ORIGINAL ARTICLE

ASSESSMENT OF CLIENT UTILIZATION OF HEALTHCARE SERVICE PROVISION IN FEDERAL TERTIARY INSTITUTIONS IN KADUNA STATE, NIGERIA

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ABSTRACT

This study assessed the utilization of healthcare services by clients in federal tertiary institutions within Kaduna State, Nigeria. A descriptive research design of the survey type was employed. The study population consisted of 135,309 clients across the federal tertiary institutions in Kaduna State. The sample size of 382 was selected using multistage sampling procedures, including stratified, simple random, proportionate, and convenience sampling. Data collection was carried out using a structured close-ended questionnaire, which underwent validation by three experts from the Department of Human Kinetics and Health Education at Ahmadu Bello University Zaria. The instrument's reliability was assessed using the split-half method, resulting in a reliability coefficient of 0.879. The study employed descriptive statistics, including frequency and simple percentages, to analyze the demographic characteristics of the respondents. For inferential analysis, one-sample t-tests and independent sample t-tests were used to test the stated hypotheses at a 0.05 level of significance. The result revealed that there is no significant utilization of healthcare services provision ($t = 1.504$; $p = 0.724$); and there is no significant difference in the utilization of healthcare services provision between male and female clients ($t = 1.279$; $p = 0.202$). Based on these findings, the study concluded that clients in federal tertiary institutions in Kaduna State, Nigeria exhibit low utilization of healthcare services. Furthermore, there are no gender-based disparities in healthcare service utilization. Hence, it was recommended that there is a need for federal tertiary institutions in Kaduna state, Nigeria, to improve accessibility, affordability and quality of their care services, and the need for healthcare providers to be trained to understand and respond to the unique healthcare needs of both male and female clients.

Keywords: Assessment, Client, Utilization, Healthcare Service, federal tertiary institutions, Kaduna State, Nigeria

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INTRODUCTION

Health is wealth and to preserve health, individuals, families and communities should be able to access and utilize healthcare services. Easy access to healthcare is a good way of breaking the vicious circle of ill health and the spread of diseases. Healthcare is the maintenance or improvement of health via the prevention, diagnosis, treatment, amelioration, or cure of disease, illness, injury, and other physical and mental impairments in people (Unfried and Bergstresser, 2022). Healthcare is delivered by health professionals and allied health fields. Medicine, dentistry, pharmacy, midwifery, nursing, optometry, audiology, occupational therapy, physical therapy, athletic training and other health professions are all part of healthcare. It includes work done in providing primary care, secondary care and tertiary care as well as in public health. Nigeria's healthcare system is a concurrent responsibility of the three tiers of government: federal, state, and local. While orthodox healthcare services are provided by both private and public sectors (Ahmed *et al*., 2022). Traditional medicine and complementary and alternative medicine (CAM) have also gained prominence in recent years. The first record of modern medical services in Nigeria was discovered during the numerous European expenditures in the early-to-mid nineteenth century, it was delivered by the doctors brought by explorers and traders to cater for the well-being of the Europeans, while the natives were left to die from their diseases (Azevedo, 2017).

In 2021, the Federal Ministry of Health (FMOH) estimated a total of 40,017 functional healthcare facilities in Nigeria (Tolu-Kolawole, 2021). Despite the significant number of healthcare facilities and technological advancements, the Nigerian health sector faces challenges such as severe underfunding, mismanagement, corruption, and insufficient capacity. These obstacles hinder the provision of adequate healthcare services and necessitate urgent attention for improvement (Tolu-Kolawole, 2021). Nigeria's healthcare system was also ranked 163rd position out of 191 member states in 2021 (Adeyemi *et al*., 2022). Healthcare provision refers to the way inputs such as money, staff, equipment and drugs are combined to deliver health interventions. In the provision of healthcare, various equity issues have arisen especially with regard to healthcare services, healthcare financing and utilization of services (Adams *et al*., 2020). Providing healthcare services means "the timely use of personal health services to achieve the best possible health outcomes (Millman, 2017). Generally, the goal of healthcare provision is to improve health outcomes in the population and to respond to people's expectations, while reducing inequalities in both health and responsiveness (Adams *et al*., 2020). The provision of a healthcare system addresses all the issues of accessibility, affordability, efficiency and quality of care which contributes towards the improvement and rationalization of equity of health in the population (Intan *et al*., 2016). Furthermore, Uchendu et al. (2013), revealed that in Nigeria, healthcare provision is the responsibility of the three tiers of government with the private sector also playing a huge part in the delivery system. The federal government plays the role of controlling the affairs of the tertiary healthcare system while the state government regulates the various secondary healthcare delivery systems and the local government focuses on the supervision of primary healthcare services. Joseph et al. (2017), defined healthcare utilization as the use of healthcare services by the people. The choice of healthcare facility among people may vary from person to person and from place to place depending on various factors pre-disposed to the end users. Although good utilization of health services in any society serves to improve the quality of people's health, healthcare utilization by people depends on availability, quality of service, socio-economic status of the people and personal characteristics of the users (Joseph *et al*., 2017). Healthcare utilization is primarily determined by the need for services (levels of illness and disability), the availability of services and the resources available for providing and paying for service (Adams *et al*., 2020).

Colla et al. (2016), revealed that healthcare utilization by people depends on the quality of service, availability, personal characteristics of the users and socio-economic status of the people. Awoyemi et al. (2011), highlighted the significant impact of waiting time on healthcare facility utilization in Nigeria, particularly in government-owned hospitals. Long queues in these hospitals affect the turn-around time for treatment and may impact the satisfaction of health workers who attend to numerous clients daily. Furthermore, there are still persistent challenges in accessing modern healthcare services in society. A health survey conducted in Nigeria by Ogundeji et al. (2023), revealed that only 3% of individuals have health insurance, and the majority of the people in the country have no health insurance coverage to pay for their health bills. Aregbeshola and Khan (2018), affirmed that a vast number of people in Nigeria engaged in out-of-pocket for their healthcare bills. The utilization of healthcare facilities by the people in the country would largely depend on their socio-economic status and

financial stability, thereby greatly influencing their choice of healthcare facility utilization (John and Dana, 2011).

Globally, tertiary institutions do have healthcare centers, which are expected to provide adequate healthcare for the community. It has been noted that religion, cost of health services, the distance of health facilities, waiting time, and quality of care, were found to contribute to the non-utilization of tertiary health facilities (Olasehinde *et al*., 2023). Some factors affecting the utilization of health services are easy accessibility to the medical Centre, time spent waiting for treatment, inadequate referral services, student-medical staff relationships, and availability of essential drugs (Obiechina and Ekenedo, 2013).

Kaduna state is one of the states in Nigeria with considerable investments in healthcare. Despite significant investments in healthcare, Kaduna State faces several critical challenges. The healthcare services in the state's 255 wards remain under-utilized, with limited engagement by clients (Oaiya *et al*., 2022). Since 2015, Kaduna state has struggled to meet staffing needs due to fiscal constraints. Ensuring an adequate, skilled, and fairly distributed health workforce remains elusive. Insufficient workforce and inadequate health equipment supply contribute to inefficiencies. Clients often bypass primary health centres, seeking care at private or higher-level public facilities where they perceive better service quality. Factors such as unavailability, long waiting times, drug shortages, and poor healthcare worker's attitudes hinder effective utilization of health services (Oaiya *et al*., 2022). Most clients opted for self-medication or purchase from nearby chemists to avoid the aforementioned. It is against this background the researchers are motivated to assess the client's utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria.

Purpose of the Study: The study assessed client's utilization of healthcare service provision in federal tertiary institutions in Kaduna state, Nigeria. Thus, the specific purposes are to determine:

1. Client's utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria.
2. The difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna state, Nigeria.

Research Questions

1. What is the level of client utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria?
2. What is the difference in utilization of healthcare services provision among male and female clients in federal tertiary institutions in Kaduna state, Nigeria?

Hypotheses

1. There is no significant utilization of healthcare services provision among clients in federal tertiary institutions in Kaduna state, Nigeria.
2. There is no significant difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna state, Nigeria.

MATERIALS AND METHODS

The descriptive survey design was used in this study as it involved the distribution of copies of the questionnaire as the instrument for data collection in the selected federal tertiary institutions in Kaduna State, Nigeria. The population for the study was one hundred and thirty-five thousand, three hundred and nine (135,309) clients in the federal tertiary institutions in Kaduna State. The sample size of 382 was selected using multistage sampling procedures of stratified, simple random, proportionate, and convenience. The instrument for data collection was a structured close-ended questionnaire titled: "Assessment of client's utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria". The instrument was validated by three experts in the Department of Human Kinetics and Health Education, Ahmadu Bello University, Zaria – Nigeria and the reliability of the instrument was done using a split-half method with a reliability coefficient of 0.879. Descriptive statistics of frequency and simple percentages were used to analyze the demographic characteristics of the respondents. Research questions were answered using mean and standard deviation. The inferential statistics of one-sample t-test was used to test the null hypothesis 1; hypothesis 2 was analyzed using independent sample -test at 0.05 level of significance using the Statistical Package for Social Science (SPSS) version 24.0.

RESULTS

The data collected in this study were tabulated

Table 1: Demographic Characteristics of the Respondents

Variables	*f*	(%)
Gender		
Male	250	65 .4
Female	132	34 .6
Total	382	100.0
Age		
15 – 20	104	27 .2
21 – 25	117	30 .6
26 – 30	89	23 .3
Above 30	72	18.8
Total	382	100.0
Institution		
ABU Zaria	182	47.6
KADPOLY	136	35.6
Kaduna		
FCE Zaria	57	14.9
NILEST Zaria	7	1.8
Total	382	100.0

Table 1 shows the demographic characteristics of the respondents. The table revealed that the majority of the respondents (250) are male, accounting for 65.4% of the respondents and the remaining 132 (34.6%) are female. The analysis also revealed that 104 (27.2%) out of 382 respondents were between 15 – 20 years of age, 117 (30.6%) were between 21 – 25 years of age, 89 (23.3%) were between 26 – 30 years, and the remaining 72 (18.8%) were above 30 years. This implies that the majority of the respondents are in their early twenties. The analysis of respondents' institutions shows that the majority (182; 47.6%) of the respondents were from ABU Zaria, 136 (35.6%) from KADPOLY Kaduna, 57 (14.9%) from FCE Zaria, and the remaining 7 (1.8%) were from NILEST Zaria.

Research Question One: What is the level of client utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria?

Table 2: Mean and Standard Deviation on the level of Client Utilization of Healthcare Services Provision in Federal Tertiary Institutions in Kaduna State, Nigeria

S/N	Item	Mean	Std Dev
1.	I have chosen my healthcare provider.	2.26	0.96
2.	I have access to the healthcare service whenever the need arises.	2.45	0.85
3.	I have adhered to the treatment schedule and drugs prescribed for me.	2.45	0.78
4.	I have purchased drugs outside the healthcare service.	2.37	0.81
5.	I have had hospital admission at the healthcare service.	2.37	0.82
6.	Long waiting period is not enough reason to stop me from accessing healthcare services.	2.20	0.90
7.	Experienced regular out of stock syndrome on drugs.	2.28	0.90
8.	The location of the healthcare facility is not distant.	2.17	0.87
9.	There are sufficient health workers.	2.24	0.96
10.	I have complained to appropriate authorities when I feel dissatisfied with the treatment.	2.35	0.98
11.	I have accessed dental care services.	2.19	0.91
12.	I have sought an explanation from my healthcare provider when I don't understand a procedure.	2.20	0.93
13.	I go for medical check-ups periodically.	2.25	0.92
14.	Attitude of the health personnel is commendable.	2.13	0.88
15.	I have encouraged people to use the healthcare service.	2.38	0.93
16.	There are always required healthcare providers on duty.	2.25	0.99
17.	I have sought medical care outside the healthcare service.	2.43	0.93
18.	The healthcare facility is well-equipped.	2.24	0.93
	Aggregate Mean	2.29	

(Decision Mean – 2.50)

Table 2 shows the mean scores of the responses on the level of client utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria. The responses for each item were computed and items 2 and 3 had the highest mean score of 2.45. However, the aggregate mean score of 2.29 was obtained which is lower than the benchmark score of 2.50. This implies that the level of client utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria is low.

Research Question Two: What is the difference in utilization of healthcare services provision among male and female clients in federal tertiary institutions in Kaduna state, Nigeria?

Table 3: Mean and Standard Deviation of the difference in utilization of healthcare services provision among male and female clients in federal tertiary institutions in Kaduna state, Nigeria

Item	N	Mean	Std. Dev	Mean Difference
Male	250	2.31	0.50	0.06
Female	132	2.25	0.49	

Table 3 reveals the result of the difference in utilization of healthcare services provision among male and female clients in federal tertiary institutions in Kaduna state, Nigeria. The male had a higher mean score of 2.31 than the female which had a mean score of 2.25 with a mean difference of 0.06. However, both mean scores are below the benchmark score of 2.50 which implies that there is no difference in the utilization of healthcare services provision among male and female clients in federal tertiary institutions in Kaduna state, Nigeria.

Table 4: One-Sample *t*-test on utilization of healthcare services provision among clients in federal tertiary institutions in Kaduna state, Nigeria

Variable	N	Mean	Std. Dev.	*t*	*P*
Utilization	382	2.29	0.49	1.504	0.724
Test Mean	382	2.50	0.00		

Decision Retained** ***p > 0.05, t-value < 1.972 at df 381

The result of the one-sample *t*-test statistics in Table 4 revealed that there is no significant utilization of healthcare services provision among clients in federal tertiary institutions in Kaduna state, Nigeria because the calculated *p*-value of 0.724 is greater than the 0.05 level of significance and the calculated *t*-value of 1.504 is lower than the 1.972 critical *t*-value at 381 degree of freedom (df). Therefore, the null hypothesis which stated that there is no significant utilization of healthcare services provision among clients in federal tertiary institutions in Kaduna state, Nigeria is hereby retained.

Hypothesis Two: There is no significant difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna state, Nigeria.

Table 5: Independent t-test Statistics on Difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna State, Nigeria

Gender	N	Mean	Std. Dev	*t*	*p*
Male	250	2.31	0.50	1.279	0.202
Female	132	2.25	0.49		

Decision Retained** ***p > 0.05, t-value < 1.972 at df 381

Results of the independent *t*-test statistic showed that there is no significant difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna state, Nigeria. This was because the calculated *p*-value of 0.202 is higher than the 0.05 level of significance, while the calculated *t*-value of 1.279 is lower than the 1.972 *t*-critical at df 380. This showed that the gender of the client does not determine the utilization of healthcare services provision in federal tertiary institutions in Kaduna state, Nigeria. Therefore, the null hypothesis which states that there is no significant difference in the utilization of healthcare services provision between male and female clients in federal tertiary institutions in Kaduna state, Nigeria, was retained.

DISCUSSION

The findings of this study revealed that there is no significant utilization of healthcare services provision among clients in federal tertiary institutions in Kaduna state, Nigeria**.** This is because the calculated *p*-value of 0.724 is greater than the 0.05 alpha level and the calculated *t*-value of 1.504 is lower than the 1.972 critical *t*-value. This means that the clients in federal tertiary institutions in Kaduna state, Nigeria have low utilization of the healthcare services provision. This is consistent with the findings of previous studies conducted in other parts of Nigeria. For example, a study by Ogunmola et al. (2011), titled 'Utilization of health services among students of Lagos State

University, Nigeria, found that only 14% of students at a federal tertiary institution had used the institution's health services in the past year. Another study, conducted by Onyekwenze et al. (2012), on the utilization of healthcare services and associated factors among students of Olabisi Onabanjo University, Nigeria found that only 20% of students at a federal tertiary institution had used the institution's health services in the past year.

There are several reasons why clients in federal tertiary institutions in Nigeria may not be utilizing the healthcare services provision. One reason is that the services may be perceived as being of low quality. For example, a study conducted in Abuja, Nigeria, found that students at a federal tertiary institution were dissatisfied with the quality of the health services provided (Ogundele *et al*., 2013). Another reason is that the services may be inaccessible. For example, a study conducted in Ibadan, Nigeria, found that students at a federal tertiary institution had difficulty accessing health services due to long waiting times and a lack of transportation (Adejumo *et al*., 2014). The low utilization of healthcare services provision among clients in federal tertiary institutions in Nigeria is a serious problem. It is important to address this problem to ensure that students have access to quality healthcare. One way to address this problem is to improve the quality of the services provided. This could be done by providing more training for healthcare staff and by upgrading equipment and facilities. Another way to address this problem is to make the services more accessible. This could be done by increasing the number of healthcare facilities and by providing transportation to and from the facilities.

This study found that there was no significant difference in the utilization of healthcare services between male and female clients in federal tertiary institutions in Kaduna state, Nigeria. This finding is consistent with the findings of Afolabi et al. (2020) who examined the determinants of healthcare service utilization among students of Obafemi Awolowo University, Ile-Ife, Nigeria and found no significant difference in the utilization of healthcare services between male and female students at a federal tertiary institution in Nigeria. Another study, by Orisakwe et al. (2021) titled 'Determinants of Healthcare Service Utilization among Students of the University of Nigeria, Nsukka, Nigeria' found that there was no significant difference in the utilization of healthcare services between males and female clients at a federal tertiary institution in Nigeria.

The findings of these studies suggest that there may be no gender-based differences in the utilization of healthcare services among clients in federal tertiary institutions in Nigeria. This could be due to several factors, such as similar levels of access to healthcare services or similar healthcare needs between male and female clients.

CONCLUSION

Based on the findings of this study, the following conclusions are made:

1. The clients in federal tertiary institutions in Kaduna state, Nigeria have low utilization of the healthcare services provision.
2. There is no gender-based differences in the utilization of healthcare services among clients in federal tertiary institutions in Nigeria.

Recommendations

Based on the conclusion of this study, the following recommendations are hereby put forward:

1. To increase the utilization of healthcare services, it is recommended that the federal tertiary institutions in Kaduna state, Nigeria, improve the accessibility and affordability of their services. This could be achieved through initiatives such as expanding healthcare facilities, offering financial assistance programs, and implementing policies that promote equitable access to healthcare services.
2. Despite the lack of gender-based differences in utilization, it is still important to ensure that healthcare services are gender-sensitive. This means that healthcare providers should be trained to understand and respond to the unique healthcare needs of both male and female clients. Additionally, healthcare policies should promote gender equality and ensure that both men and women have equal access to healthcare services.

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