

Factors affecting utilization of University health services in a tertiary institution in South-West Nigeria

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Abstract

Background: Most university health services have extensive health infrastructures, for the provision of effective and efficient health services to the students. In this study, we have tried to determine student's perception of factors affecting their utilization.

Objective: To determine students' perception of health care services provided in a tertiary institution and assess students' attitude towards utilization.

Materials and Methods: Simple random sampling technique was used to select 540 respondents, comprising of 390 males and 150 females. A structured and self-administered questionnaire was the instrument used to collect data for the study, while data collected was analyzed using descriptive statistics of frequency count and percentage.

Results: High cost of drugs (72.0%), non availability of essential drugs (54.8%), time spent waiting for treatment (67.2%), inadequate referral services (81.7%), and satisfaction with services (60.6%) were considered by the respondents as factors affecting the utilization of university health services. Students-medical staff relationship and accessibility to health facility (77.6% and 74.3% respectively) were, however, not considered as factors that affect utilization of university health services.

Conclusion: It is recommended that to improve utilization and cost of care, government should make necessary efforts to incorporate tertiary institution into National Health Insurance scheme so that students above the age of 18 years can benefit from free treatment.

Key words: Health services, health workers, South West Nigeria, tertiary institution, utilization

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Introduction

The term health services cover a wide range of services in health promotion, illness prevention, early detection of diseases and management of health problems within the community.^[1] Health services are designed to meet the health needs of the community through the use of available health facilities with health manpower carrying out their professional duties.

Globally, universities do have health centers, which are expected to provide adequate health care for the community. For instance, the university health service in Oklahoma State University,

USA, maintains that its duty is to provide the students access to affordable and superior health services.^[2] In Tanzania, evaluation of health services utilization among students in the Arusha region revealed that most students benefited and utilized modern health services and the improvement of modern health system is likely to benefit students' population.^[3]

It has been noted that religion, cost of health services, distance of health facilities, waiting time and quality of

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care, were found to be contributory to the non-utilization of health facilities.^[4] In a study of some factors affecting utilization of health services, in the University of Benin, Alakija^[5] stated that easy accessibility to the medical centre, time spent in waiting for treatment, students-medical staff relationship and availability of essential drugs were among factors affecting utilization of services.^[5] Patient satisfaction has received little research attention, and it is unclear whether the issue is being addressed in university health clinic.^[6]

In Nigeria, studies on students' utilization of health services are sparse. The aim of the study therefore is to determine the factors affecting utilization of university health services in south west Nigeria.

Materials and Methods

The descriptive survey research design was used for this study. The sample for the study was from a tertiary institution in south west Nigeria, and consisted of 657 students who are resident in the university hostels representing 10% of the total population of 6,572, consisting of 4087 male and 10485 female students resident in the hostels. Proportionate sampling technique was used to select 409 male and 150 female undergraduate resident students of the institution.

A structured and validated questionnaire designed according to the variables studied was used to collect data for the study. The reliability of the instrument was established using the test re-test method. The results were analyzed using Pearson Product Moment Correlation Coefficient to obtain the reliability. A reliability index of .78 was obtained and this was considered high enough. Of 657 copies of the instrument distributed 540 were duly completed and returned giving a return rate of 82%. These were used for data analysis. Data collected were analyzed, using descriptive statistics of frequency counts and percentage.

Results

A total of 540 students, consisting of 390 (72.2%) males and 150 (27.8%) females who are resident in the university hostels were recruited for the study. Majority of the respondents (54.8%) were 22 years and above. Only 8.7% were within 16 and 18 years [Table 1].

Table 1 revealed that majority of the respondents (54.8%) were 22 years and above, while 36.5% were between 19 and 21 years. Only 8.7% were between 16-18 years.

Information on Table 2 showed that majority of the respondents were males (72.2%), while 27.8% were females.

Table 1: Distribution of respondents according to age (n=540)

Age (years)	Frequency	Percent
16-18	47	8.7
19-21	197	36.5
22 and above	296	54.8
Total	540	100

Table 2: Distribution of respondents according to gender (n=540)

Gender	Frequency	Percent
Male	390	72.2
Female	150	27.8
Total	540	100

Table 3: Factors affecting utilization of university health services (n=540)

Factors	Yes (%)	No (%)
Inadequate referral services	441 (81.7)	99 (18.3)
High cost of drugs	389 (72.0)	151 (28.0)
Time spent in waiting for treatment	363 (67.2)	177 (32.8)
Satisfaction with services	327 (60.6)	213 (39.4)
Non availability of essential drugs	296 (54.8)	244 (45.2)
Accessibility to health facility	139 (25.7)	401 (74.3)
Students-medical staff relationship	121 (22.4)	419 (77.6)

Responses on Table 3 indicate that inadequate referral service (81.7%) was the factor that affected utilization of university health services the most. This was followed by high drugs (72%), time spent in waiting for treatment (67%), satisfaction with services (60.6%), and non availability of essential drugs (54.8%). However, accessibility to health facility (25.7%) and students-medical staff relationship (22.4%) were not considered factors affecting utilization of university health services.

Discussion

The study revealed that majority of the respondents were in the age bracket of 22 years and above. Male students were significantly higher than female students in the university. This could be as a result of the fact that there were more male hostels than female hostels

The study showed that majority of the respondents indicated that students-medical staff relationship was not a factor affecting the utilization of university health services. This suggests positive attitude of health workers to the students. Other researchers have stated that health workers attitude must be good towards patients.^[7] This is in agreement with our findings and highlights the importance of adoption of proper attitude by the health workers towards their patients. However, this finding is at variance with that of Ye *et al.*,^[8]

who found that good attitude coupled with misconception were constraints to utilization of health services.

The students considered high cost of drugs as a factor affecting the utilization of university health services (72.0%). This finding corroborates Adekunle *et al.*,^[4] who discovered that cost of health services and quality of care were contributory to the non-utilization of health facilities. However, Haddad and Fournier^[9] had stated that introduction of payment schedules based on the selling of essential drugs in many developing countries, particularly in Africa has proven to be partially valid; being inconsistent, there has been cases where the utilization of health services has increased and others where it has decreased. These inconclusive results have fuelled criticism concerning the inequitable nature of this measure. According to Jegede,^[10] the cost of care is another factor that discouraged people from using health care facilities.

This study revealed that time spent in waiting for treatment was a factor in the utilization of university health services (67.2%). This finding is not surprising because it is a common feature in public hospitals in Nigeria to see a large number of patients waiting to be attended to by medical personnel either for consultation, laboratory tests, or administration of drugs and injection. Such delays affected the ability of students to keep to the lecture schedule. Arising from their study, Rotimi *et al.*,^[11] suggested that time spent in waiting room by students will lead to implication for future utilization of health care services such as losing a patient in case of emergency situation. Also in their submission Cole and Mackey^[12] emphasized that experts had noted that, the amount of time a student waits to be seen is one factor that affects utilization of health care services. This situation needs to be given attention because long waiting time could be an impediment to attending lectures. Therefore, the need to provide urgent attention to students is imperative for effective utilization.

The finding that accessibility to health facility that was not considered by the students as a factor affecting the utilization of university health services (74.3%) could be because the students live on campus. Accessibility has been observed to be crucial to effective utilization of health services as well as free service, were contributory encouraging factors.^[13] This position was supported by Katende,^[14] who stated that accessibility to health facilities affected personal illness control by influencing both choice and timing of the use of curative facilities or taking no action at all. It is therefore important that health facilities should be readily accessible to the students. Furthermore, it had been revealed that increased cost of medicines, uncontrolled global market and payment for services hinder accessibility to health services.^[15]

It has been stated elsewhere that, the majority of patients (92%) did not find satisfaction with the health care services.^[16] They further stated that the students who had a regular personal doctor rated health care quality highly during 1 year orientation than at later time points. This is in contrast with the findings of this study where 60.6% expressed satisfaction with the health services received and claimed it did not affect utilization of university health services. This finding runs contrary to that of Shin *et al.*,^[17] who found that about 60% of respondents reported lack of satisfaction with health services provided.

Based on the findings of the study it was concluded that high cost of drugs, non availability of essential drugs, time spent waiting for treatment, inadequate referral services and satisfaction with services were factors affecting utilization of university health services among students of the university in south-west Nigeria. It is therefore, recommended that the university authority and the government should endeavor to make essential drugs available as well as post qualified and adequate staff to the university health services. In addition, the government should make necessary efforts to incorporate tertiary institutions into the National Health Insurance Scheme (NHIS) so that students above the age of 18 years can benefit from free treatment.

References

1. Park K. Parks textbook of preventive and social medicine. 1167, Prem Nagar, Jabalpur, India: M/s Banarsidas Bhanot Publishers, 2002.
2. Oklahoma State University health service. Patient Right and Responsibility, 2006. Available from: <http://www/ostate.edu/USH>. [Last accessed on 2007 Jan 09].
3. Masatu MC, Lugoe WL, Kvale G, Klepp KI. Health services utilization among secondary school students in Arusha region. Tanzania. East Afr Med J 2001;78:300-7.
4. Adekunle AS, Oloyede AO, Okanlawon IO. Factors influencing non-utilization of maternity care services in Sagamu. Trop J Obstet & Gynecol 2006;23:48-53.
5. Alakija W. Some factors affecting utilization of health services provided for students of University of Benin, Nigeria. J Am Coll Health 2000;49:111-7.
6. Hailey BJ, Pargeon K, Crawford V. Can healthcare providers at a university health clinic predict patient satisfaction? JAM Coll Health 1993;42:3-14.
7. Lash AA. A Re-examination of nursing diagnosis. Nurs Forum 1978;4:332-41.
8. Ye Y, Yoshida Y, Harun-Or-Rashid M, Sakamoto J. Factors affecting the utilization of antenatal care services among women in Kham district, Xiangkhouang province, Lao PDR. Nagoya J Med Sci 2010;72:23-33.
9. Haddad S, Fournier P. A service of U.S. National Library of Medicine and National Institutes of Health: Quality, cost and utilization of health services in the government facility. J Am Medical Women Assoc 2008;50:182-6.
10. Jegede AS. African culture and health. Ibadan: Stirling Hordens Publishers (Nig) Ltd.; 1998.
11. Rotimi CN, el Dean S, Freeman RA, Lee AE. Students' attitudes towards University health services: Adolescence 1986;21:421-9.
12. Cole F, Mackey T. Utilization of an academic nursing centre. J Prof Nurs 1996;12:349-53.
13. Saeed AA, Mohamed BA. Patients' perspective on factors affecting utilization of primary health care centers in Riyadh, Saudi Arabia. Saudi Med J 2002;23:1237-42.
14. Ketande C. The effect of accessibility to clinics on infant and child mortality: The case of Liberia and Zimbabwe, commissioned paper for the working group on effect of child survival and general health programs on mortality,

panel on population dynamics of sub-sahara Africa, committee on population, National Research Council, Washington DC, 1992.

15. Henderson SJ, Elon I, Frank E. Self-report of quality of medical students health care. *Med Educ* 200;41:632-7.
16. Saha S, Ravindran TK. Gender gaps in research on health services in India, a critical review of selected studies (1990-2000): *Creating Resources for Empowerment in Action (CREA) 2/14*. New Delhi.
17. Shin H, Kim MT, Juon HS, Kim J, Kim KB. Patterns and factors associated with

health care utilization among Korean American elderly. *Asian Am Pac Isl J Health* 2000;8:116-29.

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