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Undergraduate students' level of awareness, perceptions and level of utilization of healthcare services at the medical centre, University of Calabar, Calabar, Nigeria

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ABSTRACT

Healthcare services covers wide range of services as well as the management of health problems within a community. Healthcare services are designed to meet the needs of communities through the use of available health facilities with health manpower carrying out their professional duties. The study determined the undergraduate students' level of awareness of availability of healthcare services; perceptions of undergraduate students on healthcare services in the university's medical centre. The study also ascertained undergraduate students' level of utilization as well as the factors influencing utilization of healthcare services by undergraduate students in the university medical Centre. Cross sectional descriptive study designs using multi-stage sampling technique were used to select 7 faculties that were used for the study. A 30- item structured questionnaire was used to generate data from 420 randomly selected students in university of Calabar and there was response rate of 97.9% (411 respondents). The Statistical Package for Social Sciences (SPSS) version 20 was used for the analysis and results were presented in tables and charts. The majority of respondents 55.7% were between aged 18-22 years, with most 53.5% being females. Most of the respondents 96.1% were aware about the medical centre with 60.6% who heard about the medical centre through orientation. A greater proportion of the respondents 61.3% were not aware of the Tertiary Institutions Social Health Insurance Scheme (TISHIP) where the healthcare of students is paid from funds pooled through the contributions of both

students and government. In addition, 56.2% agreed that the time spent in waiting for treatment is too long and 33.4% agreed that essential drugs were not always available at the Medical centre. Most of the respondents 64.2% knew that they were eligible to access healthcare services at the medical centre while 35.8% did not know. 17.5% indicated that they have visited the medical centre once in 2019/2020 & 2020/2021 sessions. The most common type of illness that made students utilized healthcare services was malaria and typhoid (46.5%). Furthermore, the factors that influenced the utilization of healthcare services were lack of drugs & other consumables (69.6%), distance of the health centre (51.3%) and long waiting time (45.5%). The study indicated that there is need to strengthen enlightenment program to undergraduate students about Tertiary Institutions School Health Insurance Programme (TISHIP) and there is need to also develop a customer/ patient feedback mechanism at the medical centre to access client satisfaction and improve the delivery of services.

Keywords: Awareness, Perceptions, Utilization, Healthcare services, TISHIP

1. INTRODUCTION

Health status of any group of people has come to be seen as crucial not only to their well-being but also represents a strong influence on the productivity capacity of the people (Shagaya, 2015). The term healthcare service covers wide range of services in health promotion, illness prevention, early prevention, early detection of diseases and management of health problems within a community (Mosadeghrad, 2013). A university is a place where students receive their education, training, develop life skills and learn how to become independent. In order to ensure the great advantage of university, students should have healthy minds and healthy bodies. The university administrators developed healthcare services to meet students' physical, mental and social health needs (Graf, 2015). Awareness of available healthcare services and programs in University greatly influences students' uptake and utilization of those services.

The awareness and proper utilization of the healthcare services help to control and prevent the spread of communicable disease within the tertiary institution. Utilization of health care services for the most vulnerable and underprivileged populations has been recommended by the World Health Organization that healthcare services should be universally accessible, without barriers based on affordability, physical accessibility, or acceptability of services (WHO, 2016). Access to and utilization of health services are key to improvement of health outcomes in low- and middle-income countries (LMICs). In these countries, knowledge of access to and utilization of health services is important in planning for health resource allocation to different levels of the health system and monitoring the achievement of universal health coverage (UHC), which the World Health Organization advocates as a means to ensuring equity in the use of health services (WHO, 2023).

The general objective of this study was to determine Undergraduate students' awareness, perceptions and utilization of health care services at the Medical Centre, University of Calabar, Nigeria.

Specific objectives

The specific objectives of this study were to:

- 1) determine undergraduate students' level of awareness of availability of healthcare services in Unical Medical Center;

- 2) determine undergraduate student's perceptions on healthcare services in Unical Medical Center;
- 3) determine undergraduate students' level of utilization of healthcare services in Unical Medical Center;
- 4) identify factors influencing utilization of health care services in Unical Medical Center among undergraduate students in University of Calabar.

Research questions

- 1) What is the level of awareness of undergraduate students on healthcare services in Unical Medical Center?
- 2) What are the perceptions of undergraduate students on healthcare services in Unical Medical Center?
- 3) What is the level of utilization of healthcare services in Unical Medical Center among undergraduate students?
- 4) What are the factors influencing utilization of healthcare services in Unical Medical Center among undergraduate students of the University of Calabar?

Health care delivery services in Nigeria are bedeviled with the problems of the quality of care and accessibility to care (Shagaya, 2015). Universal health coverage is a form of insurance that is provided to citizens of a country at no charge. People participating in universal health coverage do not have to pay any of their medical costs including fees for prescriptions. Universal health coverage (UHC) means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need at sufficient quality and to be effective, while also ensuring that the use of these services does not expose the users to financial hardship.

This definition of UHC embodies three related objectives (i) Equity in access to health services- everyone who needs services should get them, not only those who can pay for them; (ii) The quality of health services should be good enough to improve the health of those receiving services and (iii) People should be protected against financial- risk in ensuring that the cost of using services does not put people at risk of financial harm. UHC is firmly based on the WHO constitution of 1948 which declared health as a fundamental human right and on the Health for all agenda set by the Alma Ata declaration in 1978. UHC cuts across all the health-related Sustainable Development Goals (SDGs) and brings hope of better health and protection for the world's poorest (WHO, 2023).

The Federal government of Nigeria through the National Health Insurance Scheme (NHIS), has implemented the Tertiary Institutions Social Health Insurance Programme (TISHIP) with the hopes to achieve more flexible, more innovative and more competitive response to the health need of tertiary institution students in the country, in order to ensure that every tertiary institution students have access to quality healthcare while schooling, that parents and guardians are protected from the financial hardship of huge medical bills, ensure equitable distribution of healthcare costs among different students, to ensure equitable distribution of healthcare facilities within the nation tertiary institution of learning, ensure availability of funds to the health sector for improved services. The Tertiary Institutions Social Health Insurance Programme is a social security system whereby the health care of students in tertiary institutions is paid for from funds pooled through the contributions of students. It is a programme committed to ensuring access to qualitative healthcare service for students of tertiary

institutions thereby promoting the health of students with a view to create conducive learning environment. Membership is for all students of Federal, State and Private Tertiary Institutions. Tertiary institutions are categorized as Universities, Colleges of Education, Polytechnics, other specialized Colleges of Agriculture and Monotechnics, Schools of Nursing, Midwifery and Health Technologies etc. Health Maintenance Organizations normally register students at the beginning of the academic year. New students are to be registered at the beginning of every academic year. Funds are mobilized mainly from premium contributions from students and this Payments are mandatory. Premium are paid by students annually on registration for every academic session (National Health Insurance Operational Guidelines, 2021). Most importantly, student social insurance scheme provides the finance safety net for the development of healthcare delivery facilities, acquisition of healthcare equipment and other consumables as well as hiring and training of health care personnel that will support effective delivery of quality medical care to students where government financing is inadequate or non-available (James et al., 2020).

Perceived factors that were identified as barriers to utilization of health facilities as documented in the Nigerian studies includes poor education about when to seek care; poverty; perceived high cost of services; inadequacy of available services such as lack of drugs, basic laboratory services; inadequate number of healthcare workers; poor quality of care; and proximity to the facility. Age, gender differences, educational status and income level have been identified in some studies to determine frequency of use and comprehensiveness of healthcare packages (Obiechina & Ekenedo, 2013; Sule, et al., 2021; Vambe et al., 2019; Aniwada et al., 2019; Inyang et al., 2022; Oriolowo, 2022; Malgwi et al., 2019; Anetoh et al., 2017; Uguru et al., 2022).

According to Shagaya (2015), there is insufficient knowledge and awareness of the health insurance activities by those enrolled in the scheme and this has resulted to problems such as huge hospitals bill which would have been taken care of, if students had utilized the services under TISHIP. Inyang et al. (2022) studies indicated that poor access to health care facility measured by inadequate number of health care facilities and non-availability of medical consumables, poor student-medical staff relationship decreased TISHIP utilization. Studies from Rotimi, Akinleye, Olubukola, Babatunde and Fajewonyomi (2015), suggested that time spent in awaiting room by students can lead to implication for future utilization of health care services such as losing a patient in case of emergency situation. In a study titled “Assessment of Student's Satisfaction and Quality of Patient Care under the Nigerian Tertiary Institutions Social Health Insurance Programme (TISHIP)” by Shagaya (2015) results showed that the level of knowledge of NHIS-TISHIP clients and health providers on the various aspects of NHIS-TISHIP activities is still poor five years after commencement and the proportion of TISHIP enrollee who were knowledgeable on the overall operation of the scheme was 41.3%.

Obiechina and Ekenedo (2013), in assessing the factors affecting utilization of University health services in a tertiary institution in Southwest Nigeria, discovered that 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. Many researches have been conducted in other areas of healthcare services but there are fewer on tertiary institutions, hence, this call the need for this research work.

However, this research is carried out to determine the undergraduate students' level of awareness, perceptions and level of utilization of healthcare services at the medical Centre, University of Calabar.

2. MATERIALS AND METHODS

2. 1. Study setting

The study was carried out in University of Calabar, located at Etta-Agbor Road, Calabar Municipality which is in the Southern Senatorial district of Cross River State, Nigeria. The University of Calabar - also known as UNICAL is a university situated in Calabar, Cross River State, South-eastern Nigeria. It is one of Nigerian's second-generation universities. The University of Calabar was a campus of the University of Nigeria until 1975. It has a population of about 45,000 students. The institution has about 15 faculties, 90 departments and about 500 programmes (i.e. Undergraduate & Post graduates programmes). The population comprises of students, academic and non-academic staffs, two notable research institutions (Step-B project and Canadian Cross River State Health Surveillance System), Administrative block, Afrihub, students and staff accommodation, lecture halls are notable infrastructure found in the institution. The institution has a Medical Centre that provides healthcare services to students and staff (Osonwakalu *et al.*, 2013)

2. 2. Scope of the study

This study was focused on determining undergraduate students' level of awareness, perceptions and level of utilization of healthcare services at the Medical Centre, University of Calabar, Calabar, Nigeria.

2. 3. Study design

The research design that was adopted for this study was a cross sectional descriptive survey design using quantitative method of data collection to determine undergraduate students' level of awareness, perceptions and level of utilization of healthcare services at the Medical Centre, University of Calabar, Calabar, Nigeria.

2. 4. Study population

The population of the study comprised all undergraduate students' who are in University of Calabar, Calabar, Nigeria.

2. 5. Sample size determination

Using Bluman's formula (2004), the sample to be used for this study was calculated as shown below;

$$n = \frac{z^2 pq}{d^2}$$

where n means desired sample size, z means Alpha level of confidence limit at 95 percent which is 1.96, p means proportion of enrollees who were satisfied with NHIS-TISHIP 57.1% = 0.57

(Sanusi, 2015), q means Proportion of non-occurrence $(1-p)$ $(1-0.57) = 0.43$ and d means Precision required 5 percent (0.05). To account for bias and non-response, the sample size was increased by 10% to 420. Ten percent(10%) of the sample size was used for pretesting the instrument.

2. 6. Sampling procedure

A multi-stage sampling technique was used for this study.

Stage 1: Selection of faculties

Simple random sampling technique was used to select seven out of the fifteen (15) faculties found in University of Calabar. In order to achieve this, the names of all the 15 faculties were written in a piece of paper. This was folded neatly into tiny piece of papers and put in a container. After shaking vigorously, the first seven papers which was picked without replacement with the names on it, was used for the study.

Stage 2: Selection of departments

Two(2) departments were selected from the seven (7) selected faculties using simple random sampling. The names of the departments in each of the faculties was written on a piece of paper, folded into tiny pieces and put in three different containers. After shaking vigorously, the first two papers were selected from each of container, giving a total of 14 departments that was used for the study.

Stage 3: Selection of class level

Students from the year 1- 4 was used for the study.

Stage 4: Selection of students

Convenience sampling technique was used to select equal number of students from each of the department that was used for the study.

2. 7. Instrument for data collection

A structured questionnaire was used to elicit information from the respondents. The instrument was divided into five (5) sections. Section A consisted of Socio-demographics data of respondents. Section B was focused on eliciting data on the Undergraduate students' level of awareness of availability of health care services. Section C was focused on the collection of data on the perceptions of undergraduate students on healthcare services. Section D was focused on eliciting data on Undergraduate students' level of utilization of health care services. Section E was focused on collecting information on the factors influencing the utilization of healthcare services among undergraduate students.

2. 8. Pre-testing of the Instrument

The instrument for data collection was pre-tested in Cross River State University of Technology (CRUTECH) among 42 undergraduate students' accounting for 10% of the sample size to determine the validity and reliability of the research. This school has a cultural similarity with the study area. Based on the results of the pretest, some questions were modified to enhance respondents understanding of the questions.

2. 9. Data collection procedure

The services of 3 research assistants with senior school certificates was employed after carefully training them for a period of three (3) days on how to appropriately collect and sought out questionnaires from the undergraduate students in University of Calabar, Calabar.

2. 10. Methods for data analysis

Data entry and evaluation was done using Statistical Package for Social Sciences (SPSS) version 20. The result of this study was presented in percentages, tables and charts.

2. 11. Ethical consideration

A letter of introduction was obtained from the Ethics committee of Department of Public Health which enabled the researcher to have access to the undergraduate students in the University of Calabar, Calabar. Verbal informed consent was obtained from all respondents. Respondents were informed that their participation was voluntary and they had the right to withdraw from the study at any time.

3. RESULT / EXPERIMENTAL

A total of 420 copies of questionnaires were distributed for the study but only 411 were correctly filled, returned and used for the analysis. This gave a response rate of 97.9%.

3. 1. Socio-demographic characteristics of respondents

Most respondents 229(55.7%) were aged 18 -22 years followed by those aged 23 – 27 years 99(24.1%). The Majority of the respondents 220(53.5%) were females. The greater proportion 348(93.4%) were single. Majority of the respondents 253(61.6%) resided in the hostel while 158(38.4%) resided off- camp. Most of the respondents 398(96.8%) were Christians. Most of the respondents 166(40.4%) were in their second year of study, while 106(25.8%) were in their third year of study (Table 1)

Table 1. Socio-demographic characteristics of respondents

Variable	Frequency (n = 411)	Percentage (%)
Age (years)		
18-22	229	55.7
23-27	99	24.1
28-32	83	20.2
Total	411	100.0

Gender		
Male	191	46.5
Female	220	55.5
Total	411	100.0
Marital Status		
Single	348	93.4
Married	26	6.3
Divorced	1	0.2
Total	411	100.0
Address		
Hostel	253	61.6
Off-campus	158	38.4
Total	411	100.0
Religion		
Christianity	398	96.8
Islam	158	3.2
Total	411	100.0
Faculty of study		
Agriculture	59	14.4
Allied Medical Science	60	14.6
Arts	58	14.1
Basic Medical Science	59	14.4
Dentistry	58	14.1

Education	58	14.1
Medicine & surgery	59	14.4
Total	411	100.0
Level of study		
100	106	25.8
200	166	40.4
300	86	20.9
400	53	12.9
Total	411	100.0

Source: Field survey 2023

3. 2. Respondents' level of awareness of availability of healthcare services at the Medical Centre

Almost all the respondents 395(96.1%) had heard about the medical centre. Majority 320(81.0%) heard about the medical centre during orientation, while 50(12.7%) heard about the medical centre from their course mates. Most respondents 342(86.6%) knew the correct location of the medical centre. Majority of the respondents 252(61.3%) had not heard about TISHIP while 159(38.7%) had heard about TISHIP. Amongst 159(38.7%) respondents that heard about Tertiary Institutions Social Health Insurance Programme, 103(64.8%) heard from friends, 36(22.6%) heard from orientation and 20(12.6%) heard from the medical centre. More than half 267(65.0%) of the respondents did not know that TISHIP is a social security system where the healthcare of students in tertiary institution is paid for from funds pooled through the contributions of students while 144(35.0%) indicated that they knew so. Majority of the respondents 271(65.9%) did not know that the services rendered at the Medical Centre are under TISHIP. Most of the respondents 268(65.2%) did not know that their school fees include payment for TISHIP. (Table 2)

Table 2. Respondents' level of awareness of availability of healthcare services at the Medical Centre

Variable	Frequency (n = 411)	Percentage (%)
Heard of the Medical Centre		
Aware	395	96.1
Not aware	16	3.9

Total	411	100.0
Sources of information		
Lecturers	25	6.3
Orientation	320	31.0
Course mates	50	12.7
Total	395	100.0
Location of the Medical Centre		
Main camp	342	86.6
Close to the library	23	5.8
At college	30	7.6
Total	395	100.0
Heard of TISHIP		
Have heard	159	38.7
Have not	252	61.3
Total	411	100.0
Sources of information		
Friends	103	64.8
Orientation	36	22.6
At the Medical Centre	20	12.6
Total	159	100.0
Is TISHIP a social security system where students contribute to funds?		
I know	144	35.0

I don't know	267	65.0
Total	411	100.0
Are Services rendered at the Medical Centre under TISHIP?		
I know	140	34.1
I don't know	271	65.9
Total	411	100.0
Does School fees include payment for TISHIP?		
I know	143	34.8
I don't know	268	65.2
Total	411	100.0

Source: Field survey 2023

3. 3. Respondents' perceptions of healthcare services at the Medical Centre

Most of the respondents 126(30.7%) respondents strongly agreed that the time spent in waiting for treatment is too much while 105(25.5%) respondents agreed, 68(16.5%) respondents were undecided and 52(12.7%) respondents and 60(14.6%) respondents disagreed and strongly agreed respectively. One hundred and five (25.5%) strongly agreed that the health workers are not friendly to students with 56(13.3%) agreeing, 103(25.1%) respondents were undecided while 50(12.2%) and 97(22.6%) respondents disagreed and strongly disagreed respectively. Although there were 134(32.6%) and 117(28.5%) respondents who strongly agreed and agreed respectively that the medical center is too far from the hostel, 72(17.5%) respondents were undecided while 28(5.8%) and 60(14.6%) respondents disagreed and strongly disagreed that the medical center is too far from the hostel (Table 3).

Table 3. Respondents' perceptions of health care services at the Medical Centre

Variable	Frequency (n = 411)	Percentage (%)
Long waiting time		
Strongly agree	126	30.7
Agree	105	25.5
Undecided	68	16.5

Disagree	52	12.7
Strongly disagree	60	14.6
Total	411	100.0
Health workers are not friendly		
Strongly agree	105	25.5
Agree	56	13.6
Undecided	103	25.1
Disagree	50	12.2
Strongly disagree	97	23.6
Total	411	100.0
Essential drugs are not always available		
Strongly agree	52	12.7
Agree	85	28.5
Undecided	88	31.4
Disagree	106	17.5
Strongly disagree	80	6.3
Total	411	100.0
Time clashes with lectures		
Strongly agree	67	16.3
Agree	117	28.5
Undecided	129	31.4
Disagree	72	17.5
Strongly disagree	26	6.3
Total	411	100.0

No confidence in the healthcare provider		
Strongly agree	24	5.8
Agree	43	10.5
Undecided	92	31.4
Disagree	134	17.5
Agree	118	6.3
Total	411	100.0
Medical Centre is far from hostel		
Strongly agree	134	32.6
Agree	117	28.5
Undecided	72	17.5
Disagree	28	6.8
Strongly disagree	60	14.6
Total	411	100.0
Cost of drugs/ service		
Strongly agree	32	7.8
Agree	51	12.4
Undecided	52	12.7
Disagree	198	48.2
Strongly disagree	78	19.0
Total	411	100.0

Source: Field survey 2023

3. 4. Respondents' level of utilization of healthcare services at the Medical Centre

The majority of the respondents 264(64.2%) knew that they were eligible to access healthcare services at the medical centre at any time they fell ill while 147(35.8%) did not know.

Out of the 264(64.2%) respondents, 72(17.5%) respondents had visited the medical centre in the 2019/2020 and 2020/ 2021 sessions once while 159(38.7%) respondents had never visited the medical centre. Two hundred and fifteen (85.3%) respondents indicated that they utilized the medical centre because they were sick. The most frequent type of illness that made respondents utilize the medical centre was malaria and typhoid 100(46.5%). Majority of the respondents 160(63.5%) were satisfied with the services at the Medical Centre while 92(36.5%) were not satisfied. Most of the respondents 137(33.4%) access healthcare services at the medical centre when they are sick while 80(19.5%) indicated that they have never been sick. (Table 4).

Table 4. Respondents’ level of utilization of healthcare services at the Medical Centre

Variable	Frequency (n = 411)	Percentage (%)
Do you know that you are Eligible to access healthcare services at the Medical Centre?		
I know	264	64.2
Don’t know	147	35.8
Total	411	100.0
Visited the Medical Centre in 2019/2020 and 2020/2021 sessions		
Once	72	17.5
2-3 times	59	14.6
4-5 times	37	9.0
6-8 times	31	7.5
9-10 times	27	6.6
More than 10 times	26	6.3
Never visited	159	38.7
Total	411	100.0
Reason for utilizing the Medical Centre		
I was sick	215	85.3

Medical exam	7	2.8
I took another student	30	11.9
Total	252	100.0
Type of illness that made you utilize healthcare services at the Medical Centre		
Fever	40	18.6
Headache	42	19.5
Malaria and typhoid	100	46.5
Diarrhea and vomiting	30	14.0
Cough and Catarrh	3	1.4
Total	215	100.0
Services received from the Medical Centre		
Immunization service	37	9.0
Health education service	55	13.4
Treatment of illness	59	14.4
Eye checkup	52	12.7
Lab Test	49	11.9
Never visited	159	38.7
Total	411	100.0
Satisfied with services		
Yes	160	63.5
No	92	36.5
Total	252	100.0

Health facility accessed when sick		
General hospital	58	14.1
Teaching hospital	38	9.3
Private clinic	58	14.1
Pharmacy outside school	40	9.6
Never been sick	80	19.5
At the Medical Centre	137	33.4
Total	411	100.0

Source: Field survey 2023

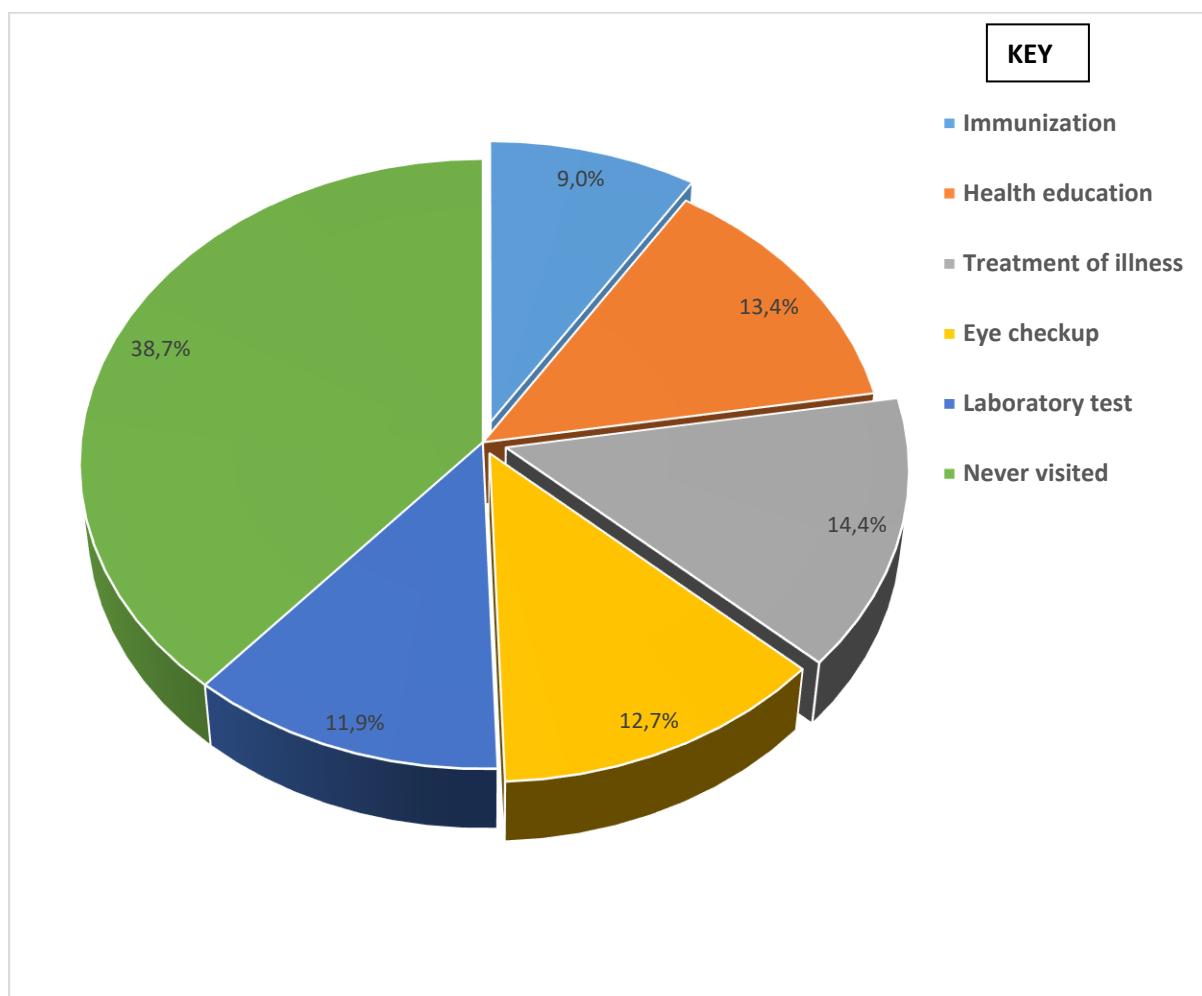


Figure 1. Services received by Undergraduate students at the Medical Centre
Source: field survey 2023.

3. 5. Factors that influenced the utilization of healthcare services among Undergraduate students

Results on Table 5 show the factors that influenced utilization of healthcare services among undergraduate students' in University of Calabar. These were lack of drugs and other consumables 286(69.6%); long waiting time 211(51.3%); Medical staff were rude 76(18.5%) and lack of awareness of TISHIP 83(20.2%).

Table 5. Factors influencing utilization of healthcare services by undergraduate students.

Variables*	Frequency (n = 411)	Percentage (%)
Long waiting time	187	45.5
Lack of drugs/consumables	286	69.6
Expensive healthcare services	139	33.8
Lack of experience/ efficacy	193	47.0
Distance to the health Centre	211	51.3
Medical staff are rude to students	76	18.5
Exploitation by Centre staff	53	12.9
Lack of awareness about location	29	7.1
Lack of awareness about TISHIP	83	20.2

*Multiple responses allowed

Source: Field survey 2023

4. DISCUSSIONS

The study was a cross sectional study that investigated undergraduate students' awareness, perceptions and utilization of healthcare services at the Medical Centre, University of Calabar, Nigeria. More than half of the respondents 252(61.3%) have not heard about the Tertiary Institutions Social Health Insurance Programme (TISHIP) while 159(38.7%) said they have heard about TISHIP. In this study 144(35.6%) students could describe the TISHIP. Similar findings of low awareness are seen in studies from Kaduna (Sule, et al., 2021), Abuja (Vambe et al., 2019), Enugu (Aniwada et al., 2019) and in contrast with studies from Uyo (Inyang et al., 2022), Kogi & Niger (Oriolowo, 2022), Zaria (Malgwi et al., 2019), Awka (Anetoh et al, 2017), Enugu (Uguru et al.,2022),Shagaya (2015), Nigeria, that indicated high level of awareness among the Undergraduate students. The utilization of health services has been explained by Ibor *et al.* (2014) to mean the willingness or the would-be potential patients to make the most of the services offered at a medical establishment. The findings from this study reflect that

awareness of the healthcare services at the school's health facility greatly influences utilization and uptake of same. The area of dissatisfaction as asserted in Aniwada (2019) which are Lack of drugs and supplies, poor information provision, long waiting time, poor cleanliness, lack of privacy and inadequate visiting hours, were found to be the major causes of dissatisfaction in his studies. Majority of the respondents (61.3%) had utilized the school's medical center at least once in the last session and over thirty percent of the students access the medical center for care when they are sick. In addition, the time spent in waiting for treatment and unavailability of essential drugs were among the perceptions of students about the medical center. Furthermore, the lack of drugs and other consumables (69.6%) similar to finding from Ogundele et al (2014), distance of health facility from the hostel (51.3%) and long waiting time (45.5%) were identified as the major factors influencing utilization of healthcare services by undergraduate students in the university. The waiting time is in agreement with studies from Vambe et al (2019); Obechina & Ekenedo, (2014) & Uduakobong (2022).

5. CONCLUSIONS

The undergraduate students had good level of awareness of healthcare services at the medical center as over ninety-six percent (96%) have heard about the medical centre and a good number are aware that they are eligible to access healthcare services at the centre at any time they fall ill. Majority of the respondents (61.3%) had utilized the school's medical center at least once in the last session and over thirty percent of the students access the medical center for care when they are sick.

In addition, the time spent in waiting for treatment and unavailability of essential drugs were among the perceptions of students about the medical center. Furthermore, the lack of drugs and other consumables (69.6%), distance of health facility from the hostel (51.3%) and long waiting time (45.5%) were identified as the major factors influencing utilization of healthcare services by undergraduate students in the university.

Based on the findings of the study, the following recommendations are hereby made:

- 1) There is need for proper orientation of undergraduate students about the Tertiary Institution Social Health Insurance Programme where its meaning and services it offers will be explicated
- 2) There is need to develop a customer/patient feedback mechanism at the medical center to access client satisfaction and improve service(s) to students.
- 3) Unavailability of drugs was identified as a factor that influenced utilization of the services offered at the medical centre. Provisions should be made to ensure availability of drugs and other consumables for patients in the medical centre.
- 4) There is suggestion for further studies to ascertain why most of the students preferred accessing healthcare from other health facilities than the university's medical center even at the subsidized rate of healthcare costs.

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