substantial contribution in improving the quality of the service. Cognizant of this, respondents were also asked to report the services they mostly used. While responding this, internet use was the service reported by the majority of the respondents 85% and

next library service was the second service which is used by 15% of the respondents. No response was reported for the Audio-visual, printing and photo-copy services.

Figure 4: Most used Service



4.6-Purpose of Using the ARC Services

Since misunderstanding of the target communities needs and perception has led to an underutilization of the existing HIV/AIDS services and hindered the overall achievement of the desired behavioral change, respondents were also asked for what purpose they were using the services. The finding regarding this revealed that, the majority of the respondents 67(88%) reported for self-learning, 6(8%) for working with the community, 5% for other purposes, 2.5% for planning activities and 1(1%) for teaching/training purposes and 1(1%) for other purpose.

4.7-Users Opinion and Level of Satisfaction on the Adequacy and Quality of the ARC Office Facilities and Services

It is a bare fact that, in addition to availing the services, knowing the views and perceptions of the beneficiaries about the services designed for them has substantial contribution in understanding their service demand and in enhancing the level of their inclination to utilize the services and also for designing other services that are tailored to their need.

As Clow and Kurtz (1998) said “if customers consistently give ... low scores for one dimension, such as reliability, then ... management can take steps to improve that particular dimension of their service offering”. Cognizant of this, the views and opinion of the service users on the adequacy and quality of the ARC services as perceived by them was assessed and the level of their satisfaction was also measured.

For this, several questions addressing the opinion and perceptions of the youth beneficiaries about the ARC including the adequacy and quality of the office facilities, the information technology infrastructure, library and Audio visual collections, the adequacy, competency and preparedness of the ARC staff and other attributes that are presumed to measure the service quality and level of users satisfactions were raised and their corresponding responses were adequately analyzed and presented in the following way.

4.7.1-Users opinion and level of satisfaction on the adequacy and quality of the ARC office facilities

Resource center needs to be easily accessible to the people who use it. It needs to be accessible to everyone who will use it. Its location will depend on who the users will be and what space is available. It could be located to somewhere users go to it regularly. And also the location of resource center will probably be more suitable if it is found an area where it attracts a wide range of users, such as youth, practicing health workers, medical and nursing students, health educators, and members of community and so on. The resource center needs to be attractive and inviting and it should be free from distractions such as noise and smells. (Health link ARC Manual,2003).

While assessing the opinion and perception of the youth beneficiaries on the ARC infrastructures, several attributes that presumed to indicate the adequacy of office facilities and Information technology infrastructure were gathered. Accordingly, respondents were asked to give the opinion and perception they had on the location of the ARC office, its opening hours and also on the adequacy of its office space, furniture's and utilities. And, as the findings of this study reveals among the total respondents,61(80% of them reported that the office location is easily accessible,10(13%) of them said it is somehow accessible and 5(7%) said it is difficult to access. And regarding the adequacy of the office space18(24%),42(55%), and 16(21%) of the

studied population reported the office space is adequate, somehow adequate and not adequate respectively.

Also, while assessing their opinion on the adequacy of the office furniture, 20(26%),50(66%),6(8%) of them reported it as adequate, somehow adequate and inadequate respectively. Regarding the adequacy of the office utilities including electricity, water and toilet, 7(9%) of them reported as adequate ,55(72%) reported somehow adequate and 14(18%)of them said it is inadequate.

Table 1: users opinion on the adequacy of office facilities

	Adequate	Somehow adequate	Not adequate
Office space	18	42	18
Office furniture	20	50	6
Office utilities	7	55	14

As an integral part of these, respondents were also asked to rate the level of satisfaction they had about the overall quality of the office facilities of the Resource Center. As the findings from this study reveals,4(5%) of them were very satisfied,69(91%) were satisfied 3(4%) were dissatisfied. While there are good satisfaction level was reported on the location of the center (67%), opening hours (84%), conformity of the sitting rooms (83%) and on the adequacy of electric light and windows(76%), the highest dissatisfaction rate was reported on the adequacy and cleanness of the toilet rooms(78% were dissatisfied & 13% were very dissatisfied).

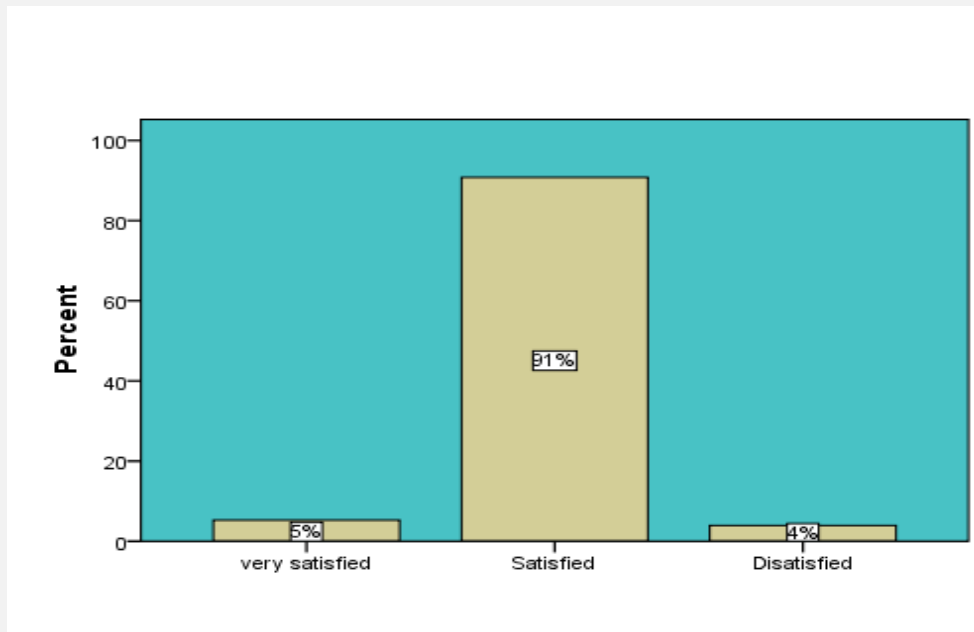


Figure 5: Level of Satisfaction on the overall quality of the Office facility

4.7.2-Users opinion & level of satisfaction on the adequacy, Competency &Preparedness of the ARC staff

AIDS Resource Centers needs competent and enthusiastic staff. A large resource center containing several thousand materials and providing a range of information services will need at least two full-time members of staff (or equivalent) comprising one resource center officer, who has overall responsibility for developing and managing the resource center, and a resource center assistant, who carry out routine tasks such as ordering and receiving materials.

A resource center with fewer materials or offering fewer services will need only a resource center officer. Ideally, the resource center staff should have both knowledge of the subject area, and experience or training in resource center work.

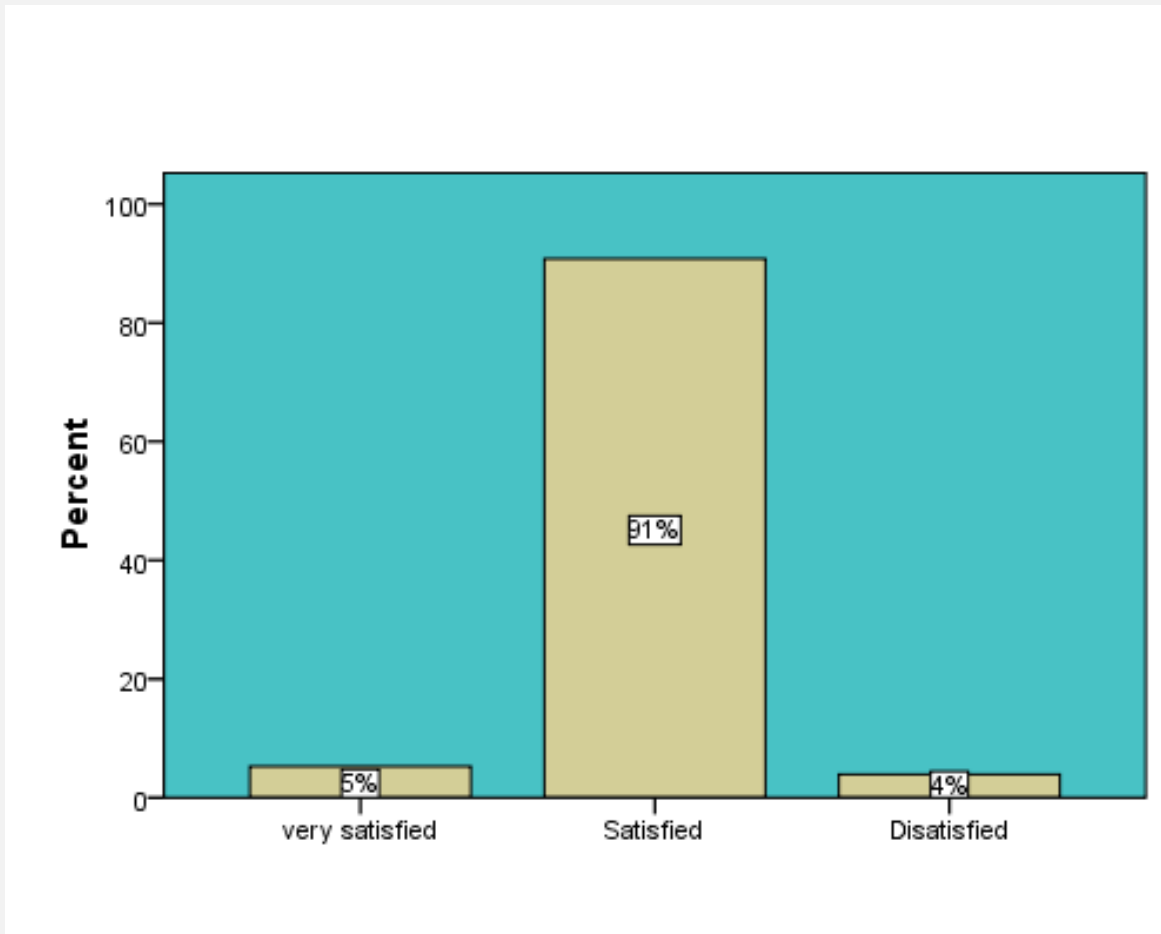
A resource center actively seeks to share the information that it contains. Resource center staff encourage people to use the materials. They not only help people to find the materials they need, but they also disseminate information in the resource center by producing and distributing locally adapted materials and information packs, holding training or discussion workshops, or arranging exhibitions. They also encourage people to use the information in the resource center and also help users gain access to information from other sources. (Health link Worldwide 2003).

Among the five measurement criteria's which were developed by (Berry et.al. 1992, responsiveness is among the one which focus on the willingness of staff to help customers and to provide prompt service and assurance is the other measurement criteria which focus on the knowledge and courtesy of employees and their ability to convey trust and confidence.

Accordingly, respondents were asked to give their opinion about the adequacy, professional competency and preparedness of the OARC staff. While responding to these questions 29 (38%), 43 (57%), 4 (5%) of them reported the number of staff working in the center are adequate, somehow adequate and not adequate respectively. Regarding their professional competency, 38 (50%) of them reported as the staff were competent, 35 (46%) reported as moderately competent and 3 (4%) reported as the staff were not competent. While responding to the level of preparedness of the staff in responding to the users need, 34 (45%) of them reported as the staff were well prepared 39 (51%) reported as somehow prepared and 3 (4%) said the staff were not well prepared.

As an integral part of these, respondents were also asked to rate the general satisfaction level they had about the overall quality of the staff support. As the findings from this study reveals 6 (8%) of them were very satisfied, 64 (84%) were satisfied, 6 (8%) were neither satisfied nor dissatisfied. Generally, higher satisfaction rate were reported on adequacy (79%), willingness of the staff to answer questions (78%), knowledge of the staff (82%), their discipline (79%) and efficiency of the staff in providing the necessary support.

Figure 6:Level of satisfaction on the overall quality of staff support



4.7.3-User opinion on the adequacy of IT infrastructure (Computers and soft wares)

In order to provide the necessary information services through an internet, ARC need to have the necessary IT infrastructure includingadequate number of fast and high-capacity computers. While assessing the beneficiaries opinion on the over all adequacy and capacity of the resource center computers 9(12%) of the respondents said the number of computers is adequate, 39(51%) somehow adequate and 17(22%) said they are notadequate. Regarding the capacity of the computers 9(12%) of them said adequate, 50(66%) said they are somehow adequate and 17(22%) of them said not adequate.

Further finding reveals that, 8(11%),53(70%) ,15(20%) of the users considered the soft wares uploaded on these computers were adequate, somehow adequate and not adequate respectively. And while assessing the general level of satisfaction on the adequacy and capacity

of the computers 9(7%) of them were very satisfied,61(80%) were satisfied,5(7%) were neither satisfied nor dissatisfied and only 3(4%) of them reflected their dissatisfaction

Table 2: users opinion on the adequacy of office facilities

	Adequate	Some how adequate	Not adequate
Number of computers	9	39	18
Capacity of computers	9	50	17
Adequacy of software	8	53	15

4.7.4-Users opinion and level of satisfaction on the adequacy and quality of the Internet service

Providing an internet services free of charge so as to enable the beneficiaries to access to a wide range of services including viewing organizations' websites on the 'World Wide Web', taking part in discussion groups, accessing on-line databases, reading electronic newsletters and journals, and viewing video clips is among the core services of the Oromia AIDS Resource center. For realizing these, the Resource center has a broad band internet infrastructure which is linked to the National AIDS Resource Center which is found in Addis Ababa.

While assessing the views and perception of the youth beneficiaries on the adequacy and quality of the internet service, respondents were asked if they have the experience of using the internet services and also other supplemental issues which are tailored to the adequacy and quality of the service. And, as the findings from the study reveals, all of the respondents,76(100%) of them have ample experience of using the service. Respondents were also asked the maximum time they are waiting to get the internet service and also the time they spend in utilizing the service. while responding to these questions, the maximum waiting time reported by the majority of the respondents was more than ten minutes (76%) and the service utilization time was forty minutes(80%) .

Looking further, respondents who were utilizing the internet services were asked to name any of HIV/AIDS related web site they had accessed. Amongst those who had utilized the internet services, only 25(33%) of them correctly remembered the name of HIV/AIDS related website they accessed and the remaining 51(67%) did not remember. And the commonly website address cited by the majority of these respondents was www.unaids.org.

While assessing their opinion on the adequacy and usefulness of the internet service , 17(22%),49(64%),10(13%) of the respondents said it is adequate ,somehow adequate and not adequate respectively, and substantial portion of the respondents 65(86%) rated the usefulness of the internet services, 8(11%)said it is somehow useful and only 3(4%) reported it is not useful.

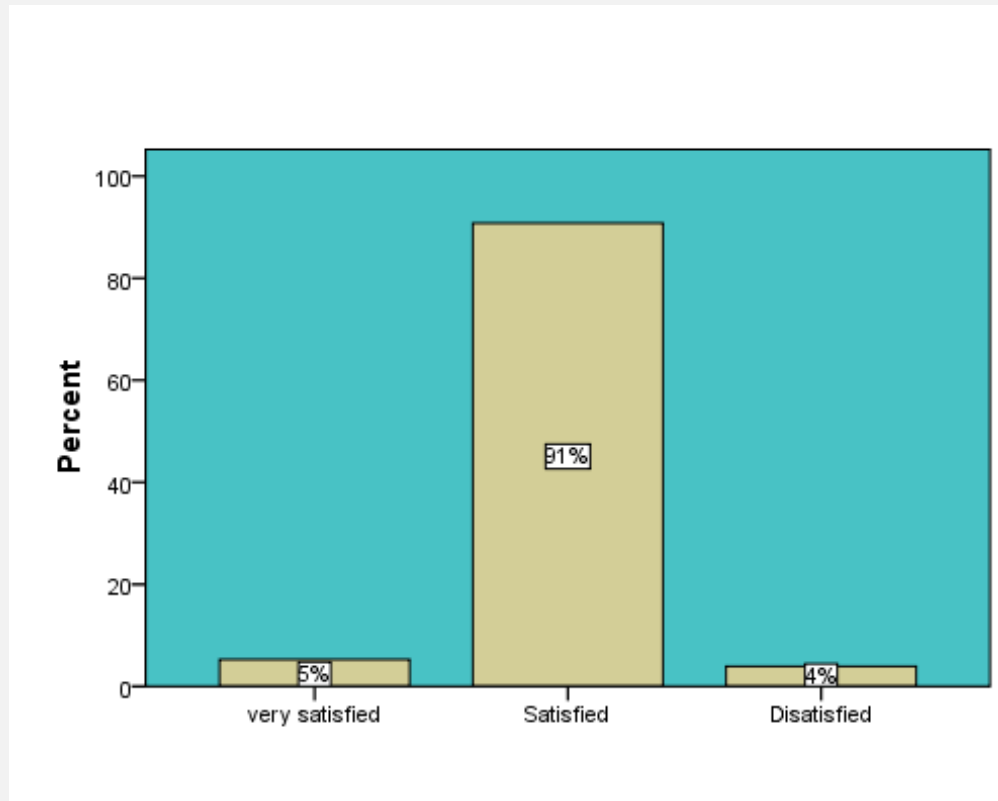
Table 3: Respondents response on the adequacy of the internet service

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Adequate	17	22	22	22
	Somehow adequate	49	64	64	87
	Not adequate	10	13	13	100

Respondents were also asked to rate their personal level of satisfaction on the overall quality of the internet service. Accordingly, among those youth who had been accessing the service 4(5%) were very satisfied,63(83%) satisfied, 4(5%) reported as neither satisfied nor dissatisfied and the remaining 5(7%) of them were dissatisfied with the service.

While a good satisfaction trend was observed on the speed of the internet (78%) and the time allowed to use the service (74%), slightly a higher the dissatisfaction rate (76%) was reported on the waiting time to get the services

Figure 7:Level of satisfaction on the overall quality of internet service



4.7.5-Users opinion and level of satisfaction on the adequacy and quality of the Library services

Improving the knowledge and attitudes of the youth and enabling them to bring the desired behavioral change and to protect themselves from HIV/AIDS through availing different books ,research papers ,guide lines and manuals on HIV/AIDS, VCT, PMTCT, ART, STDs,Tb and other HIV/AIDS and other health-related issues is also the other major objectives of OARCs. For this, the Resource Centers haslibrary service with different printed and electronic materials collections including periodicals, publications, and policy guidelines on HIV/AIDS, general and scientific books, research papers and brochures.

However, Resource Center library needs to be balanced in terms of subject areas and formats, to meet the needs of all users, not just some.

Also materials that are not relevant to users, or that are badly written or translated, are a waste of time and space. (Health link Worldwide, 2003).

So, while assessing views and perception of the beneficiaries about the adequacy and usefulness of the library collections, respondents were asked different questions including the experience they have in accessing and utilizing the library collections. Accordingly, all respondents (100%) reported the experience they had in using the library collection materials including books, educational pamphlets, government guidelines, handouts, newsletters, organizational reports, research reports, study guides and training materials to get information on HIV/AIDS and other health related information.

While assessing their service utilization rate 45(59%) of them reported always, 22(29%) some times and 9(12%) said occasionally. Furthermore, respondents were also asked if they remember the name any of HIV/AIDS related topics they read from the library collections. Amongst those respondents who had the experience of using the library collections, only few of them 7(9%) of them were able to mention the HIV/AIDS related topic they read about and the majority of them 69(91%) of them were not able to remember and mention it. And modes of HIV/AIDS transmission was the common HIV/AIDS related topic mentioned by few of the respondents.

Since, users perception positively or negatively determine one's inclination to use the service, respondents were asked to provide their opinion on the adequacy of the library collections, the understandability of the language of the materials and also the recentness and the usefulness of the materials found in the library collection. Amongst all respondents who had the experience of using the library collections, 14(18%) of them reported as adequate, 52(68%) somehow adequate and 10(13%) of them reported the available materials were not adequate.

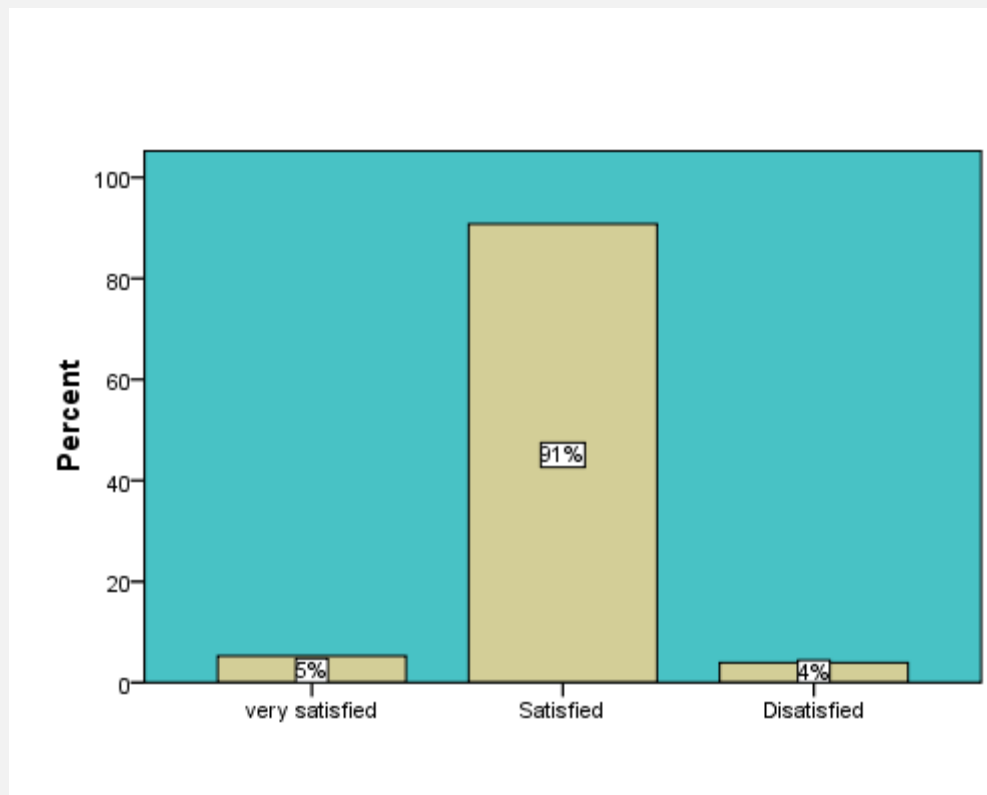
Regarding their opinion on recentness of the library collections, 16(21%) of them reported as adequate, 51(67%) somehow adequate and 9(12%) said it is not adequate. Regarding the understandability of their languages, 19(25%), 54(71%) they are understandable, somehow understandable respectively and the remaining 3(4%) of them said they are not understandable. While assessing the language preferences of respondents 53% preferred the materials to be in English, 11% Amharic and 37% preferred Afan Oromo.

The undisputable finding was on the usefulness of the library collection. While substantial portion of the respondents (89%) rated it as useful, only few of them 9% and 1% rated it as some how useful and not useful respectively.

Respondents were also asked to rate the general level of satisfaction they had about the overall quality of the service provided in the library. As the findings from this study reveals 4(5%) of them were very satisfied, 58(76%) were satisfied, 12(16%) were neither satisfied nor dissatisfied and few of them 2 (3%) were dissatisfied.

While a good satisfaction rate were reported on the accessibility of the library resources(75%),culture and gender sensitivity of the materials(67.5%),youth and HIV/AIDS target fullness of the materials (65%),language and HIV/AIDS message clarity of the materials(62.5) ,a slight dissatisfaction rate was reported on the adequacy of the collections(20%).

Figure 8: Level of satisfaction on the overall quality of the library services



4.7.6-Users opinion and level of satisfaction on the adequacy and quality of the Audio Visual services

In addition to the information services provided through the internet and library services ,the resource center also provide audio-visual services comprising audio cassettes and videos which focus on HIV/AIDS topics. While assessing the views and perception they had on the audio- visual services of the center, respondents were asked various questions including the

experience they had in accessing and utilizing the Audio visual services and also the opinion they have about the adequacy ,the understandability ,the recentness and the usefulness of the audio visual collections. Accordingly ,among the respondents 26(34%) of them reported the experience they had in using the Audio-Visual service to get information on HIV/AIDS and other health related information and the majority 50(66%) of them had not used the service.

And also, while assessing the service utilization rate 5(7%) said always 9 (12%) of them reported some times, 12(16%) said occasionally and 50(66%) said never. Furthermore, respondents were also asked to mention the name of the HIV/AIDS related topics they got from the audio visual collections of the center. Amongst those respondents who had the experience of using the services only 8(11%)of them were able to mention the HIV/AIDS related topic and the majority of the respondents 68(89%) were not able to mention any topic.

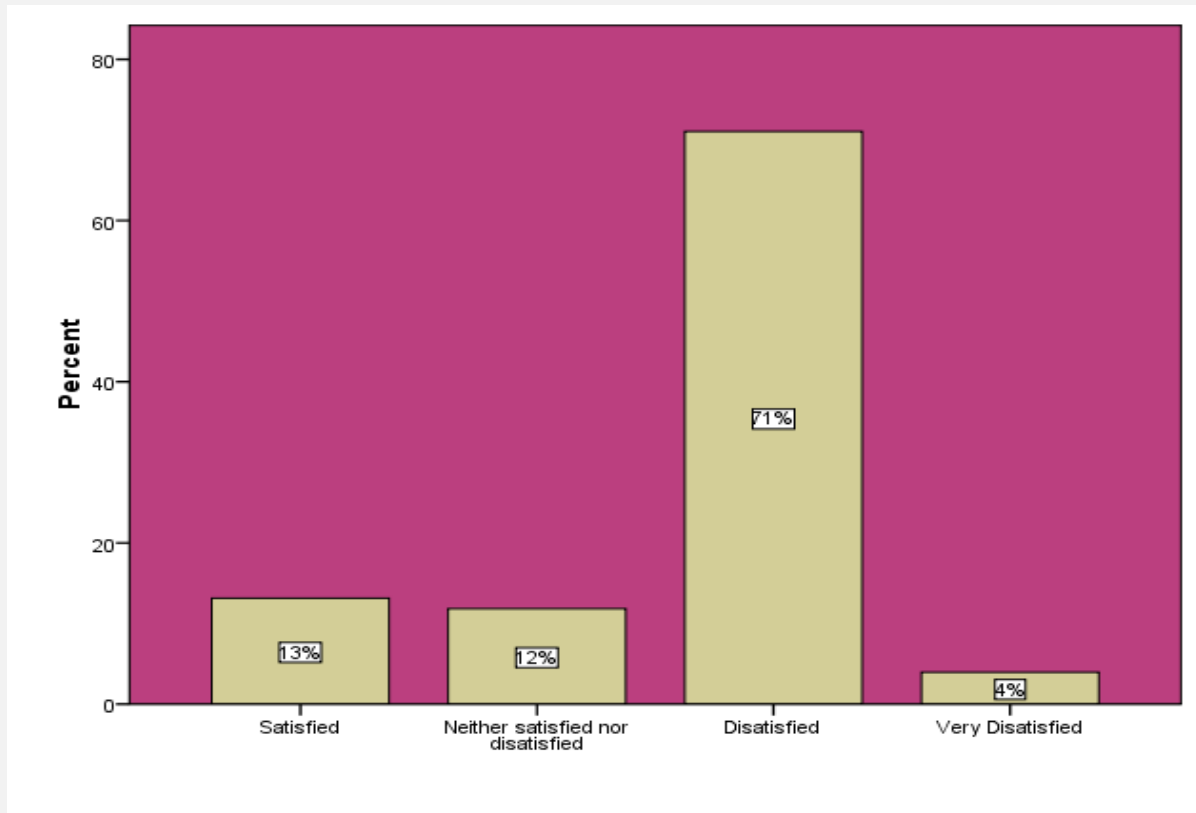
While responding to the adequacy, the understandability, the recentness and the usefulness of the audio visual collections of the Resource Center, the majority of them 78%, said it is not adequate,13% of them said it is somehow adequate and only few 7(9%) of them said it is adequate. On the recentness of the Audio-visual collections, the majority of the respondents 58 (76%) of them reported it is not adequate,12(16%)of them rated it as somehow adequate and only 6(8%) of them rated it as adequate.

Regarding the understandability of the Audio-visual collections languages 16(21%) ,42(55%) and18(24%)of them reported as understandable, somehow understandable and not understandable respectively. While responding to their language preference, 13(17%),10(13 %)and 53 (70%) said English, Amharic and Afan Oromo respectively. The undisputable finding was regarding the very importance and usefulness of the service. While substantial portion of the respondents 54(71%) of them rated it as useful, only 7(9%) and 15(20%) of them rated it as somehow useful and not useful respectively .

As an integral part of these, respondents were also asked to rate the general level of satisfaction they had about the overall quality of the Audio visual service provided in the center. As the findings from this study reveals, only few 10(13%) of them were satisfied and 9(12%) of them were neither satisfied nor dissatisfied. But the majority 54(71%) of them expressed their dissatisfaction and the remaining 3(4%) were highly dissatisfied.

Some of the dissatisfactions issues which were reported by the majority users were on the adequacy of the materials (74%), conformity of the sitting room (68%) and on the accessibility of the Audio-visual collections (72%).

Figure 9: Level of satisfaction on the overall quality of the Audio-Visual Service



4.7.7-Users Opinion and level of satisfaction on the adequacy and quality of the Printing service

As an integral part of improving the knowledge and attitude of the youth beneficiaries, Oromia AIDS Resource Center also provide printing service. With the same pragmatic spirit of assessing the views and perception of the beneficiaries on the adequacy and usefulness of the printing services provided by the center, respondents were asked some questions including the experience they have in accessing the printing services.

As the findings from the filed study reveals, among the total respondents only 17(22%) of them had utilized the services and the majority of the respondents 59(78%) of them had never used the printing service of the center, and the lack of adequate printing machines in the

Resource Center was the major reason which was mentioned by the service provider and by the majority of the youths who had no experience in accessing the printing services of the center.

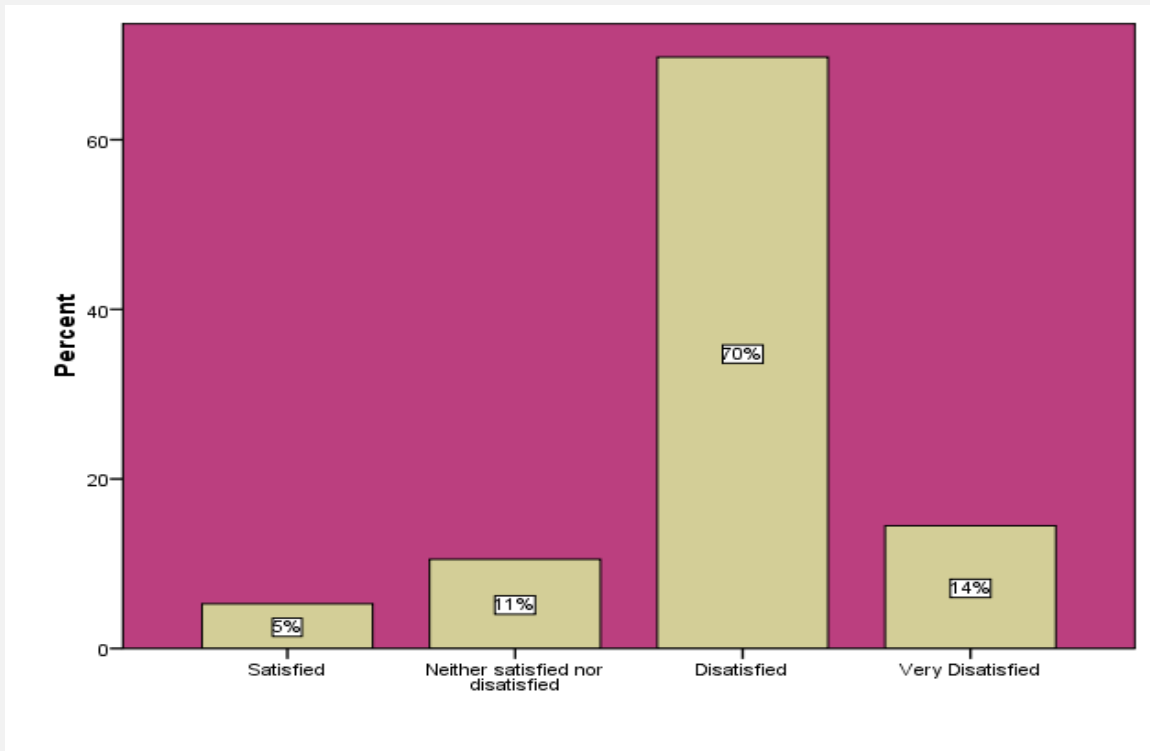
From the discussion which was conducted with the Resource Center staff, it was realized that there was no printing machine which was put in place in the Center for the provision of the necessary service for the users. Only the two printers which are used by the Resource Center staff were the machines which are sometimes used by the users.

Supplemental to these, respondents were also asked about the opinion they have on the adequacy and usefulness of the printing service. Among those respondents who had the experience of accessing the service, the majority of them 67(88%) rated it as inadequate, 8(11%) of them reported somehow adequate and only one respondent rated it as adequate. Regarding the necessity and usefulness of the service, the majority of the respondents 62(82%) of them reported it as useful, 3(4%) as somehow useful and 11(14%) of them reported it as not useful.

While assessing the service quality, respondents were also asked to rate the general level of satisfaction they had about the overall service quality of the photo copy services of the center. Accordingly, while substantial portion of the respondents 53(70%) of them reflected their dissatisfaction, 11(14%) reported their very dissatisfaction and only 4(5%) of them reported their satisfaction and 8(11%) of them reported as neither satisfied nor dissatisfied.

Higher level of dissatisfaction was reported on the over all aspects of this service including on the adequacy of the printing machines (74%), on the capacity of the printing machines (76%) and on the accessibility of the machines (68%)

Figure 10: Level of satisfaction on the overall quality of the printing service



4.7.8-Users opinion and level of satisfaction on the adequacy and quality of the Photo copy service

It is a bare fact that Photocopying articles from periodicals or pages from books makes information more easily accessible to users. Cognizant of this, Oromia AIDS Resource Center provide photo copy service. And, while assessing the views and perception of the beneficiaries about this services, first respondents were asked if they had the experiences of accessing and getting the photo copy services of the center and if yes their major purpose and if no they were asked to specify their major reasons.

In additions to these, they were also asked to give their opinion about the adequacy and usefulness of the photo copy services of the center. And, as the findings from the analysis made on the responses of the studied population reveals the majority of the respondents 61(80%) had never used the service and only 15(20%) of them had the experience of utilizing the service .

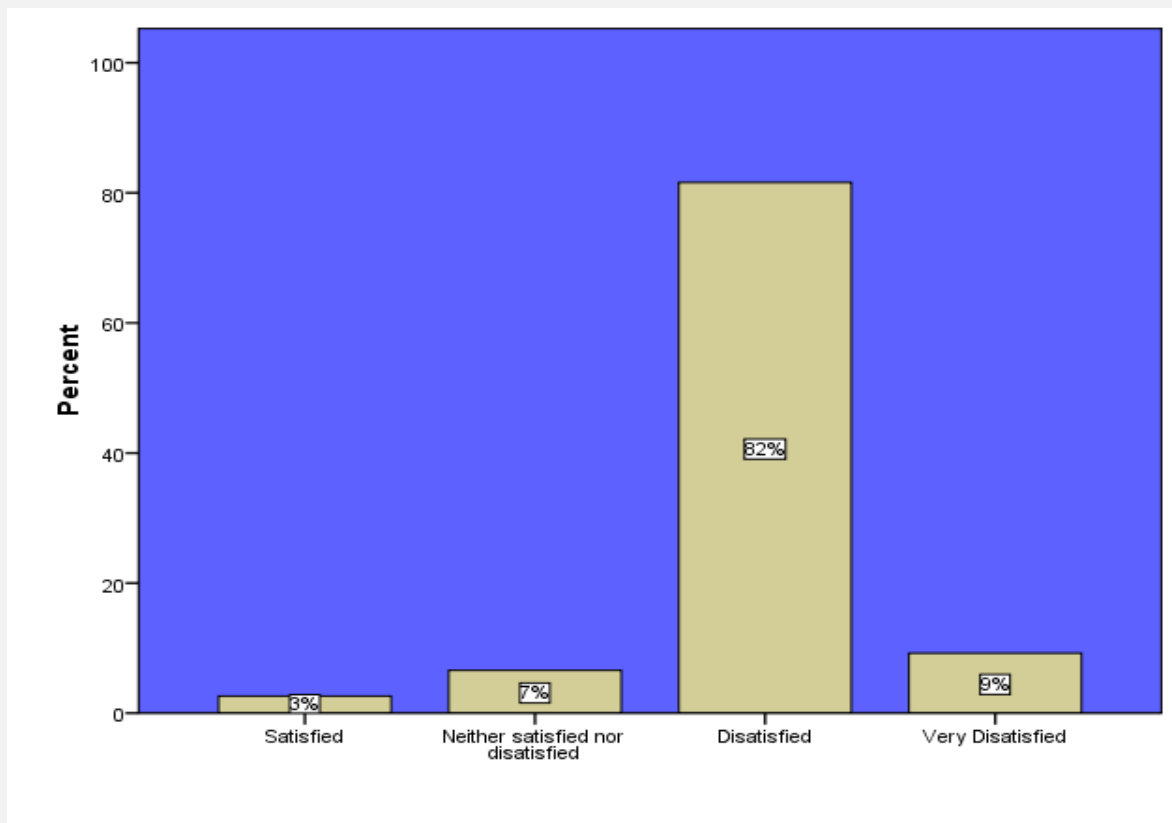
The lack of adequate photo copy machines which was the major reason cited by the Resource center staff and by the majority of the respondents who were not utilizing the service.

Through the physical observation conducted only one old Canon photo copy machine was identified in the resource center.

And while assessing the opinion they have on the adequacy of the service ,only few of them 11(14%) rated it as adequate. The majority 65(86%) of them considered it as inadequate. Regarding the usefulness of the service 62 (82%) of the respondents rated it as useful, 2(3%) rated it as somehow useful and 12(12%) of them rated it as not useful.

While assessing the service quality, respondents were also asked to rate the general level of satisfaction they had about the overall service quality of the photo copy services of the center. Accordingly, while substantial portion of the respondents 62(82%) of them reflected their dissatisfaction, 7(9%) reported their very dissatisfaction and few 3(4%) of them reported their satisfaction .Higher level of dissatisfaction was reported on the over all aspects of this service including on the adequacy of the photo copymachines (86%), on the capacity of the photo copy machines (86%) and on the accessibility of the photo copy machines (79%)

Figure 11: Level of satisfaction on the overall quality of the photocopy service



4.8-Discussion

AIDS Resource Centers play an important role in improving access to information through collecting and availing different information services that are useful to a particular group of people, such as the youth. Resource centers can support a wide range of learning activities by making information available and they can play a valuable part in improving the health of a nation. Materials may be very varied, including training manuals, handbooks, reference books, directories, leaflets, posters, games, videos and samples of equipment. However, AIDS resource center is much more than a collection of organized materials. Particularly, finding out what services people need, deciding how to meet their information needs and encourage people to use the materials and share the information that it contains is vital.

In addition to these, ensuring the quality of the resource center services is also very crucial. Many researchers have associated service quality with the target beneficiaries expectations and perceptions of quality, stating that “the quality of services is the ability to meet the customers’ expectation”

Therefore, while assessing the views and opinions of the beneficiaries regarding the usefulness of the resource center services, substantial percentage of them agreed on the usefulness of the ARC services comprising: 86% internet services ,80% on the library services, 89% on the printing 82% on photo copy 82% on the printing and 71% on Audio-Visual services. However, the opinion of the beneficiaries on the adequacy and quality of each service is quite different. Only few of them agreed on the adequacy of the resource center services.(Only 22% reported on the adequacy of the internet services, 18% on the library,1% on the printing,14% on photo copy service and 9% on the audio-visual services).

Considerable percentage of them ,64% and 68% said the internet service and the library services are somehow adequate and 88% of them said the printing service is not adequate ,86% said the photo copy service is not adequate and 78% of them said the audio-visual service is not adequate.

Table 4: summary of users opinion on the adequacy of OARC services

	Adequate	Somehow adequate	Not adequate	Cumulative
Internet	17	49	10	76
Printing service	1	8	67	76
Photo copy service	1	11	65	76
Library service	14	52	10	76
Audio visual service	7	10	59	76

While discussing on the quality of the ARC services and the level of satisfaction they have, most of the focus group discussion participant reflected similar opinion and views which supplement those findings from the respondents of the research questionnaires. The majority of them said that compared to the prevailing needs of the youth, the services which are provided with the center are not adequate enough. Particularly in addition to improving the adequacy and quality of all services provided so far, designing and implementing other youth targeted HIV/AIDS programs such as life skill education and voluntary counseling and testing were some of the issues which were raised by the FGD participants.

One of the key informants also said that “as you know Adama town has a high concentration of bars, hotels, and brothels where different alcohols and local brews are sold. In addition to these, the town has many youth and other highly vulnerable individuals such as commercial sex workers, and also the town is characterized by high prevalence of HIV/AIDS. Despite all these, the services which the community is getting from OARC and other institutions is not adequate. So the concerned body has to take the necessary measures to enhance the service provision institutional capacity of the Resource Center through procuring the necessary materials and also through availing additional services such as counseling, peer education, and so on”.

While addressing the major strengths of the resource center, the existence of committed staff and the accessibility of the office location were among the major strengths cited by the majority of the FGD participants. While addressing the major weakness of the ARC, one of the discussant said “this ARC was established before seven years back. However, compared to

the years it registered and the objectives it shoulders, the effort made by the Resource center to improve and expand the adequacy and quality of its services are not adequate and satisfactory.”

This shows that despite the existence of high demand and understanding on the very importance and usefulness of the AIDS Resource Center Services in the prevention of HIV/AIDS among the youth and other vulnerable groups, the effort made to respond to their demand through availing adequate services was not adequate.

Again, while analyzing the general level of satisfaction they have on the overall quality of the resource center services, a part from those relatively good satisfaction rates reported on the internet services (83%) , library service (76%), office facilities (91%) and on staff support (84%), high dissatisfaction rate were reported on the overall service quality of the photo copying, printing and Audio –visual services of the center.

The good satisfaction rates which are observed on the office facilities, internet and library services are not mean without limitations. Even though considerable of the respondents reported the general satisfaction they have on the office location & facilities and on the library and internet services, same proportion of them were dissatisfied with the adequacy and cleanness of the toilet rooms (78% were dissatisfied & 13% were very dissatisfied) and 76% of them were neither satisfied nor dissatisfied with the waiting time to get the internet service.

With the same scenario, while assessing the overall satisfaction level of the beneficiaries regarding the accessibility and adequacy of the resource center infrastructure including the accessibility of the office location ,its opening hours, the adequacy of the office space, furniture's and utilities , generally relatively a good level of general satisfaction (91%) was reported. Even if this can be considered as a positive achievement, this does not mean without limitations. Particularly, the highest level of dissatisfaction (78%) and very dissatisfaction rates (13%) which are reported on the adequacy and cleanness of the toilet rooms will have an adverse implication in shadowing the quality of the infrastructures of the resource center.

As it was previously addressed, AIDS resource centers need competent and enthusiastic staff who have the necessary knowledge and experience of the subject area and who are also responsible for the managing the day-to-day operation of the AIDS Resource center. The other undisputable finding from the assessment conducted on the general satisfaction rate of the beneficiaries was on the staff support. Substantial percentage of the respondents (84%) reported

the overall satisfaction they had on the staff support .However, slight variation of opinion was observed on the adequacy, competency and preparedness of the staff. Accordingly, while 57% of the respondents said the staff number are somehow adequate only 5% of them said the staff number is not adequate.Similar trend was observed on the competency and preparedness of the OARC staff. Accordingly, while 46% and 51% of the respondents said the staff are somehow competent and moderately prepared, the remaining few of them said the staff are not competent (4%) and not prepared at all (4%).

This is also similar to with what one of the Resource Center staff said “ For the past six years I have been working in OARC.And, I have the exposure to meet with several people who came to the center for differentpurpose. Among them the youth comprise the largest portion of the resource center users. Sometimes they request as different information and guidance particularly on issues which are related with the youth and HIV/AIDS. Even if we have the necessary technical skill in managing the ARC IT infrastructures, we don’t have adequate knowledge on those issues related to HIV/AIDS. In effect we are not in a position to provide adequate response for some HIV/AIDS related issues which are raised by the youth. So, the knowledge gap we have should be improved through providing us the necessary training and through recruiting additional multi-disciplinary staff with the necessary health and other social science back ground”. This shows the need to enhance the technical and managerial competency of the staff through the provision of the necessary training.

CHAPTER FIVE

CONCLUSION AND RECOMMENDATIONS

5.1-Conclusion

As it was previously addressed, assessing the service quality and level of satisfaction among the youth beneficiaries of Oromia AIDS Resource Center was the major objective of this study. Towards this, various data and information which are vital for assessing and measuring the adequacy of the services from the views and opinion of the youth beneficiaries and several attributes which are believed to examine and measure the level of satisfaction they have on the quality of the services provided by Oromia ARC and also other information which are vital for identifying the major strengths and constraints that may affect the service quality and effectiveness of the OARC's services were adequately collected, analyzed and interpreted.

Among the undisputable findings of this study is that, there is a general agreement among the majority of the youth beneficiaries that the services which are provided by OARC are very useful. This can clearly be observed from the number of respondents who reported on the usefulness of the ARC center services.

However, coupled with the limitation of the ARC in designing and putting in place formal and regular mechanisms for assessing its beneficiaries' need and for measuring the levels of satisfaction they had on the quality of its services, the greatest potentiality of the Resource Center in attaining its objectives through availing and providing adequate, timely and quality services which are tailored to the need of the youth beneficiaries still demand much more effort.

Particularly, enhancing the major objectives and role of the Resource center in preventing the spread of HIV/AIDS through availing and providing adequate, timely and quality information services which are tailored to HIV/AIDS and the need of the youth beneficiaries is vital. For this, responding to the major gaps identified through this study and improving those ARC facilities and services where considerable level of users' dissatisfaction were observed is very important.

5.2-Recommendation

Some of the thematic issues gaps which were identified during the study with their respective recommendation comprise the following.

1. Promoting OARC services in the community through developing and distributing different IEC materials and through using local Medias such as Oromia TV and Radio.
2. Providing adequate orientation and information about the objectives and services of the ARC for the beneficiaries when they first come to the ARC
3. Designing and putting in place formal and regular mechanisms for assessing its beneficiaries need and for measuring the levels of their satisfaction
4. Expanding the service packages of the Resource Center through designing and integrating other HIV/AIDS programs such starting youth peer group community conversation programs, peer counseling and life skill education, youth HIV/AIDS counseling , guidance and through availing hot line services,
5. Improving the technical and managerial competency of the staff through the provision of on job and off job training and through recruiting other multi-disciplinary staff
6. Upgrading the capacity of the existing computers and procuring additional ones
7. Improving the dissatisfaction rate which was observed on the waiting time which is spent for getting the internet services through availing adequate number of computers and office facilities Improving the adequacy of the office space and furniture
8. Motivating and supporting the youth users to conduct peer group discussions on HIV/AIDS issues in the Resource Center compound so as to enable them to remember and practice the HIV/AIDS knowledge and information they acquired from the ARC
9. In order to improve the major weakness and high dissatisfactions rates which were observed on the overall adequacy ,capacity accessibility and quality of the Audio-Visual ,Photo copy and printing services ,availing adequate number of Audio video collections and printing and photo copy machines
10. Improving the slight dissatisfaction rates which were observed on the adequacy, recentness and language of the library collections through availing adequate number of library collection with different local languages.
- 11.** Improving the high dissatisfaction rate which is reported on the adequacy and cleanness of the toilet facilities of the ARC,

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ANNEX I- QUESTIONAREY FOR ASSESSING SERVICE QUALITY PERCEPTION AND LEVEL OF SATISFACTION AMONG THE ARC YOUTH BENEFICIARIES

INTRODUCTION:

My name is BelayAurgessa. I am presently attending Graduate Program at Indra Gandhi Open University in collaboration with School of Graduate Studies of St.Mary's University College .These questions are prepared to collectdata on Service quality perception and level of satisfaction among Oromia AIDS Resource Center youth beneficiaries. Your honest and genuine response to these questions will have a great value tothe research outcomes of the study. Besides, your responses are completely confidential. Your name is not be written and do not be used in connection with any of the pieces of information you will provide. I would greatly appreciate your help in responding to all questions in the interview schedulebeforehand.

I-BackgroundCharacteristics

	Questions	Response
1	Sex	1-Male 2-Female
2	Age in years	
3	Religion	1-Orthodox Christian 2-Muslim 3-Protestant 4-Catholic 4-Pagan(no religion)
4	What is your marital status?	1-Never married 2-Married 3-Divorced 4-separated/ 5-Widowed

		6-Widower 7-No response/undecided
5	Have you ever attended school?	1-Yes 2-No (Illiterate) 3-No response/undecided
6	What is your educational back ground	1-Natural science 2-Social science
7	What is the highest level of education you completed?	1-Read and write 2-Primary 1st Cycle (Grade 1-4) 3-Primary 2nd Cycle (Grade 5-8) 4-Secondary 1st Cycle (Grade 9-10) 5-Secondary 2nd Cycle (Grade 11-12)
8	What is your occupation?	1-Salaried employed 2-Unemployed 3-Self-employed 4-Student
9	What is your monthly income?	
10	Have you received any training	1-Yes 2-No
11	If yes specify	

II- Reasons for visiting and acquaintance with the center

1-For how long you have been using Oromia AIDS Resource Center services?

- a) For a week b) for a month c) for a year d) more than a year

2-From where did you get the information about the ARC?

- a) Friends b) radio c)internet d) billboard e) Television

3-How frequentdo you come to the resource center within a month?

- a) Daily b)weekly c)bi weekly d) monthly

4-What is the reason of your visiting to the center?

- a) To read books/newsletters ,journals
b) To use audio visual services
c) To use internet service

- d) To update myself with new scientific developments
- e) To pass my leisure time

5- Had you received any orientation about the objectives of the ARC when you first come to it?

- a) yes
- b)no

6- Had you received any orientation on the services provided when you come to it the first time?

- b) yes
- b)no

7-Which of the following services you have mostly used? (More than one response is possible)

- a) Library Services
- b) Internet services
- c) Audio-visual services
- d) Printing /Photocopy services

8-For which of the following purposes have you been using the ARC services?

- a) Self-learning/awareness
- b) teaching/training
- c) working with the community
- d) planning activities

III-Users opinion on Information Technology (IT) infrastructure

1-Computers and software

1.1-What is your opinion regarding the number of computers available in the center?

- a) Adequate
- b) somehow adequate
- c) not adequate

1.2-What is your opinion regarding the capacity of the computers available in the center?

- a) Adequate
- b) somehow adequate
- c)not adequate

1.3-What is your opinion regarding the adequacy of the software uploaded on the computers?

- a) Adequate
- b) somehow adequate
- c)not adequate

2-Internet service

2.1-Have you used the Internet service of the Center to get pieces of information on HIV/AIDS?

- a) Yes
- b) no

2.1.1- If yes, how often frequently?

- a) Always
- b) Sometimes
- c) Occasionally
- d) Never

2.1.2- If "No", Please state the reason _____

2.2-For how long, are you waiting to get the Internet service?

- a) Immediately
- b) five minutes
- c) ten minutes
- d) more than ten minutes

2.3-For how long are you sitting to utilize the Internet service?

- a) Twenty minutes
- b) thirty minutes
- c) forty minutes
- d) more than forty minutes

e) Adequate b) somehow adequate c)not adequate

2.4-What is your opinion regarding the understandability of the language of the audiovisual materials?

a)Understandable b) somehow understandable c)not understandable

2.5-What type of language(s) would you like the audiovisual materials to be in?

b) English b)Amharic c) Afan Oromo

2.6-What is your opinion regarding the adequacy of the audiovisual services?

f) Adequate b) somehow adequate c)not adequate

2.7-What is your opinion regarding the recentness of the audiovisual materials?

b) Adequate b) somehow adequate c)not adequate

2.8-What is your opinion regarding the usefulness of the audio visual materials?

a)Useful b) somehow useful c) not useful

V- Opinion on physical infrastructure

1-what is your opinion on the locationof the ARC office?

a) easily accessible b)somewhat accessible c)difficult to access

2-what is your opinion about the office space?

a) adequate b)somewhat adequate c) inadequate

3-what is your opinion regarding the adequacy of the office furniture's?

a) adequate b)somewhat adequate c)not adequate

4-what is your opinion regarding the adequacy of electricity, water and toilet facilities?

a) adequate b) somewhat adequate c) not adequate

VI-Human resource

1-What is your opinion regarding the adequacy of the staffs working in the ARC?

a) adequate b) somewhat adequate c) not adequate

2-What is your opinion about the competency of the staff in the center?

a) Competent b) moderately competent c) not competent

3-What is your opinion on the preparedness of the center staff in responding to your need?

a) well prepared b) somewhat prepared c) not prepared at all

Thank you

VIII-Level of user's satisfaction

Please rate the level of your satisfaction by ticking on the blank box

	Satisfaction measures	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied
I	IT infrastructure					
1	Internet service					
1.1	The speed of the internet service					
1.2	Adequacy and capacity of the computers					
1.3	Waiting time to get the service					
1.4	Time allowed to use the internet service					
1.5	General rating on the quality of the internet service					
2	photo copy service					
2.1	Adequacy of the photo copy machines					
2.2	Capacity of the photo copying machine					
2.3	Accessibility of the photocopy machine					
2.4	General rating on the quality of photo copying service					
3	Printing service					
3.1	Adequacy of the printing machines					
3.2	Capacity of the printing machine					
3.3	Accessibility of the printing machine					
3.4	General rating on the quality of printing service					
II	On IEC collection					
1	On library collections					
1.1	Conformity of the library room					
1.2	Adequacy of the HIV/AIDS IEC materials					
1.3	Language and HIV Message clarity of the IEC materials					
1.4	culture and gender sensitivity of IEC materials					
1.5	Youth & HIV/AIDS target fullness of the library collections					
1.6	Accessibility of the library resources					
1.7	Recentness of the IEC/BCC materials					
1.8	General rating on the quality of the library service					

	Satisfaction measures	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied
2	<u>Audio visual service</u>					
2.1	Adequacy of the Audio visual materials					
2.2	Quality of the audio visual materials					
2.3	Language and Message clarity,					
2.4	Culture and gender sensitivity,					
2.5	Recentness of the audio visual collections					
2.6	accessibility of the audio visual collections					
2.7	Conformity of the sitting room					
2.8	General rating on the quality of the Audio visual service					
III	physical infrastructure					
1	Level of satisfaction on the location of the resource center					
2	Level of satisfaction about the opening hours of the resource center					
3	Adequacy ,cleanness and Conformity of sitting chairs and tables					
4	Privacy ,cleanness and conformity of the sitting room					
5	Adequacy of electric Light and windows					
6	Adequacy and cleanness of the Toilet rooms					
7	General rating on office location & arrangement					
IV	STAFF SUPPORT					
1	Adequacy of the OARC Staff					
2	willing of the staff to answer any questions					
3	Knowledge and Skill of the staff					
4	disciplines of the staff					
5	Willingness and knowledge of the staff in giving adequate information on HIV/AIDS issues					
6	Efficiency of the staff in providing the necessary support					
7	General rating on staff support					

ANNEX II-FOCUS GROUP DISCUSSION GUIDING QUESTIONS

1. Introduction

My name is Belay Aurgessa. I am attending Master of Social Work from Indra Gandhi Open University college in collaboration with St. Mary's University College. This discussion is part of the study and aims at exploring and understanding the quality perception and level of satisfaction among OARC Youth beneficiaries. Your contribution in this discussion could help in successfully accomplishing my study and future interventions pertaining to this concern. Your opinion and views discussed in this discussion will be used only for this study and will be confidential. Your honest and genuine answer to the issues will be great value for the study as well as addressing the problem of HIV/AIDS in our society. I would greatly appreciate your help in responding to this study. Your participation is voluntary, you may stop any time.

No.	Name	Age	Sex	Religion	Educational level	Occupation
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

A. Body of the discussion

1-What do you know about the objectives of OARC?

2-How Do you explain the quality of the services provided by OARC

3-How do you explain the level of satisfaction of the youth beneficiaries of OARC? 4-Would you please explain the major strengths of the resource center?

5-Would you please comment on the major problems of the Resource Center services?

6-Would you please suggest possible solutions to overcome those problems for the better improvement of the services?

7-Are there any other issues that you would like to say?

Thank you!

ANNEX III. INTERVIEW GUIDE FOR UN STRUCTURED INTERVIEW WITH KEY INFORMANTS

Introduction:

My name is Belay Aurgessa. I am attending graduate school of social work at Indra Gandhi Open University in collaboration with St. Mary's University College. This questionnaire is prepared to collect information on Service Quality and level of satisfaction among Oromia AIDS Resource Center youth Beneficiaries. Your honest and genuine answers to these questions will have a great value to the research outcome. Your answers are completely confidential. Your name will not be written and will never be used in connection with any of the information you provide. I would greatly appreciate your help in responding to this questionnaire.

Responsibility _____

- 1-What is your opinion/perception on the quality of the Internet, library, Audio video and Printing services provided by OARC
- 2-Do you think the resource center location ,sitting rooms& furniture's ,resource materials and service opening hours are so adequate that it can accommodate average number of customers?
- 3-How accessible is the resource center to users (steps, layout, and narrow corridors)?
- 4-What are the major strengths of the Resource Center?
- 5-What are the major constraints of the Resource Center?
- 6- What do you suggest to improve the level of quality services accessed by the youth at OARC?
- 7-Any suggestion?

Thank you!

ANNEX IV-INTERVIEW GUIDE FOR SEMI-STRUCTURED INTERVIEW WITH OARC STAFF

- 1-Briefly describe the objectives of the resource center and its main services.
- 2- What are the major services provided in the Resource Center?
- 3- What formats do you collect? For example Books ,journals/newsletters videos, CD-ROMs ,slides posters others (please list)
- 4-Are there adequate HIV/AIDS youth specific resource materials in the library and audio visual collection? If yes, please list out
- 5- How do you store your information materials? Example in box files ,organized on shelves ,heaped on shelves ,no organized order or other (please specify)
- 6- What systems for processing and accessing the information have been developed? Example card catalogue, computer database, data base on website other (please specify)
- 7-Who uses the information in your resource center? Example; teachers/ trainers, In school and out of school youth, hospital workers, community health workers, researchers, communitygroups others (please specify)
- 8-Do you think the resource center location ,sitting rooms& furniture's ,resource materials and service opening hours are so adequate that it can accommodate average number of customers
- 9-Is there a possibility of not obtaining the service on the day of the request? If yes why?
- 10-Is there a mechanism drawn for reducing the length of waiting (or the average time it takes to be served?if “yes”, please specify
- 11-Is there a standard for quality of ARC facility services and professional qualification of IT man power? If yes, please specify
- 12-Does the center has made any initiative and procedures to develop mechanisms for ensuring the quality of services and monitoring improvements? if yes please specify
- 13-Is there any mechanism for insuring the availability of essential and updated HIV/AIDS resource materials at the different time? If” yes “pleasespecify
- 14-Are there any survey which was conducted to assess user’s perception and level of satisfaction? If yes, please specify
- 15-What are the major strengths of the Resource Center?
- 16-What are the major constraints of the Resource Center?
- 17-What are your recommendations to improve these constraints
- 18-Any suggestions

Thank you very much for taking time to answer these questions.

Annex V -Statement of Informed Consent

I, _____, am requested to be the respondent of a study on service quality and level of satisfaction among OARC youth beneficiaries in Adama Town which is going to be conducted by Belay Aurgessa as a partial fulfillment for the requirements of MSW. I understand that the general purpose of the study is to assess service quality perception and level of satisfaction among the youth beneficiaries. My opinion and views which will be generated in this survey will be used only for the purpose of this study and will be kept confidential. Any personal identification will not be included in the thesis. I also understand that as a respondent, my participation in this study is voluntary and I have the right to withdraw from the interview process at any time. I am signing on this document on voluntary basis to be interviewed by the researcher.

Signature of the respondent _____ date _____

Signature of the researcher _____ date _____

