

INFLUENCE OF DEMOGRAPHIC VARIABLES ON THE UTILISATION OF PRIMARY HEALTHCARE SERVICES AMONG CIVIL SERVANTS OF KANO STATE TOWARDS PROMOTING WELLNESS

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Abstract

The study investigated the influence of demographic variables on the utilisation of primary health care services among civil servants in Kano state, Nigeria. A descriptive survey research design of an ex post facto type was used to conduct the study. A self-structured questionnaire named influence of demographic variables on the utilisation of primary health care services (IDVUPHS) with $r=0.72$ was used as the instrument for data collection. The researcher used 379 copies of the questionnaire to analyse the data. A descriptive statistics of simple frequencies and percentage were used to describe the demographic information of the respondents and a t-test was used to test all the three hypotheses at 0.05 level of significance. The results obtained from the study indicated that: Urban and rural civil servants in Kano state differ in their utilisation of primary health care services based on availability of medical personnel. There is no significant difference between senior and junior civil servants in Kano state in their utilisation of primary health care services based on availability of medical personnel. Male and female civil servants in Kano state did not differ significantly in the utilisation of primary health care services based on availability of health personnel. It was recommended among others that; Kano state government should provide more medical personnel and deployed to the various public health centers in all the forty four local governments of the state. This will bridge the differences existed between the urban and rural communities in terms of health care services given to them.

Key words: *Demographic variables, Utilisation, Primary healthcare, Civil servants, Medical personnel.*

Introduction

The components of Nigerian previous health developmental plans were marked with serious deficiencies which negatively affect the wellness of the citizens of the country. Obionu (2007) listed the deficiencies which include; much emphasis placed on curative health while preventive measures were neglected, limited coverage and accessibility to the health care services nationwide, poor management of health facilities, shortage of man power and inadequate

utilisation of the available health facilities. In order to overcome such problems both the content and design of the previous component of the national health policies were changed and primary health care (PHC) approach was introduced as a means of promoting wellness and achieving health for all Nigerians.

However, the primary health care as conceptualised by the Alma Ata declaration of 1978 is a grass-root approach towards universal and equitable health care for all that should take care of the lapses highlighted above (World Health Organisation/United Nations Children Fund, WHO/UNICEF, 1978). The strategy is meant to address the main health problems in the communities by providing promotive, preventive, curative and rehabilitative services (Olise, 2012). Primary healthcare is the first level of contact of individuals, families and communities with the national health system, bringing health care as close as possible to where people live and work, and it constitutes the first element of the continuing health care process. Park (2011) defined primary health care as essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community in a way that is acceptable to them, through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.

The national health policy of Nigeria was launched and it was seen as a collective will of the government and people of Nigeria to provide comprehensive health care system that is based on primary health care (PHC). In order to ensure the sustainability of PHC in Nigeria, the Federal Government by decree number 29 of 1992, set up the National Primary Health Care Development Agency. This body was charged with the responsibility to mobilise support nationally and internationally for primary health care programme implementation (FMOHN, 2004; Raids, 2008; Magawa, 2012). Therefore, the national health policy regards primary health care as the framework to achieve improved health for the population in terms of prevention, adequate coverage, efficient and sufficient personnel, utilisation and management (Nigeria Demographic and Health Survey, 2008).

Kano state is with a population of over one hundred thousand (100,000) civil servants (KSCC, 2016). According to office of the head of civil service (2016), it is the policy of Kano state government to provide civil servants with free medical care within and outside the country where such treatment could not be available in Nigeria. The civil servants supposed to be conscious about their health and also to influence other members of the entire community, but very unfortunately, even among the civil servants not all are adequately utilising the available health facilities provided, which may have resulted in to high rate of infant and expectant mothers' morbidity and mortality as well as outbreak of

diseases such as cholera, typhoid fever, malaria, tuberculosis as well as other diseases like hypertension, diabetes myelitis but to mention a few. Also, measures like free medical services, provision of public health facilities, health equipment and medical personnel are orchestrated, the utilisation of primary health care by the civil servants seem to be inadequate. This assertion is supported by a report from British Broadcasting Co-operation (BBC) Hausa.com (2016), some community members including medical personnel refused to release their children for polio immunisation exercise in Kano. Therefore, the study was guided by this question; does attitude of medical personnel influence the utilisation of primary health care services among the civil servants of Kano state?

Hypotheses

The following hypotheses were tested;

1. Urban and rural civil servants in Kano state do not differ significantly in their utilisation of primary health care services based on the attitude of health personnel.
2. Senior and junior civil servants in Kano state do not differ significantly in their utilisation of primary health care services based on the attitude of medical personnel.
3. Male and female civil servants in Kano state do not differ significantly in their utilisation of primary health care services based on the attitude of medical personnel.

Methodology

Descriptive design of ex post facto was used for this study and the population of the study comprised three hundred and seventy nine (379) civil servants in the state which included urban and rural, senior and junior as well as male and female civil servants. As a result of difference of number of the workers in the selected ministries used in the study therefore, the respondents were selected from central, south and north senatorial districts of Kano State based on the proportionate sampling technique of equal distribution from the following ministries.

Self-developed questionnaire named "Influence of Demographic Variables on the Utilisation of Primary Health Care Services" was used for data collection. The questionnaire had two sections: Section A contained demographic information of the respondents while section B consisted five questions related to attitude of medical personnel. The test retest method using twenty respondents from other ministries who were not part of the study area were used and 0.72 was

obtained as the reliability of the questionnaire. A descriptive statistics of simple frequencies and percentage were used to describe the demographic information of the respondents and a t-test statistics was used to test all the three hypotheses at 0.05 level of significance.

Results

Table 1: Demographic information of respondents

Gender Percentage (%)		Frequency
Male	266	70.2
Female	113	29.8
Total	379	100
Location		
Urban	236	62.3
Rural	143	37.7
Total	379	100
Respondents		
Junior	104	27.4
Senior	275	72.6
Total	379	100

Table 1 indicates that 266 (70.2%) of the participants were males while 113 (29.8%) of the respondents were females. This implies most of the respondents were male, with regard to location, 236 (62.3%) of the respondents were from urban areas within the state while 143 (37.7%) from the rural areas. This indicated that majority of the respondents were from urban areas. The status distribution of the civil servants shows that 104 (27.4%) were junior staff while 275 (72.6%) were in the senior cadre. The implication is that majority of the respondents were on senior cadre.

Table 2: Opinion of the respondents on whether the attitude of health personnel on civil servants' utilisation of primary health care services in Kano State

Influence of health personnel	SA	A	D	SDA	Mean	SD
1. Civil servants in Kano State patronize primary health centers due to effectiveness of medical personnel.	68 (17.4)	149 (39.3)	126 (33.8)	36 (9.5)	2.646	0.877
2. Civil servants in Kano State receive appropriate attention from the health personnel.	77 (20.3)	140 (36.9)	132 (34.8)	30 (7.9)	2.697	0.882
3. Medical personnel of primary health centers are receptive to civil servants in Kano State.	47 (12.4)	143 (37.7)	158 (41.7)	31 (8.2)	2.544	0.813
4. Services rendered by health personnel meet the needs of Kano State civil servants.	118 (31.1)	146 (38.5)	95 (25.1)	20 (5.3)	2.953	0.879
5. Opportunity for admission are available in Kano State hospitals for civil servants because of the availability of health personnel.	77 (20.3)	123 (32.5)	133 (35.1)	46 (12.1)	2.609	0.943
Aggregate score					2.710	0.863

Table 2 shows the opinion of civil servants on the attitude of health personnel influence on the utilization of the primary health care services within Kano state. The mean 2.646 response of the civil servants implies that, the civil servants in Kano state receive appropriate attention from the health personnel. From the frequency scores, those who agreed that health personnel are effective in their services and who strongly agreed were 39.3% and 17.4% respectively, which is 56.7% of the total respondents. This indicated that the civil servants in the state patronise the primary health care services because of the effective services received from the health workers.

Also, evidence indicated that civil servants in the state confirmed that they received appropriate attention from the health personnel. This could be seen from the mean score of 2.697 on item 2 in the table. The frequency score shows that 20.3% and 36.9% of the respondents strongly agreed and agreed respectively, making a total of 57.2% of the total civil servants who agreed that health personnel were giving appropriate attention to them.

The mean score of 2.544 on item 3, indicated that 12.4% of the respondents strongly agreed and 37.7% agreed making a total of 50.1% of the civil servants in the state who utilised the primary health care centers due to receptive nature of the health workers in the state.

Services rendered by health personnel in Kano State meet the needs of the state civil servants as revealed in the score for item 4. The mean for the item is 2.953 and the frequency scores show that, 31.1% and 38.5% of the respondents strongly agreed and agreed respectively making a total of 69.6%. Therefore, civil servants in the state utilised the public health services because the services are offered based on their needs.

The score for the 5th item shows that some of the public health centers had opportunity for admission of their clients, because of the attitude and availability of the health personnel. The mean score for the item is 2.609 and the frequency score shows that 20.3% and 32.5% of the civil servants strongly agreed and agreed respectively. This gives clear indication that the civil servants utilised the public health services as a result of admission provided for them.

Hypothesis 1: Urban and Rural civil servants in Kano state do not differ in their utilisation of primary health services based on the attitude of health personnel.

Table 2.1: Summary of t-test on influence of primary health care utilisation based on location of the respondents

Location	Mean	Standard Deviation	Standard Error	DF	t-value	P
Urban	2.1049	0.455	0.030	377	3.12	0.002*
Rural	1.9510	0.482	0.040			

Note: DF= degree of freedom, t-critical=1.96, *-denote significant.

The table 2.1 shows that t-value is 3.12 while the critical value is 1.96. The observed level of significance is 0.002 ($P < 0.05$). The null hypothesis is rejected. This indicated that civil servants from urban areas were more influenced in their utilisation of public health services by the attitude of the health personnel than civil servants from rural areas.

Hypothesis 2: Senior and junior civil servants in Kano state are not differ significantly in their utilisation of primary health care services based on the attitude of health personnel.

Table 2.2: Summary of t-test on influence of primary health care utilisation based on status of respondents

Status	Mean	Standard Deviation	Standard Error	DF	t-value	P
Senior	2.0509	0.471	0.028	377	0.270	0.785 NS
Junior	2.0361	0.472	0.046			

Note: DF= degree of freedom, t-critical=1.96, NS denote not significant.

Table 2.2. indicates the opinion of the senior and junior civil servants in Kano state based on the attitude of health personnel in their utilisation of primary health care services. The t-test result shows that the two groups (senior and junior civil servants) were not significantly different from each other in the influence of health personnel attitude on their utilisation of primary health care services. The observed t-value in the table (0.270) is lower than the critical value and the observed significant level is 0.785 ($p > 0.05$). This means the two groups were not significantly different from each other. The null hypothesis is retained.

Hypothesis 3: Male and female civil servants in Kano state do not differ significantly in their utilisation of primary health care services based on attitude of health personnel.

Table 2.3: Summary of t-test on the influence of primary health care services utilisation based on sex of respondents

Sex	Mean	Standard Deviation	Standard Error	DF	t-value	P
Male	2.0509	0.425	0.028	377	0.250	0.802 NS
Female	2.0376	0.517	0.049			

Note: DF= degree of freedom, t-critical=1.96, *-denote not significant.

Table 2.3. reveals that the t-value of (0.250) for comparing the two groups is lower than critical value of 1.96 and the observed level of significance is 0.802 ($p > 0.05$). The null hypothesis is accepted because the two groups did not differ significantly in their utilisation of public healthcare services in the state. This shows that both male and female civil servants were influenced in the same manner in the utilisation of primary health care services.

Discussion of Findings

The result of this study revealed that there is a significant difference between urban and rural civil servants in Kano state in the utilisation of primary health care services based on the attitude of health personnel. This is because the civil

servants from urban areas were more influenced with the attitude of the health personnel than their counter parts from rural areas. This difference may be due to some factors like literacy level, awareness level, cultural factors from the health care users or the manner and attitude of health personnel. This assertion is in line with the finding of Suleiman (2007) who said that, the manner and attitude with which services are offered may affect the utilisation of the health care services provided seriously. It has also been supported by (Hassan, 1999) who revealed that the success of services offered depend on the degree to which it fits the lifestyle and needs of the users.

Civil servants from urban and rural areas as well as senior and junior staff were both influenced in the manner by the attitude of medical personnel in the utilisation of public health facilities. This observation is similar to Kyari (2002), who found that poor attitude of health workers was listed as one of the factors that affects the utilisation of public health services. Similarly, this study agreed with the finding of Poul and Rumsey (2002) and Mrisho, Schellenberg, Mushi, Obrst, Mshinda, Tanner and Schellenberg (2007) which stated that many women reported dissatisfaction with rude, arrogant, and neglectful behaviour at using health care facilities and prefer the care of traditional birth attendants or relative. Furthermore, Katung (2004), found that unfriendly manner of the health care workers was one of the major factors responsible for non-utilisation of health care services and finding was in line with the result of this study.

The result of Manzoor, Hashmi, and Mukhtar (2009) also found that, the reasons for seeking health care from private health facilities include short waiting time, easy accessibility, availability of drugs, adequate staff, better staff attitude and flexible and longer opening hours which corroborates the present study.

Furthermore, Adam and Awunor (2014) findings indicated that perception of poor quality of health service, inaccessibility to health facility and inadequacy of the available services such as inadequate staff, negative attitude by the staff and lack or high cost of drugs were the main determinants of utilisation of health care services. This finding is in agreement with the result of this study which shows that the attitude of health personnel is a factor that influences utilisation of primary health care services among the civil servants in Kano state.

Conclusion

Based on the results and findings of the study, it is hereby concluded that urban and rural civil servants in Kano state differ significantly in their utilisation of primary health care services based on the attitude of health personnel, while senior and junior as well as male and female civil servants in the state did not differ significantly in their utilisation of primary health care services based on the attitude of health personnel.

The outcome of this study led the researcher to recommend that:

1. In order to promote wellness among the civil servants in Kano state, health education campaign need to be intensified among the civil servants especially those working in the rural areas of the state, this will promote positive awareness about health care services utilisation and attitude of civil servants.
2. Training opportunities, workshops and seminars should be organised for the health personnel from time-time so as to improve and maintain their good attitude towards promoting good relationship and wellness of their clients.
3. Kano state government should provide more health personnel and deployed them to the various health facilities in all the forty-four local governments of the state so as to bridge the gap existed between the rural and urban communities.

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