



Perception and Utilization of University Healthcare Services by Undergraduate Students

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Abstract

Healthcare facility on university campuses is not a new concept but there is little evidence surrounding the effectiveness and adaptability of services provided to students by clinics or healthcare facilities located on campus. Also, there is the issue of students not utilizing the services of such facilities. This research was borne out of the latter observation by the researchers. The study specifically investigated utilization of the Niger Delta University Sick Bay by students and the health conditions that make students use the Sick Bay, their satisfaction with services hindered, and their general perception of the Sick Bay. Hundred to four hundred level students of Health Education programme of the 2021/2022 academic session willingly consented to be involved in the study. The sample size was 142 students which comprises all the 100 Level through 400 Level students of Health Education programme. Questionnaire titled: Students' Perception and Utilization of NDU Sick Bay (SPUNSB) with a reliability coefficient of 0.82 using Cronbach's Alpha was used to elicit participants' responses and were analyzed using Statistical Package for Social Science (SPSS) version 22. Data were collected in April 2023. The result showed that greater number of the respondents indicated that, they were not satisfied with the services they got from the Sick Bay, though for various reasons; this response is a cause for concern. The University Sick Bay which should serve as a primary health centre for the University community should be able to provide services that should satisfy the people and make them want to return to it again and again as the need arises; not to leave the people it is supposed to serve with bitter taste in their mouth that will make them seek for alternate services elsewhere. The authors recommended that the Sick Bay should improve on their services to the students by having enough medication and a cordial staff/students' relationship.

Keywords: Perception, Utilization, University Healthcare Services, Undergraduate Students

Introduction

The utilization of health services is an important policy concern in both developed and developing countries. In developed countries like the United States of America, many school districts have opened school-based or linked health centers (SBHC or SLHC) to help meet the health needs of their students. In 1970, only one U.S. school had a SBHC/SLHC (Council on Scientific Affairs, American Medical Association, 1990). By the year 1984, that number had



jumped to 31; by 1989 it had increased to 150 (Lear et al., 1996). Currently, there are more than 2,300 school-based health centers operating nationwide (School-Based Health Alliance, 2016). The majority (94%) of SBHCs are located on school property with small number (3%) providing services through mobile units. Most (51%) of the SBHCs operating today are found in urban areas. Of the SBHCs currently operating, 23% are found in high schools, 9% in middle schools, and 15% in elementary schools. The other 53% are located in alternative, K–8, 6–12, or K–12 schools (School-Based Health Alliance, 2016). It is a similar picture in higher institutions across USA and Europe. It is important for every University to have a ready and accessible healthcare facility to cater for the health needs of its members (staffs and students). However, beyond availability and utilization of the services as a major determinant of a University's health status; it has been observed that despite the existence of University health services in or around many university campuses, some staff and students still prefer to utilize other health services (Lux et al., 2010). Ibor and Atomode (2014) defined health service utilization simply as the willingness of the would-be or potential patients to make the most of the services offered at a medical establishment. Utilization of health services at a university health center has implications for both the healthcare provider and the staff and students of the university.

Nigeria National Health Promotion Policy (NHPP) was formulated in 1988 and revised in 2019 to bring about a comprehensive health care system based on primary health care that is protective, restorative and rehabilitative to every citizen of the country within the available resources so that individuals and communities are assured of physical, mental and social well-being to enjoy life (NHPP, 2019). The Niger Delta University Sick Bay is a typology of primary health centre which renders emergency health services to the University community. Most university health services have extensive health infrastructures, for the provision of effective and efficient health services to the students, health services in higher institutions are aimed at providing treatment, information and education about health (Lee et al., 2016). Unfortunately, services available are not being utilized appropriately (Graf, 2015). Assessment of utilization is a main approach to understand the functioning of the health services. A typical example is The American College Health Association (ACHA) which was founded in 1920 to connect healthcare professionals from across the American States with a mission of advancing the health of college students and campus communities through advocacy, research and education. ACHA represents over 700 institutions of higher education and the collective health and wellness needs of 20 million students, ACHA serves over 8,500 individual college health and wellness professional and leaders of all disciplines united together to advance the health and wellness of American college students (ACHA, 2022).

Many university students lead busy lives involving a multitude of academic, social, and extracurricular activities. Despite various efforts and provisions available to students on campuses, research shows that students are not likely to seek out preventative care (e.g. vaccinations) due to the misconception that students are immune or unlikely to acquire certain illnesses (Sunil et al., 2006). Other factors also influence the response of students towards seeking out healthcare resources on campus includes, benefits, knowledge, as well as perceived level of public health thrust (Hamilton-Ekeke et al., 2019). Frequently sought-after healthcare resources on university campuses include sexual health resources (i.e. condoms, oral contraceptive medications, pregnancy testing or care) and sexually transmitted infection testing. However, many students are concerned about violations of privacy relating to peers, healthcare workers, and the university (Hamilton-Ekeke et al., 2018).

Health-care utilization is determined by the need for care, whether people know that they need care, whether they want to obtain care, and whether care can be accessed. Quality is separate from access and is related to the achievement of favorable outcomes associated with utilization, not to whether health-care utilization occurs at all or to difficulties in obtaining



care. In theory, health-care utilization should correlate highly with the need, however defined, for services. But, some services are needed and not obtained, and others are utilized but not clearly indicated, or are indicated only after other protocols are followed (Kale et al., 2013; Kressin & Groeneveld, 2015; Lyu et al., 2017).

Theoretical Perspective/Framework of the Study

The theoretical perspective/framework of the study is based on Andersen model of healthcare utilization. Andersen (1968) developed a model of health care utilization which looks at three categories of determinants: (1) predisposing characteristics: this category represents the proclivity to utilize health care services. According to Andersen, an individual is more or less likely to use health services based on demographics, position within the social structure, and beliefs of health services benefits; (2) enabling characteristics: this category includes resources found within the family and the community. Family resources comprise economic status and the location of residence. Community resources incorporate access to health care facilities and the availability of persons for assistance; and (3) need based characteristics: the third category includes the perception of need for health services, whether individual, social, or clinically evaluated perceptions of need.

In the 1970's Andersen's model was later expanded and refined to include the healthcare system. The healthcare system includes health policy, resources, and organization, as well as the changes in these over time. Resources comprise the volume and distribution of both labour and capital, including education of healthcare personnel and available equipment. Organization refers to how a healthcare system manages its resources, which ultimately influences access to and structure of health services. According to this level of the revised model, how an organization distributes its resources and whether or not the organization has adequate labour volumes will determine if an individual uses health services. In addition, the updated model includes recognition that consumer satisfaction reflects healthcare use. The use of the model as frame of analysis is premised on its flexibility and that it provides a robust analytical framework for discussion. More so, it examines psychological and psychosocial factors as they describe attitudes toward healthcare utilization as well as beliefs about the healthcare system, all of which are central to the objective of this study which is to investigate students' perception of the sick bay and their utilization of its services in the promotion of their health. This study is significant as it will be bridging the gap between healthcare provision and utilization. Also the study will bring to fore the lacks and needs of the sick bay to the University community and Management for adequate funding and policy direction towards the sick bay.

Objectives and Research Questions

The specific objectives of the study include: to find the health conditions that make students utilize the University Sick Bay, their perception about the Sick Bay, and their utilization of the service provided by the University Sick-Bay.

Three research questions were posed in order to achieve the objectives of the study. These are:

1. What are the health conditions that make students utilize the University Sick Bay services?
2. What are the students' perceptions of the use of the Sick Bay?
3. What is the level of satisfaction with services in the Sick Bay?

Methods

A cross-sectional design was adopted in this study. The Sick Bay of the Niger Delta University Wilberforce Island, Bayelsa State is situated at the main campus of the University. Despite its proximity to students; records at the facility shows that students seem not to be



visiting and using the facility. This makes one to wonder why it is so hence the crux of this research is to find out students' perception and utilization of the University Sick Bay. The population consisted of 100level through 400level students of Health Education Programme of the Department of Science Education, Niger Delta University, Bayelsa State. The total population was one hundred and forty two (142) students. All the students (n=142) indicated willingness to participate in the study and due to the small and manageable population size; all the 142 students were involved in the study (population size equaling sample size). The sample size of 142 students of 2021/2022 academic session (100L - 40, 200L - 35, 300L - 32 and 400L - 35) were used to assess the percentage of university students who utilize healthcare services of the University Sick Bay.

The instrument for data collection was a Questionnaire titled 'Students' Perception and Utilization of NDU Sick Bay' (SPUNSB). This instrument face and content validity was validated by two experts in educational evaluation and one expert in health education. Whilst its reliability was ascertained by administering the instrument to twenty students not involved in the main study. The scores obtain from the administration of the questionnaire was used to establish the internal consistency of the instrument using Cronbach's Alpha. A reliability coefficient value of 0.81 was realized which is within the acceptable benchmark of reliable coefficients.

The questionnaire has three sections: Section A collected socio-demographic data such as gender, and level of academic studies. Section B was on utilization of the sick bay services: this section assessed retrospectively student's last visit to the sick bay within the last six months and the reason for their visit. Section C was on satisfaction and perceived barriers to utilization of the sick bay. The participants in this study were met over a course of four days (Monday to Thursday) after a lecture in health education module. 100level students were for Monday, 200level students were for Tuesday, 300level students were for Wednesday, and 400level students were for Thursday. The questionnaire was given to the participants to fill which lasted between 10 and 15 minutes and after that the questionnaire were retrieved for analysis (making a hundred percent retrieval). The raw data were then coded into SPSS version 22 and then analyzed using frequency and percentages.

Results

The data were collated and analyzed using Statistical Package for Social Science (SPSS) version 22 and result presented in Tables 1-3 below:

Table 1 **Demographic Data of Respondents**

		<u>Gender</u>	
No of Male	%	No of Female	%
41	28.9	101	71.1

<u>2021/2022 Academic Session</u>		
Year of Study/Level	No of Students	%
100L	40	28.3
200L	35	24.6
300L	32	22.5
400L	35	24.6

Source: Fieldwork April 2023



Table 1 above shows the social demographic data of the respondents which comprises 41(28.9%) males and 101(71.1%) females of the one hundred and forty two Health Education students; spanning through 100 level through 400 level who willingly consented to be involved in the study. Also, the Table shows the distributions of the respondents according to their level (Year) of study.

Table 2: Visit / Utilization of the Sick Bay and Health Conditions Presented at the Sick Bay within the Past Six Months

Visit / Utilization of the Sick Bay Services		
Responses	No of Respondents	%
Yes	31	21.8
No	111	78.2

Health Conditions Presented at the Sick Bay within the Past Six Months

Health Conditions	No of Respondents	%
Malaria	15	48.4
Headache	8	25.8
Abdominal pain	3	9.7
Cough	2	6.4
Eye pain	2	6.4
Burns	1	3.3

Source: Fieldwork April 2023

Table 2 shows the number of visit/utilization of the Sick Bay by respondents in the past six months as well as the reason(s) for the visit. About 31(21.8%) of the students had used the University Sick Bay services at least once in the past 6 months and about 111(78.2%) had not used the health Centre services. Among the students who utilized the Sick Bay services in the past 6 months, the most frequent health conditions for utilization were malaria fever 15 (48.4%); headache 8 (25.8%) and abdominal pain 3 (9.7%), while the less frequent health conditions for use were eye problems 2 (6.4%), cough (6.4%) and burn 1 (3.3%).

Table 3: Students' Perception of Barriers Affecting their Utilization of the Sick Bay

Satisfaction with the Services of the Sick Bay		
Responses	No of Respondents	%
Yes	31	21.8
No	101	71.2

Perceived Barriers Affecting Level of Satisfaction

Barriers	No of Respondents	%
Availability of medications	57	40.1
Staff / students relationship	42	29.6
Experience of medical staff	21	14.8
Adequate referral services	16	11.2
Long waiting time for treatment	6	4.2

Source: Fieldwork April 2023



From Table 3 above, greater number of the respondents (101, 71.2%) indicated that, they were not satisfied with the services they got from the Sick Bay; this response should be a cause for concern. The University Sick Bay which should serve as a primary health centre for the University community should be able to provide services that should satisfy the people and make them want to return to it again and again as the need arises; not to leave the people it is suppose to serve with bitter taste in their mouth that will make them seek for alternate services elsewhere. The highest number of respondents (57, 40.1%) identified 'availability of medication' as the reason for their dissatisfaction of the services of the Sick Bay while 'long waiting time for treatment' had the least responses. This is a little bit ironical as the reverse should have being most likely. Healthcare facilities should have adequate supply of medications if not what is the point of going there. The point of utilizing a healthcare facility is for one to be treated of the ailment.

Discussion

The discussion of the findings of this study is done according to the research questions posed in the study. The first research question was on the utilization of the sick bay and the health condition(s) that are frequently presented at the sick bay. The results of the study showed that the rate of utilization of the Niger Delta University (NDU) Sick Bay by students in the past six months was 21.1% which implies a very low per cent of the students utilize the sick bay. NDU sick bay is supposed to be the primary health care centre for the University community. This finding collaborated with Abiodun et al. (2019) findings where only less than 50% of the respondents utilize the university health centre. The percentage found in this study also collaborated with the percentages reported in Rotimi et al. (2015) as well as Usman et al. (2015). The dissatisfaction with the sick bay revealed in this study collaborated with Rezaian and Selamat (2015) findings on patient satisfaction in a University Health Center in Malaysia. Also the health conditions presented in the few visit of this study was consistent with the findings in Ogundele et al. (2014) who also found malaria, burns, and eye pain as the common health conditions warranting the utilization of the University Sick Bay. This finding also shows that University students' health concerns are universal regardless of geographical location. The current study indicated that most of the respondents were not satisfied with the university health centre services. This finding was in agreement with tertiary institution in South-West Nigeria by Obiechina and Ekenedo (2013). However, in a study carried out by Afolabi et al. (2013) only the overall level of satisfaction of services in the health facility was measured which is also similar to the methodology of the current research. Pliannuom et al. (2021) findings of common diseases presented by university students in Thailand differ from the findings of this study.

The second research question was on students' perception of the services received at the sick bay. The participants perceived some barriers to the services provided at the sick bay to include the unavailability of medications. This was indicated by most students when they used the University Sick Bay which then impacted on their future utilization. The implication of this finding is that most students would not want to utilize the sick bay after first attempt as they will still go out to the chemist to purchase their medications. This finding collaborated with Orok et al. (2024), Ogundele et al. (2014), and Afolabi et al. (2013) findings. Such barrier may limit utilization of health centers by students and cause them to resort to self-medication (Chipwaza et al., 2014). Staff-student relationship was also perceived as barrier that students encounter when they utilized the University health Centre services. However, this result contrast with the findings of Obiechina and Ekenedo (2013) who found out a cordial relationship between the staff of the University health centers that they investigated with the students that visit the health center. A hostile and unfriendly attitude towards users



of a healthcare facility can discourage health care seeking behaviour, whereas caring attitudes of medical staff and their communication skills can help to create lasting impressions that will encourage further visit to the facility if need be. This is similar to an assertion made by World Health Organization (WHO, 2004) in a regional consultation report in Indonesia; where they encouraged adolescent friendly health services. Health care personnel can receive proper communication skills classes, which may help them develop an empathetic attitude and emotional intelligence.

The third research question posed for this study was on the students' satisfaction of the services they received from the sick bay. The finding of dissatisfaction collaborated with Kukoyi et al. (2022) but contrasted with Nwokoro et al. (2022). Experience of medical staff was another barrier identified by university students that can affect their satisfaction of the services rendered in the Sick Bay. This finding collaborated with Afolabi et al. (2013) as a possible barrier affecting students' utilization of University health Centre. The current study also found inadequate referral services as another barrier perceived by students which may influence their utilization of the health Centre. A previous studies (Bal et al., 2007; Ayers & Kronenfeld, 2012) classified inadequate referral services as the most perceived barrier in seeking conventional medical care. WHO (2013) emphasized that developing the quality health services needs an efficient referral system; insisting that such a system may help to make the utilization of primary health services and hospitals more cost effective.

The last barrier identified by the respondents of this research was: waiting time for treatment. Waiting time for treatment was the least perceived barrier students encountered when they utilized the University health center services. This finding also collaborated with Afolabi and Erhun (2003) findings. Afolabi and Erhun study revealed that long waiting time is a main cause of patient dissatisfaction, and it may have an effect on health care services utilization which may it encourages patients to use complementary and alternative medicine (Ayers & Kronenfeld, 2012).

Conclusion

The perception of students towards the use of the University Sick-Bay among students of Niger Delta University Wilberforce Island Bayelsa State holds the potentials to increase students' health and wellbeing when adequately utilized. In conclusion, students perceived the healthcare facility as not adequately meeting their health needs hence it is not well utilized by them. There seem to be a-detach from the Sick Bay; students need to own it and use it when required. The Sick Bay lack of medication is a major setback in its utilization and need to be looked into. It is necessary that universities across the nation establish a holistic survey to measure satisfaction among college students as it pertains to determining perceptions of university students toward healthcare provisions provided on campus. Health-care utilization is determined by the need for care, whether people know that they need care, or they want to obtain care, and whether care can be accessed. Quality is separate from access and is related to the achievement of favorable outcomes associated with utilization, not to whether health-care utilization occurs at all or to difficulties in obtaining care. In theory, health-care utilization should correlate highly with need.

Recommendations

Based on the findings of this study, the followings are therefore recommended:

1. Students should be encouraged to use the sick bay by ensuring malaria medications especially are available all the time as that is the most common ailment presented by students.



2. University administration should devote more of the university budget towards health care to make better coverage of various ailments.
3. Healthcare personnel should receive proper communication skills classes, which may help in showing an empathetic attitude.
4. Adequate planning and allocation of resources to the University Sick Bay is recommended to ensure there is sufficient supply of medicines.

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