



Students' satisfaction with healthcare services in federal universities in Southwestern Nigeria

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ABSTRACT

This study assessed the availability of healthcare services in Southwestern Nigeria's federal universities. Similarly, it examined students' satisfaction with healthcare services in the study area. Furthermore, the study determined the relationship between healthcare services and students' satisfaction. Descriptive survey research design was adopted for the study. The study's population was 193,526 students while the sample was 1,144 students drawn from three universities in the study area. 'Students' Satisfaction with Healthcare Services Questionnaire (SSHFAQ) was used in gathering data for the study. The analysis of gathered data was done using percentages, weighted average and Pearson Product Moment Correlation. The results indicated that healthcare services in the institutions of study were fairly or moderately available (2.6). Furthermore, the study indicated that students were fairly satisfied 576(52%) with healthcare services. It was also found that availability of healthcare services has significant relationship ($r=0.72 < 0.05$) with students' satisfaction. It was concluded that healthcare services in the study area were inadequate and students' satisfaction was influenced by the level of availability of healthcare services. It was recommended that university management and government should build more wards, procure more beds, modern healthcare technological gadgets, as well as organise professional training for medical personnel on the need to treat patients professionally and with due respect.

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INTRODUCTION

Students are the main reason for establishing the university. As customers to the educational institutions, students consider their satisfaction with various services offered to them as being extremely important, as these could affect their overall academic performance, physical, psychological and emotional wellbeing. Students' satisfaction also enhances overall achievement of universities' goals and objectives. Not only that, the full maximisation of students' potentials cannot be achieved without a high level of students' satisfaction. Studies have shown that the quality and adequacy of academic and administrative services in the university usually have significant impact on students' satisfaction (Wanner & Palmer, 2018; Nguyen, Pham, Tran & Pham, 2020; Rahman, Mia, Ahmed, Thongrak & Kiatpathomchai, 2020).

One of the critical welfare services that could influence students' satisfaction in the university is healthcare. Healthcare is an important service that is provided for students to ensure their health stability. Promoting good and sound health for students in the university is extremely important, because, it is only healthy students that can learn or carry out extracurricular activities in schools.

The concept of health services encompasses a broad spectrum of services aimed at promoting health, preventing illnesses, detecting diseases at an early stage and managing health issues within the community (Babatola, Popoola, Olatubi & Adewo, 2022). Health services are intended to meet the medical needs of people in a particular community by making use of the infrastructure already in place and the healthcare professionals carrying out their duties. The goal of this service, which is offered by medical professionals, is to promote and achieve wellbeing for everyone in a specific context

School clinic or health centre refers to the facilities provided by the university in or outside the university to provide health services to staff and students. Sherwood-Samuel (2016) stated that school health centres offer health services and healthcare to students in the school settings. The university health centre offers essential health services to students at minimal or no expense. However, when medical cases of students require the service of specialists, the centre refers the case to the university teaching hospital where more specialised services can be provided.

University Health Centres provides medical services like routine health awareness campaigns, in-person and out-of-office patient treatments, and medical testing. These services are important as they contribute to students' healthy living. Healthcare for students is not only important in promoting and enhancing students' health and wellbeing, but also has tremendous impact on students' academic performance. Studies have shown that many students who make use of school health centres during health challenges usually perform better in their academics than students who are not opportune to access schools' health services. School health centre helps to improve students' presence in school, health condition and meeting their medical and health needs (Olowolafe, Olowo, Ogunsanwo & Oladele, 2020). Olowolafe *et al* (2020) submitted that there exists significant association between the use of schools' health centre and students' academic achievements. They added that access to school healthcare services reduces absenteeism, drop-out and also enhances students' and schools' performance. Education stakeholders have solid reasons to support students' health and fitness, since students' attendance, motivation for learning, grades, assessment scores, and graduation all improve when they are healthy and happy (Breslau, 2010 ; Haas & Fosse, 2008).

In spite of the importance of functional healthcare to students' physical, social and psychological wellbeing, it has been observed that most students in public universities in Nigeria are not giving good report about their experience on university healthcare services. Some complain about the facilities in the health centres while some complain about the healthcare professionals. The perceived unpleasant experiences might be affecting the satisfaction level of students with healthcare services in the institutions. It is on the basis this that this study is set to investigate the satisfaction of students with healthcare services in Southwestern Nigeria's federal universities.

LITERATURE REVIEW

Health services refer to a wide range of medical, dental and allied health professions that work collectively to deliver healthcare to individuals. These services encompass the diagnosis, treatment, prevention and management of various health conditions. The phrase "health services" can also refer to a broad range of services related to illness prevention, health promotion, early disease detection, and the management of health issues in a community. Health services also include physical examination, illness treatment, screening, health education, and healthy lifestyle promotion (American College Health Association, 2001). In the context of a tertiary institution, health services are intended to address the medical requirements of employees and students by utilising the resources that are available and employed medical personnel or professionals who are performing their jobs.

According to the American College Health Association (2001), university health services include primary and preventive healthcare that is provided to students on campus at no cost or at a reduced cost. When choosing a school, students and their parents take into account a number of criteria, including the availability of high-quality health care, which can be viewed as a fundamental human right.

As a result of tremendous importance of health services to students' physical, social, psychological and emotional development, parents prefer institutions that have quality and well-functioning health centre where their children can be treated when the need arises. This is because some students have underlying health conditions that usually need close attention of medical personnel.

Studies have shown that health services enhance students' general wellbeing, reduce absenteeism, enhance students' concentration in their studies as well promote improved academic performance. Charles (2010) argued that students who are in good health are more likely to excel in their educational pursuits. Conversely, health-related concerns can result in irregular school attendance, decreased attentiveness and reduced learning in the classroom for students. Moonie, Sterling, Figgs, and Castro (2008) asserted that individuals with severe medical conditions including, juvenile diabetes, asthma and dental issues are at a heightened risk of absenteeism from school and experiencing associated academic repercussions.

Universities' health centres are built with the aim of treating illnesses that are common among students as young people. Studies have shown that common health problems that are usually being treated in university health centres across the world include influenza, headache, abdominal pain, stress and anxiety, allergies, respiratory tract infection, gastrointestinal problem, burn, menstrual pain, insect stings, eye problem, cough, dizziness, sickle cell anemia, malaria, among others (Hussain, Guppy, Robertson & Temple, 2013; Ogundele & Enyinaya, 2014; Alkhawaldeh, 2017).

According to Onyeonoro, Chukwu, Nwafor, Meka, Omotowo *et al.* (2015), the level of agreement existing between patients' expectations for healthcare services and their impression of the treatment they received is what constitutes healthcare satisfaction. Manzoor, Wei, Hussain, Asif, and Ali (2019) viewed patient satisfaction with healthcare services as the level of enjoyment or contentment that patients feel when utilising the medical facility. Patients assess degree of their satisfaction with the services they enjoy by contrasting their expectations with their view of the treatment they received. They also proposed that treatment compliance, subsequent health-related behaviours, and health outcomes could all strongly influence satisfaction with care received.

Students' satisfaction with healthcare services and facilities in the university is extremely important. The quality of healthcare services and the attitudes of caregivers in the institutions' health centre can influence the level of students' satisfaction with the services being rendered. Students' satisfaction with healthcare can determine and influence their level of loyalty to healthcare services, their psychological response to treatment being received and their ultimate decision to continue to patronise the healthcare facility. It is therefore noteworthy that the only viable way by which healthcare institution can fulfill their core mandate of meeting the health needs of citizenry is through healthcare satisfaction.

Studies have shown that many factors can influence the level students' satisfaction with healthcare services in any educational institution. These factors can either be intrinsic or extrinsic factors. Gender, age, education, marital status, financial standing, visitation frequency, personality, anxiety, and overall life satisfaction are examples of intrinsic elements. Furthermore, patients are impacted by convenience factors like waiting times for appointments, visiting hours, location of health centre, treatment cost, office supplies, hygienic state of the wards, and pain management (Kruk, *et al.*, 2018; Fang, Liu & Fang, 2019; da Silva, Martiniano, Cardoso, Cavalcanti, Figueiredo, 2022).

Extrinsic factors include communication skills of medical personnel, the technical competence of medical personnel, approaches, courtesy and explanation of medical procedures, availability of medical services, organisational skills as well effectiveness and efficiency of treatment received. One of the critical extrinsic factors that influence the level at which students will be satisfied or dissatisfied with healthcare services is the duration in the waiting room. It has been observed that no matter the quality or the expertise of caregiver in university health centre, the amount of time a patient will stay before being attended to can determine the level of students' satisfaction (Vukmir, 2006).

Apart from the fact that long waiting time before students are attended to affects students' activity schedules, it can also increase the chance of health complications of the patients which in most cases may lead to untimely death of the students. Mackey and Cole (cited in Umar, Oche & Umar, 2011) contended that the marketing of healthcare services becomes challenging and difficult when patients express dissatisfaction with the waiting time. According to them, waiting time is the duration from the patients' arrival in the waiting room to their departure from the hospital. Umar *et al* (2011) submitted that patients are dissatisfied when waiting durations are longer than expected time. However, when waiting times are thought to be comparable to expectations, patients are relatively content, and when waiting durations are shorter than anticipated, they are extremely satisfied. This is in line with Ofili and Ofovwé (2005) who submitted that the satisfaction of patients that is achieved through quality medical care services and acceptable waiting time have been seen as factors that could affect health service utilisation and patients' satisfaction.

In the view of Umar *et al* (2011), factors that predict patients' satisfaction include absence and inadequacy of drugs, inadequate information, unacceptable waiting time, poor hygiene, lack of privacy and insufficient visiting hours. According to Abdulrasheed (2011), the best indicator of patients' satisfaction with public health facilities is the respect that physicians have for their patients. They added that patients care more about the attitude of doctors and other health practitioners than the healthcare providers' technical competence. Alshurideh (2014) found that service location, clinic environment, service offering, price, time spent to receive medical treatment, treatment by medical personnel, clinic temperature, experience of doctors are all determinants of students' satisfaction with healthcare services in higher educational institutions in Jordan. In the same vein, Alkhalaf (2017) and Obiechina and Ekenedo (2013) submitted that expensive drugs, inadequate or non-availability of drugs for students, waiting period before being treated, adequate referral service, affect students' satisfaction in tertiary institutions in South Western Nigeria. Yesilada and Direktor (2010) in their research found that factors that could influence students' satisfaction with healthcare services in the university include availability of medical instruments, availability and accessibility to drugs, health centre worker's attitudes to patients, the general condition of health centre's surroundings and other services that could support the provision of healthcare services. Another factor that has been found to have significant impact on students' satisfaction with healthcare is the communication between healthcare personnel and the patients.

It can therefore be deduced from the foregoing that the general quality of healthcare services including the attitudes of healthcare providers in the university are necessary determinants of students' utilisation of university health centres services and students' satisfaction with healthcare services available (Saif, 2014; Aljaberi, *et al.*, 2017).

STATEMENT OF THE PROBLEM

Good and high-quality healthcare services in universities are regarded as students' fundamental rights and are a crucial consideration for both parents and students when choosing which university to preference. However, in recent times, there have been public outcries by staff and students on the decline in the quality of healthcare services being offered in health centres in federal universities in Southwestern Nigeria (Obiechina & Ekenedo, 2013; Obi & Okere, 2013; Oluyombo, Akinleye, Oluyombo, Babatunde & Fajewonyomi, 2015). The challenges confronting university health centres in federal universities in Nigeria have made some students prefer private hospitals to university health centres. In some cases, parents have decided to pick up their wards for better medical attention at home because of the perceived poor state of university health services. These ugly situations had led to increase in untimely death of students which in turn had resulted in protest, unrest and disruption of academic calendar of institutions. Not only that, this could also have resulted in students' dissatisfaction with healthcare services, as well university education as a whole. It is on this basis that this study aimed at investigating the level of availability of healthcare services and how satisfied students were with health services in Southwestern Nigeria's federal universities.

RESEARCH OBJECTIVES

Specifically, the study assessed the availability of healthcare services in the study area. It determined how satisfied students were with health services. Furthermore, it examined the connection between health services and students' satisfaction.

RESEARCH QUESTIONS

1. What is the level of availability of health services in federal universities in Southwestern Nigeria?
2. How satisfied were students with health services in the study area?

HYPOTHESIS

There is no significant relationship between healthcare services and students' satisfaction federal universities in Southwestern Nigeria.

MATERIALS AND METHODS

The study adopted descriptive survey research design. The population was 193,526 students. The participants were the undergraduate students of the federal universities in South Western Nigeria. The sample was 1,144 students which were drawn from Obafemi Awolowo University (OAU), Ile-Ife, Osun State, University of Ibadan (UI), Ibadan and University of Lagos (UNILAG), Lagos. 381 students were selected from OAU, 381 students were selected from UI and 382 students were selected from UNILAG. Proportionate sampling technique was used in the selection of the students. Out of the 1,144 questionnaires that were distributed to the students, 1,108 copies were returned. All the copies of questionnaire returned were useful for analysis. The instrument for the study was 'Students' Satisfaction with Health Services Questionnaire (SSHFAQ)'. The instrument's validity was assessed by specialists in the Educational Management and Test and Measurement departments. The researchers employed the test-retest method to establish reliability. To confirm the instrument's reliability, the validated questionnaire was trial-tested with 50 students from the Federal University of Technology, Akure, Ondo State, Nigeria. Although this institution was not part of the study sample, it was part of the overall population. The trial test was conducted over a two-week interval. The responses were collected and analysed using the Pearson Product Moment Correlation Coefficient statistics. The reliability results indicated that the SSHFAQ had a coefficient of 0.79, which is deemed sufficiently high for reliability. Data analysis was performed using percentages, weighted averages and Pearson Product Moment Correlation Coefficient.

RESULTS

Research Question 1: What is the level of availability of Healthcare Services in Federal Universities in Southwestern Nigeria?

Table 1: Students' Responses to the Level of Availability of Health Services in Federal Universities in Southwestern Nigeria

	HEALTH CARE	SA F (%)	A F (%)	D F (%)	SD F (%)	WA
1	My university has functional health centre for all students	166 (15)	620 (55.9)	150 (13.5)	172 (15.6)	2.6
2	There are enough doctors and nurses in my university health centre	36 (3.3)	86 (7.8)	407 (36.7)	578 (52.2)	1.4
3	There are free drugs and free medical treatment in my university health centre	459 (41.4)	457 (41.2)	150 (13.6)	42 (3.8)	3.3
4	There are enough wards and beds for students on admission in my university health centre	101 (9.1)	141 (12.7)	276 (24.9)	591 (53.3)	2.2
5	Doctors, nurses and other health professionals attend to all students promptly and professionally in my university health centre	76 (6.9)	127 (11.5)	447 (40.3)	457 (41.3)	2.1
6	My university health centre is equipped with modern medical equipment and technological gadgets to treat students	227 (20)	231 (21)	350 (32)	300 (27)	2.4
7	All students are enrolled in Health Insurance Scheme	241 (21.8)	737 (66.4)	92 (8.3)	39 (3.5)	3.20
8	My university health centre organises regular health education for students.	164 (14.5)	294 (26.5)	350 (32)	300 (27)	2.3
9	Health services are available for students throughout the day including weekends	507 (45.8)	465 (41.9)	80 (7.2)	56 (5.1)	3.2
10	There is effective referral procedure from my university health centre to the University Teaching Hospital in case of emergencies.	650 (58.7)	302 (27.3)	90 (8)	66 (6)	3.6
11	There are functional ambulance and ambulance services in my university health centre	210 (19)	450 (40.6)	277 (25)	171 (15.4)	2.57
12	There is constant electricity supply/ standby generator/ solar	233 (21)	280 (25.3)	363 (32.8)	232 (20.9)	2.45
	Weighted Average	23%	31.5%	22.9%	22.6%	2.6

Source: Authors' field work, 2025

Table 1 shows the level of availability of healthcare services in Southwestern Nigeria's federal universities. It was established from the Table that availability of healthcare services in the institutions of study was moderate. The Table depicts that all students had access to a functional health centre at their universities, free medication and medical care were provided for all students, all students were enrolled in the Health Insurance Scheme, health services were available to students day and night, there was an efficient process for referring students to the University Teaching Hospitals in the event of an emergency, and there were operational ambulances from the university health centres.

However, the Table indicated that there were not enough doctors and nurses, as well as wards and beds for students on admission in the university health centres. Similarly, the university health centres did not have enough modern medical equipment and technological gadgets to treat students. Doctors, nurses and other health professionals did not attend to all students promptly and professionally. In addition, there was no regular health talk and campaign for students and there was no constant electricity supply/ standby generator/ solar. The weighted average of (2.6) buttressed the results.

Research Question 2: How satisfied were students with health services in the study area?

Table 2: Responses on Students' Satisfaction with Healthcare Services

	Healthcare services Please indicate how satisfied you are with the following:	Highly Satisfied (%)	Fairly Satisfied (%)	Not Satisfied (%)	Interpretation
1	Effects of treatment received	110 (9.9)	698 (63)	300 (27.1)	Fairly satisfied
2	Communication with doctors and other health professionals	321 (29)	487 (48.5)	250 (22.5)	Fairly satisfied
3	Attitudes of health works and level of respect accorded patients	229 (20.7)	279 (25.2)	600 (54.1)	Not satisfied
4	Available drug and price	73 (6.6)	621 (56.1)	165 (14.9)	Fairly satisfied
5	Waiting time	301 (27.2)	307 (27.7)	500 (45.1)	Not satisfied
6	Health centre environment/ cleanliness	123 (11.1)	640 (57.8)	345 (31.1)	Fairly satisfied
7	Amount paid for treatment	164 (14.8)	644 (58.1)	300 (27.1)	Fairly satisfied
9	Technological gadgets deployed for treatment	239 (21.5)	621 (56.1)	248 (22.4)	Fairly satisfied
10	Number of wards and beds	198 (17.9)	681 (61.4)	229 (20.7)	Not satisfied
11	Sensitisation and health education	444 (40.1)	229 (20.6)	435 (39.3)	Not satisfied
12	Available number of doctors and other health workers	182 (16.4)	376 (34)	550 (49.6)	Not satisfied
13	Emergency services	260 (23.5)	615 (55.5)	233 (21)	Fairly satisfied
14	Health Insurance Scheme	570 (51.4)	314 (28.3)	224 (20.3)	Highly satisfied
15	Referral procedures	317 (28.6)	722 (65.2)	69 (6.2)	Fairly satisfied
		21.2%	52%	26.8%	Fairly satisfied

Source: Authors' field work, 2025

Table 2 demonstrates students' satisfaction with health services in federal universities in Southwestern Nigeria. According to the Table, students' satisfaction with health services was generally moderate. The Table indicated that students were highly satisfied with Health Insurance Scheme as all students were enrolled in the scheme. Similarly, students were fairly or averagely satisfied with effect of treatment received, communication with doctors and other health professionals, available drug and price, health centre environment/ cleanliness, amount paid for treatment, technological gadgets deployed for treatment, emergency services and referral procedures. However, students expressed dissatisfaction with the attitudes of health personnel, waiting time, number of wards and beds as well as sensitisation and health education available for students. This was buttressed with percentage weighted average of 52%.

Hypothesis

There is no significant relationship between healthcare services and students' satisfaction

Table 6: Relationship between healthcare services and students' satisfaction

Variables	N	Mean	SD	sum of square	R	Remarks
healthcare services	1108	41.29	11.56	36689.35	.72	<0.05
students' satisfaction	1108	25.65	6.75	-576.614		

Significant at $p < 0.05$

Table 6 shows that there is a significant relationship ($r = 0.72 < 0.05$) between healthcare services and students' satisfaction. The null hypothesis is therefore rejected. This means that there is strong and positive relationship between healthcare services and students' satisfaction. It can therefore be asserted that quality healthcare services are important determinants of students' satisfaction in tertiary institutions.

Discussion of Findings

The analysis of data on the availability of healthcare services in Southwestern Nigeria's federal universities indicated that healthcare services were moderately or fairly available. This was due to the fact that some aspects of the health services were adequately available, while some were not adequately available. The findings showed that all students had access to a functional health centre at their universities, free medication and medical care were provided for all students, all students were enrolled in the Health Insurance Scheme, health services were available to students day and night, there was an efficient process for referring students to the University Teaching Hospitals in the event of an emergency, and there were operational ambulances from the university health centres. However it was indicated that doctors and nurses as well as wards and beds for students on admission were not adequately available in the university health centres. Similarly, the university health centres were not having adequate modern medical equipment and technological gadgets to treat students. Doctors, nurses and other health professionals did not satisfactorily attend to all students promptly, professionally and with respect. In addition, the university health centres did not frequently host health talks or sensitisations, and there was no reliable source of electricity, solar power, or a backup generator. The results of this study was in tandem with the results of Obi and Okere (2013) who found in their studies that support services such housing, career and counselling services, disability services, financial aid/sponsorship services, study centres, sports and recreational services, internet services and health services were not adequately available to the students in tertiary institutions in Nigeria. Obiechina and Ekenedo (2013) found in the study carried out in Southeastern universities in Nigeria that students were dissatisfied with medical services in their various institutions. They submitted that some of the factors responsible for low utilisation of health centres by Nigerian university students included inadequacy of essential drugs, waiting time, and shortage of modern medical facilities. This was not different from the findings of Alkhawaldeh (2017) who pointed out that inadequate availability of drugs, relationship between medical personnel and students, medical, experience of medical staff, lack of or inadequate referral services as well as long waiting time before students receive medical treatment were the major hindrances to students' utilisation of university health services. The study also indicated that the condition of health services and facilities resulted into moderate level of students' satisfaction with health care services.

The analysis of data on the satisfaction of students with health services indicated that students were fairly or averagely satisfied with health services in the study area. Students were highly satisfied with Health Insurance Scheme as all students were enrolled in the scheme. Similarly, students were fairly or averagely satisfied with effect of treatment received, communication with doctors and other health professionals, available drug and price, health centre environment/ cleanliness, amount paid for treatment, technological gadgets deployed for treatment, emergency

services and referral procedures. However, students expressed dissatisfaction with the attitudes of health workers and level of respect accorded patients, waiting time, number of wards and beds and sensitisation and health education. This was in line with Ekpoh (2018) who revealed that students' satisfaction with healthcare services in Nigeria's tertiary institutions was moderate. Similarly, Shagaya (2015) found that students' satisfaction with healthcare services under the Nigerian Tertiary Institution Social Health Insurance Programme (TISHIP) was generally moderate. Similarly, Adejumo, Abolarin, Akinbodewa, Enikuomelin and Lawal (2019) found that students were averagely satisfied with general health services in Medical University in Southwestern Nigeria.

The results on the connection between health services and students' satisfaction revealed that health services has strong and positive relationship with students' satisfaction in federal universities in Southwestern Nigeria. This is in agreement with the findings of Alshurideh (2014) who found that medical service location, medical service price, waiting time to receive medical service, treatment by employees and nurses, clinic cleanliness, clinic temperature and doctors' experience all had significant effects to students' satisfaction with healthcare services in universities in Jordan. Yesilada and Direktor (2010) found that the satisfaction of patients with health services is usually influenced by the healthcare givers' attitudes to patients in the hospital. Similarly, Vukmir (2006) opined that waiting time or duration and the quality of healthcare services given to patients influence their satisfaction with health services

CONCLUSION

The study concluded that health services were moderately available in federal universities in Southwestern Nigeria, and that students were moderately satisfied with health services in the study area. Overall healthcare services were found to have significant influence on students' satisfaction. This study will help the school management to be aware that the quality, the quantity as well as the attitudes of healthcare professionals is important in determining students' patronage of healthcare services in the university. On the basis of this, the study provided an insight for the university management, government and school owners on the need for the upgrade of university healthcare services in public universities in Nigeria. This is important because good and functional healthcare services contribute in no small measure to students' physical, emotional and psychological wellbeing.

RECOMMENDATION

Based on the findings of this study, the following were recommended in order to keep students satisfied with healthcare services in federal universities in Southwestern Nigeria:

1. The government should increase university funding in order for the school management to increase the number of wards, beds and modern technological gadgets for the health centres.
2. More doctors and other medical personnel should be employed in the universities' health centres. This will enable students to receive prompt medical attention when the need arises, thereby reducing waiting time before they are treated.
3. Medical personnel in the health centres should be trained regularly on the need to treat students (patients) professionally and accord them due respect.
4. Students should be regularly sensitised on the importance of visiting university health centres as and when due.

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