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## FOREWORD

I gratefully welcome our readers and scientific community to the volume 4 issue 1 of Federal Polytechnic – Journal of Pure and Applied Sciences (FEPI-JOPAS). This is a peer reviewed and accredited multi-disciplinary Journal of international repute which publishes short communication, full length research work, critical reviews and other review articles. The aim of FEPI-JOPAS is to provide intellectual bedrock for both indigenous and international scholars with impactful research work to express their research findings to a broader populace for better contribution to knowledge. It is a current and beneficial platform for dissemination of latest research information to 21<sup>st</sup> Century researchers, professionals, policy makers, manufacturers, production staff, R & D personnel as well as governmental and non-governmental agencies.

In addition, basic and applied research efforts at the post covid-19 era must be resourcefully provided through novel contributions to knowledge to cope with the paradigm shift in our world. In this particular issue, you will find that Gabriel and co-workers assessed the nutritional status, food habits and health related quality of life among people living with HIV/AIDS attending Federal Medical Centre, Abeokuta. Owing to their findings, they recommend that effort should be made to increase social support and enhance the implementation of supporting policy in order to improve the quality of life of people living with HIV/AIDS. Also, Ogunyemi examined the effect of public relation practice on the performance of selected establishments in Abeokuta, Ogun State. Based on his finding, he recommends that hoteliers should accord and give cognizance to public relation practice.

Finally, as new research and experience broaden our understanding, changes in research methods, professional practices, or medical treatment may become necessary. I want to sincerely appreciate our laudable efforts of the esteemed Editorial Board members, the Authors and the reviewers and their contributions towards making the production of this edition a worthwhile adventure. It is imperative to know that authors are solely responsible for the information, date and authenticity of data provided in their articles submitted for publication in the Federal Polytechnic Ilaro – Journal of Pure and Applied Sciences (FEPI-JOPAS).

I am looking forward to receiving your manuscripts for the subsequent publications. You can visit our website (<https://www.fepi-jopas.federalpolyilaro.edu.ng>) for more information, or contact us via e-mail at [fepi.jopas@federalpolyilaro.edu.ng](mailto:fepi.jopas@federalpolyilaro.edu.ng)

Thank you and best regards.

**Prof. Olayinka O. AJANI**

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Experimental

## Nutritional Status, Food Habit and Health-Related Quality of Life among People Living with HIV/AIDS (Plwha) “Attending” Federal Medical Centre, Abeokuta

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### Abstract

The study assessed the nutritional status, food habits and health related quality of life among people living with HIV/AIDS attending Federal Medical Centre, Abeokuta. The study was descriptive cross-sectional survey in design involving 168 patients randomly selected from the hospital. A semi-structured questionnaire was utilised to get the socio-demographic information and food habit of the respondents. Nutritional status was determined using BMI and was calculated while results were classified using WHO standard. Data analysis was carried out using Statistical package for social sciences (SPSS v.20.0). Result shows that Meal skipping was common among 38.7% of the respondents and this was attributed to their busy schedule (18.5%). About 48.2% of the respondents had normal nutritional status, while 25.5%, 19.6% and 6.5% were under-weight, over-weight and obese respectively. Also, 63.3% of the respondents had poor quality of life in the general quality of life domain, 50% had good quality of life in the Physical and psychological health domain respectively. Moreso, 54.8% had good quality of life in level of independence domain, while 51.8%, 63.1% and 68.5% had poor quality of life in social relationship domain, environmental and spiritual domains respectively. Effort should be made to increase social support and enhance the implementation of supporting policy in order to improve the quality of life of people living with HIV/AIDS.

**Key words:** Nutritional status, Quality of life, food habit, people living with HIV

### INTRODUCTION

Acquired Immune Deficiency Syndrome (AIDS) is an illness brought about by a retrovirus known as Human Immunodeficiency Virus (HIV) that fights the body immune system cells and predisposes it to infections and diseases (Aishwarya, 2015). HIV epidemic remains a public health challenge of significant importance. Since the inception of the epidemic, about 79.3 million people have been infected, while 36.3 million deaths have been recorded from HIV/AIDS complications, globally (World Health Organization, 2021). Sub-Saharan Africa has been identified to carry a disproportionate burden of the virus, representing 74% of HIV-related deaths in 2013 (Ayesha & Quaraisha, 2016). UNAIDS estimates that in 2020, 20.6 million people and 4.7 million had HIV in Eastern and Southern Africa and Western as well as Central Africa, respectively (Joint United Nations Programme

on HIV/AIDS, 2021). Nigeria has the highest population of people living with HIV/AIDS in the Western and Central Africa region, the second highest worldwide HIV epidemic and the largest proportions of fresh infections in Sub-Saharan Africa (AntiVirus Emergency Response Team, 2021). According to Statista (2022), 1.7 million people in Nigeria were living with HIV in 2020. Ogun state has the most noteworthy predominance of HIV among the states in the South Western zone in Nigeria, estimated at 1.6% (Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS), 2019).

Antiretroviral treatment has moved the view of HIV/AIDS from a deadly to a manageable disease and have improved the Quality of Life (QoL) of individuals living with HIV (Oluwafemi, 2012; Getandale and Teshale, 2019). It is believed that PLWHA, when

treated, have comparable life expectancy to healthy individuals (Popping *et al.*, 2021). However, researches have shown that they have inadequate nutrient intake, compromised nutritional status and poor quality of life (Thapa *et al.*, 2015; Akwiwu, 2018). Studies show that a solid relationship exist between health related QoL and socioeconomic status, and health related indicators in low-income settings (Louwagie *et al.*, 2007; Thapa *et al.*, 2015), but the association between nutritional status and health related QoL is not yet clearly defined (Palermo *et al.*, 2013).

Malnutrition has been identified as a serious threat for people living with HIV/AIDS, because it places demand on nutritional status even at early stages when there are no obvious symptoms of HIV (Gabriel and Adepoju, 2021). Although adequate nutrition is not a cure for HIV infection but it is essential to maintain a protective immune system to sustain optimum nutritional status and quality of life (Aishwarya, 2015). Adequate nutrition can help improve QoL of people living with HIV (Anand *et al.*, 2012). The inability to meet nutritional needs could reduce immunity and increase the susceptibility of individuals to opportunistic infections, which can exacerbate malnutrition (Thapa *et al.*, 2015). People living with HIV/AIDS may suffer loss of appetite, difficulty in eating and reduced or compromised absorption of nutrients (Aishwarya, 2015).

Furthermore, food habits play a crucial role in nutrition. What people eat, why they eat, the time they eat and where they eat affect the overall nutrient intake and ultimately nutritional status (Gabriel and Adepoju, 2019). People living with HIV/AIDS have the tendency to engage in unhealthy dieting, meal skipping, as a result of loss of appetite, difficulty in eating and poor absorption of nutrients (FANTA, 2001). Unhealthy lifestyle such as physical inactivity and poor eating habit have been linked with health-related quality of life (HRQoL) and an individual's nutritional status (Adepoju and Gabriel, 2019). This study is therefore aimed at assessing the nutritional status, food habits and quality of life among people living with HIV/AIDS attending Federal Medical Centre, Abeokuta Ogun state.

## MATERIALS AND METHODS

The research was conducted at the Federal Medical Centre, Abeokuta. Abeokuta is the capital of Ogun state and the biggest urban centre in the state. It is about 90 kilometres from Lagos and 740 kilometres from Abuja, the capital of Nigeria. With a postal code

of 110, Abeokuta has an area of 71Km<sup>2</sup> and a population of 250, 278 at 2006 census. Federal Medical Centre, Abeokuta was established in 21<sup>st</sup> April, 1993 and provides medical services to its host state, and neighbouring states and the nation (<https://fmcabeokuta.net>).

It was a descriptive cross-sectional study involving apparently healthy individuals who were above 18 years, screened, positive to HIV, and also attending the hospital. Those who were under 18 years of age were exempted from the study.

The sample size was determined using Yamane (1967) formula

$$n = \frac{N}{1 + N(e^2)}$$

N=Population size (250)

n = Sample size

e = Acceptable sample error (0.05)

95% confidence level and e=0.05

$$n = \frac{250}{1 + 250(0.05^2)}$$

$$n = \frac{250}{1 + 250(0.0025)}$$

$$n = \frac{250}{1 + 0.625}$$

$$n = \frac{250}{1.625}$$

$$n = 153.85 = 154$$

Ten percent (10%) was added to account for attrition which made the sample size 170. However, two (2) of the respondents discontinued with the study which brought the sample size to 168.

A semi- structured questionnaire was used to collect data on the socio-demographic characteristics and food habits of the respondents. Anthropometric measurements such as body weight and height of the respondents were measured. Weight of the respondents was measured using SECA weighing scale with both arms by the sides, without shoes and cap, and with only light clothe on. The pointer of the scale was adjusted to zero before each measurement was taken, and recorded to the nearest kilogram. The height was taken with the participant heels, buttocks and scapular touching the height stick and looking straight. The height was measured while standing with the head fixed against the meter and recorded to the nearest meter. The Body Mass Index (BMI) was calculated and compared with the reference standard.



Data on the health-related quality of life (HRQoL) of respondents were obtained using WHOQoL-BREF and WHOQoL-HIV BREF instrument. The WHO-QoL-HIV BREF tool has domain scores and comprises 31 questions. Each question was evaluated on a 5-point Likert scale. One (1) indicates low negative perception while 5 shows high positive perceptions. Most of the domain scores are scaled in a positive direction where higher scores indicate higher quality of life, while seven (7) facets, which are question 3, 4, 5, 8, 9, 10, 31 are not scaled in a positive direction, that is, for those facets, higher scores do not indicate higher quality of life. Those facets were re-coded in a positive direction accordingly, so that high scores reflect higher quality of life. The six domains of QoL entail physical health, psychological health, level of independence, social relationship, environmental health, as well as spiritual health. The first two questions of WHO-QoL-HIV BREF examine the general quality of life (Getandale & Teshale, 2019). The questionnaires were administered by 2 nurses under training and with the assistance of a dietitian. The questions were translated into local (Yoruba) language which was 26 questions on QoL-BREF (Akinpelu, 2006). The other 5 questions present in QOLHIV-BREF but not on QOLBREF were translated by the researchers.

The quality-of-life questionnaire was scored and categorized according to the method described by Gebremichael, Hadush, Kebede, & Zegeye (2018). In order to identify predictors of QoL, the respondents were separated into two groups based on the mean score of the facet; “overall quality of life and general health perceptions” (range 1 to 5), a respondent with a mean score > 3.0 was categorised as having good quality of life, while the one with a mean score ≤ 3.0 is said to have poor QoL. Based on the “domain mean” (range 4-20) since mean scores multiplied by four make domain scores comparable with the scores in the WHOQoL-100, respondents with mean score >12.0 were categorised as having good QoL and the ones with mean score of ≤ 12.0 as having poor QOL.

This study was approved by the Health and Ethics Committee of the Federal Medical Centre, Abeokuta with a Protocol number: FMCA/479/HREC/01/2020/18. The patients were briefed about the objectives of the study and informed consent was taken from all the respondents prior to data collection. Absolute confidentiality was ensured during data collection, as name and address of the respondents were not captured in the questionnaire.

### **Statistical analysis**

The data obtained from the study was subjected to descriptive and inferential statistic using statistical package for social sciences (SPSS V.20.0). Descriptive statistics such as frequency, percentage, mean and standard deviation was used. Inferential statistics (chi-square) was used to determine the association between the categorical variables and the difference between means was determined using analysis of variance (ANOVA).

## **RESULTS AND DISCUSSION**

### **Results:**

Socio-demographic and economic characteristics of the respondents as presented in Table 1 shows that a great fraction of the participants (54.8%) was female of Yoruba descent (57.1%) and within the age range of 29-39 years. Half (50%) of them were Christians and more than half (55.4%) of them came from polygamous homes. Also, majority of the participants (41.1%) were married while 25.6% of them were single. Moreso, 10.7%, 14.3% and 7.7% of the respondents were cohabiting, divorced and widowed respectively. The result also shows that majority of the respondents (26.8%) had secondary education, self-employed (40%) and earned above ₦20, 000 monthly (35.1%).

**Table 1: Socio-demographic and economic characteristics of the respondents**

<b>Variables</b>	<b>Categorization</b>	<b>Frequency (N=168)</b>	<b>Percentage (%)</b>
<b>Sex</b>			
	Male	76	45.2
	Female	92	54.8
<b>Age</b>			
	18 - 28 years	40	23.8
	29 - 39 years	55	32.7
	40 - 50 years	41	24.4
	50 years and above	31	18.5
	No response	1	0.6
<b>Ethnic group</b>			
	Yoruba	96	57.1
	Igbo	40	23.8
	Hausa	23	16.1
	Igala	1	0.6
	Tiv	2	1.2
	Urhobo	1	0.6
	Nupe	1	0.6
<b>Religion</b>			
	Christianity	84	50
	Islam	62	36.9
	Traditional	20	11.9
	No religion	2	1.2
<b>Family Structure</b>			
	Monogamy	74	44.0
	Polygamy	93	55.4

No response	1	6
<b>Type of family</b>		
Nuclear	81	48.2
Extended	68	40.5
Joint family	19	11.3
<b>Marital status</b>		
Single	43	25.6
Married	69	41.1
Cohabiting	18	10.7
Divorced	24	14.3
Widowed	13	7.7
No response	1	6
<b>Highest educational level</b>		
No education	20	11.9
Primary education	25	14.9
Secondary education	45	26.8
NCE/OND	41	19.0
HND/B.Sc	32	19.0
M.Sc	5	3.0
<b>Present Occupation</b>		
Retired	11	6.5
Self Employed	74	44.0
Farming	17	10.1
Civil Servant	18	10.7
Petty Trading	27	16.1
Employees of private organization	12	7.1
Can no longer work for money	7	4.2
No response	2	1.2
<b>Estimated monthly income</b>		

₦1000-5000	12	7.1
₦6000-10000	31	18.5
₦11000-15000	39	23.2
₦16000-20000	26	15.5
₦20000 above	59	35.1
No response	1	0.6

Furthermore, the food habit of people living with HIV/AIDS attending Federal Medical Centre, Abeokuta is presented in Table 2. The result show that 53.6% of the respondents ate 3 times daily, 37.5% ate 2 times daily, 6.5% ate more than 3 times a day, while few (2.4%) did eat once daily. Skipping of meal was observed among less than half (38.7%) of them and the meal usually skipped was lunch. This meal skipping was attributed to busy schedules (18.5%). Moreover, a larger proportion (78.6%) of them ate in-between meals (snacks), and pastries was the usual snacks (45.8%). The result also shows that majority of them (67.9%) patronised food vendors and the meal usually bought from vendors was lunch (41.5%). Majority of the respondents (74.4%) reported that they did not smoke and more than half of them (53%) do take alcohol. Conversely, 25.6% of the respondents said they do smoke while 46.4% took alcohol.

**Table 2: Food habit of the respondents**

Variables	Categorization	Frequency N=168	Percentage (%)
How many times do you eat in a day?			
	Once	4	2.4
	Twice	63	37.5
	Thrice	90	53.6
	More than thrice	11	6.5
Do you skip meals?			
	Yes	65	38.7
	No	101	60.1
	No response	2	1.2
If yes, state the meal usually skipped?			
	Breakfast	14	8.3
	Lunch	34	20.2

	Dinner	11	6.5
	No response	8	4.8
	Not applicable	101	60.1
What is the reason for skipping meal?			
	Busy schedules	31	18.5
	Tooth pain	6	3.6
	Tiredness	3	1.8
	No appetite	9	5.4
	No response	18	10.7
	Not applicable	101	60.1
Do you take breakfast?			
	Yes	152	90.5
	No	15	8.9
What time do you take breakfast?			
	6-7am	28	16.7
	7.01-8am	76	45.2
	8.01-9am	30	17.9
	9.01-10am	17	10.1
	Other times	2	1.2
	No response	1	0.6
	Not applicable	14	8.3
Do you take lunch?			
	Yes	134	79.8
	No	34	20.2
What time do you take lunch?			
	12.00-1.00pm	23	13.7
	1.01-2.00pm	47	28.0
	2.01-3.00pm	48	28.6
	3.01-4.00pm	14	8.3

	Others	1	0.6
	No response	1	0.6
	Not applicable	34	20.2
Do you take dinner?			
	Yes	154	91.7
	No	14	8.3
What time do you usually take dinner?			
	6.00-7.00pm	19	11.3
	7.01-8.00pm	46	27.4
	8.01-9.00pm	55	32.7
	9.01-10.00pm	26	15.5
	Above 10.00pm	8	4.8
	No response	1	0.6
	Not applicable	13	7.7
Do you eat in between meals?			
	Yes	132	78.6
	No	36	21.4
If yes, What did you usually take?			
	Fruits/vegetables	37	22.0
	Pastries	77	45.8
	Soft drinks	10	6.0
	Others	5	3.0
	No response	4	2.4
	Not applicable	35	20.8
If no, why?			
	No reason	8	4.8
	Lack of fund	20	11.9
	Watching weight	9	5.4

	No response	3	1.8
	Not applicable	128	76.2
Do you buy food from vendors?			
	Yes	114	67.9
	No	54	32.1
If yes, how often?			
	Everyday	10	6.0
	Frequently	40	23.8
	Occasionally	64	38.1
	No response	1	0.6
	Not applicable	53	31.5
Which meal do you usually buy from vendors?			
	Breakfast	19	11.3
	Lunch	69	41.1
	Dinner	25	14.9
	No response	2	1.2
	Not applicable	53	31.5
Do you prefer meals from vendors to your family diet?			
	Yes	31	18.5
	No	136	81.0
	No response	1	0.6
How often do you prepare meal in your house?			
	Everyday	105	62.5
	Frequently	47	28.0
	Occasionally	16	9.5
Do you smoke?			
	Yes	43	25.6
	No	125	74.4

If yes, how often do you smoke?			
	Once	17	10.1
	Twice	12	7.1
	More than twice	12	17.1
	No response	2	1.2
	Not applicable	125	74.4
Do you take alcohol?			
	Yes	78	46.4
	No	89	53.0
	No response	1	0.6

Table 3 shows the anthropometry measurement of the study participants. The male respondents had the mean weight, height and body mass index (BMI) of  $70.804 \pm 11.02\text{kg}$ ,  $1.7689 \pm 0.12\text{m}$ , and  $22.936 \pm 4.68\text{kg/m}^2$  respectively, while the females had mean weight of  $68.617 \pm 16.36\text{kg}$ , height of  $1.7632 \pm 0.12\text{m}$ , and body mass index of  $22.201 \pm 5.43\text{kg/m}^2$  respectively. Also, no significant different ( $p > 0.05$ ) was observed between the mean weight, height and body mass index of the respondents.

**Table 3: Anthropometry measurement of the respondents**

Sex	Weight (kg)	Height (m)	BMI(kg/m <sup>2</sup> )
<b>Male</b>	70.80±11.02	1.77±0.12	22.94±4.68
<b>Female</b>	68.62±16.36	1.76±0.12	22.20±5.43
<b>f</b>	0.99	0.09	0.86
p-value	0.32	0.76	0.36

\*significant at  $p < 0.05$

The nutritional status of the respondents as assessed by BMI is presented in Figure 1. It reveals that almost half (48.2%) had normal nutritional status, 25.5% of them were underweight, while 19.6% and 6.5% were overweight and obese.



Figure 1

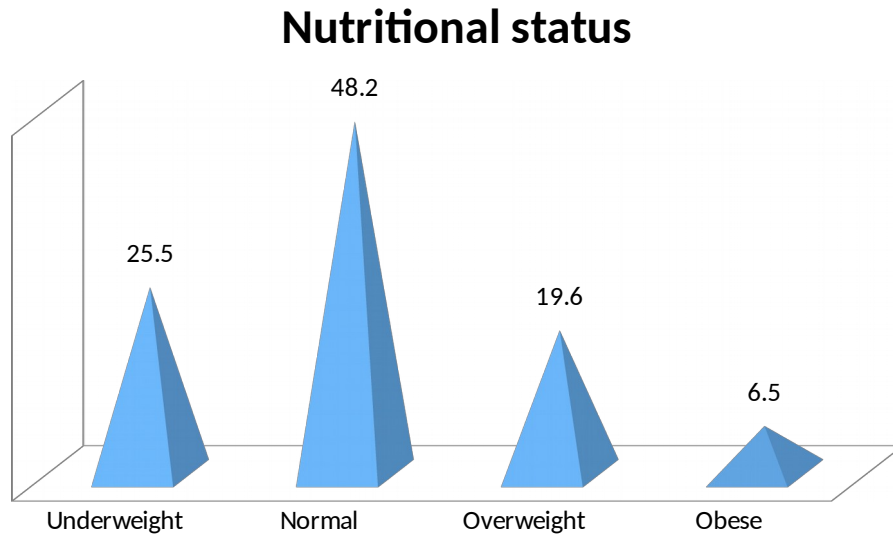


Table 4 shows the respondent’s quality of life which was divided into 6 domains. Majority of the respondents (63.7%) had poor quality of life in the general quality of life domain, while half of the respondents (50%) had good quality of life in the Physical health and psychological health domain respectively. More than half of the respondents (54.8%) had good quality of life in the Level of independence domain, while majority of the respondents had poor quality of life in social relationship (51.8%, Environmental domain (63.1%) and spiritual/religion (68.5%) respectively.

Table 4: Quality of life of the respondents

	Good (%)	Poor (%)
General QoL	61(36.3)	107(63.7)
Physical Health	84(50)	84(50)
Psychological health	84(50)	84(50)
Level of independence	92(54.8)	76(45.2)
Social relationship	81(48.2)	87(51.8)
Environmental domain	62(36.9)	106(63.1)
Spirituality/religion	53(31.5)	115(68.5)

Significant association ( $p > 0.05$ ) was observed between the nutritional status and food habit of the respondents except reason for meal skipping and snacking as presented in table 4.

**Table 5: Association between nutritional status and food habit of the respondents.**

Food habit	$\chi^2$	Df	p-value
Number of meal consumed per day	20.714	9	0.01*
Frequency of meal skipping	19.782	12	0.05*
Reasons for meal skipping	17.661	15	0.28
Snacking	1.909	3	0.59
Food vendor patronage	7.770	3	0.05*
Frequency of food vendor patronage	22.724	12	0.03*
Smoking	17.610	3	0.00*
Alcohol consumption	17.664	12	0.00*

\*significant at  $p < 0.05$

## DISCUSSION

The study was aimed at assessing nutritional status, food habit and health related quality of life of people living with HIV/AIDS attending Federal Medical Centre, Abeokuta. In this study, there were more female cases than male, this might be due to high HIV/AIDS prevalence among females than males which is in consonance with several studies (Mahathir, 1997; Aishwarya, 2015; Otuneye *et al.*, 2017; AVERT, 2019; UNAIDS, 2020). According to UNAIDS (2020), young females who are between 15 – 24 years of age in sub-Saharan Africa are twofold more likely to be living with HIV than men. Women especially adolescent girls are more vulnerable to HIV due to many factors which include unequal cultural and socio-economic status, lack of access to healthcare, poverty, lack of access to education, sugar daddy culture and transactional sex and child marriage (AVERT, 2019). The educational levels show that most of the respondents are educated and believed to have certain degree knowledge about HIV. Education has been acknowledged to be a social determinant of health and also a social vaccine against contracting HIV/AIDS (McGill, 2016; Leon *et al.*, 2017). This high prevalence of HIV among educated individuals suggests that there is likely disregard or refusal to adopt the ABC rules concerning the prevention of HIV which are Abstinence, Being faithful to one’s sexual partner and

the use of Condom. However, findings of Odimayo *et al.* (2010) who reported that persons with primary and no level of education are more vulnerable. Majority of the respondents are married. It is tempting to say that most of the transmission of the virus may be by heterosexual contacts and not dominated by other means such as the use of infested tools, blood transfusion amongst others. This is in consonance with the research carried out by Laah and Ayiwulu (2010) on the socio-demographic characteristics of patients screened for HIV/AIDS in Eggon, Nasarawa state, Nigeria. They reported that 60.3% of the patients diagnosed with HIV/AIDS were married people. Also, most of the study participants fell within the age range of 29-39 years, practiced Christian religion, belonged to Yoruba ethnic group and earned above ₦20000 monthly.

“Quality of life refers to the degree of excellence in a person’s life at any given period that contributes to satisfaction and happiness of the person and benefits society” (Oguntibeju, 2012). This study showed that majority (63.7%) of PLWHA had poor quality of life score in general and in all other domains of health-related quality of life except level of independence, physical health and psychological health. This is contrary to the finding of Getandale and Teshale (2019) in a study

conducted in Ethiopia and that of Venter *et al.* (2009) in a study conducted among HIV/AIDS patients in South Africa. They reported high proportion of good quality of life among people living with HIV. This disparity may be due to differences in socio-demographic and economic characteristics, study design and clinical status of the respondents (Getandale and Teshale, 2019). How long an individual is infected with HIV can also affect the quality of life. De Carvalho, Policarpo and Moreira (2017) attributed the better QoL outcomes in their study to the recency in diagnosis of HIV among their patients.

Among the respondents, the best health related QoL was observed in the domains related to level of independence, physical health and psychological health. This finding is contrary to Ethiopian study (Getandale & Teshale, 2019) which observed best QoL in the dimensions related to social relationship and spirituality. This finding is in line with Nigerian study (Folasire, *et al.*, 2012). The high level of independence is suggestive of the fact that majority of the respondents were below 50 years of age. The level of independence domain measures aspects such as mobility, activities of daily living, dependence on medication and work capacity. The lower scores in the social and environmental domain may be a reflection of the discrimination and stigmatisation that PLWH experience in developing countries, including Nigeria (Folasire *et al.*, 2012).

Nutritional and dietary practices play an important role in the rapid progression of HIV. These aspects are key factors in evaluating the quality of life among PLWHA (Enwereji, *et al.*, 2019). This study found that 53.7% of the respondents consumed at least three meals in a day, with the rest consuming two meals or less a day. Not eating enough food will lead to a lower nutrient intake that matches the increased nutrient demands for PLWHA. In a study conducted among HIV patients in India, Aishwarya (2015) found food/nutrient intake of the respondents to be lower than the recommended dietary allowance. Meal skipping was observed among less than half (38.7%) of the respondents, and the meal usually skipped was lunch. This meal skipping was attributed to busy schedules. In order to maintain an optimum nutritional status that will boost the immune system, people living with HIV/AIDS are expected to eat smaller portion of food more frequently throughout the day, eat healthful in-between meals (snacks) to increase nutrient intake, and consume variety of foods that will supply all the nutrients the body needs (USAID, 2001).

Furthermore, majority of the respondents had normal BMI while few of the respondents were found to be obese. Co-existence of underweight and overweight was also observed among the respondents. The prevalence of

overweight and obesity observed in this study was lower than that reported by Khatri *et al.* (2020) in a study conducted in Nepal on nutritional status and its associated factors among people living with HIV. In a similar study, Thapa *et al.* (2015) reported higher normal nutritional status; and the proportion of underweight is lower than the present study.

## CONCLUSION

High prevalence of underweight (25.5%) which co-exist with overweight and obesity was observed among the study participants and was found to be significantly associated with their food habit. A larger proportion of the respondents had poor general HRQOL and in all domains of quality of life except for level of independence and physical and psychological domain. Effort should be made to increase social support and enhance the implementation of supporting policy in other to improve the quality of life of people living with HIV/AIDS. Also, the inclusion of nutrition education in the management of HIV/AIDS will help improve nutrient intake and nutritional status.

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Experimental

## Effect of Public Relations Practice on the Performance of Two Selected Hotels in Abeokuta, Ogun State

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### Abstract

*The study examined the effect of public relation practice on the performance of selected establishments in Abeokuta, Ogun State. A Well-structured questionnaire were administered to eighty (80) staff of the selected hotels who are the research respondents in order to gather data from them. A convenient sampling technique method was used in arriving at the number of respondents used for study. Eighty (80) questionnaires were administered and all were retrieved. The data gathered were analyzed using a simple descriptive statistical tool. It was shown that public relation practice has significant effect on the performance of the two selected establishments under review. The Cross-tab statistics was used to estimate the relationship between demographic characteristics and public relation which was concluded that they have no significant relationship. Chi-Square Test was also used to determine the significant relationship stated in the hypotheses. It was established that public relation has a significant effect on customer patronage and also that it has a significant relationship with image promotion of the hotel. Finally, it was observed that there was no significant relationship between public relation and competitive strength of the hotels. The study concluded that public relation practice has positive effects on patronage and image of the two selected hotels, but, has no significant effect on the competitive strength of the hotels. It was recommended that hoteliers should accord and give cognizance to public relation practice.*

**Keywords:** Customer Satisfaction, Performance, Public Relation, Relationship.

### INTRODUCTION

Public relation practice is veritable and vital tool or element in gaining the public consciousness and creating awareness, they form a tactical approach and influence on the opinions of people and thus change their behavioural patterns and create new channels and opportunities for sales. As a result of the popularity and tremendous increase in the use of Social Media, Public Relations experts have added relevance of bloggers to the list of media interest, in a move that seeks to take views about their customers products and services. In addition, public relations practice also provides other forms of coverage and image enhancement of an organization. For workers, in the hospitality industry, they love to talk about the merits of this effect, there should also be a Public Relations' officer in order to

improve the Company Image, as it has become urgent, especially in the era of globalization. Reaweh&Oses (2015) "Public relations has become a viable and fundamental tool in promoting and advancing the fortune and course of the hotel industry (Grunig&Grunig, 2009). There is an increasing and growing consensus among industry scholars and practitioners that public relations should move beyond its technical roles to one that contributes to strategic management. Public relations influence and are also influenced by diverse factors within the environment. Specific problems and issues, along with different publics arise and recede around organizations especially international hotels that face many challenges globally.

Increasing globalization coupled with the rapid development of media and technology, has led to a situation that nobody could accurately envisaged or predict. The cyberspace has become a primary platform for the public to meet via internet for communication; it has given the people opportunities to speak out. All the same, this electronic medium has become a good platform to discuss problems and issues as soon as they arise. For instance, when customer carry out enquiries on booking of hotel facilities, they can visit site to make complaint or look for chat rooms and discussion groups to converse with other people who have similar complaints and issues. Advancement in technologies have narrowed the gap among nations and enhanced communication (Aaker&Myers, 2011).

Public relations (PR) is defined as a set of communication techniques which are designed to create and maintain favourable relations between an organization and its publics (Jefkins, 2008). As cited by Nwaeze&Ujah (2014), the Institute of Public Relations (UK) defines public relations (PR) as a deliberate, planned and sustained effort to establish and maintain mutual understanding between an organization and its public. Public Relations is a form of communication that well supports and adapts to a company's various advertising components. As much as it works to strengthen these components, there is also one obvious difference between advertising and public relations. Advertising controls the overall message with visibility while public relations reach in and provides the advertising message with credibility and trust. Public relation according to Nwaeze&Ujah (2014), is the activities of a corporation, union, government or other organizations in building and maintaining sound and productive relations with special public such as customers, employees, stakeholders and with the public at large so as to adapt itself to its environment and interpret itself to the society. Its main aim is to secure mutual understanding between the organization and its public and thus create goodwill. Public relations is an integral and important part of the promotional mix of a firm (Kotler & Armstrong, 2009). Public relations as a promotional tool has gained importance in recent times and is also perceived as both cost effective and highly credible (Williams, 2008; Kitchen & Pappasolomou, 2007). Promotion is used by organizations to communicate

with customers regarding their product offerings and also to ensure that customers are aware of the available products (Rowley, 2008). Promotion according to Kotler (2009), is a communication activity used to inform, persuade or remind the target market about the availability and benefits of a product. It covers all communication tools that can deliver a message to a target audience.

Rossiter& Percy (2007) posit that promotion aims at stimulating a purchase. Promotion is seen as a direct form of persuasion based on external incentives rather than inherent product benefits.

#### Roles of public relations management

Public relations make an important contribution in helping to form an organization's ideology on what the public want and expect from certain things. Communication management is a basic and vital strategies used in public relations to identify the target audience and to give messages to the general public. The public relations roles call for advancing communications goals that are consistent with the organization's overall aim Bryman (2008).

Issues management: This involves identifying problems, issues and trends relevant to the organization and then developing and executing a program to deal with them. This also includes the study of public policy matters of concern to the organization. (Hutton, 2009). Public relation play a strategic roles in marketing management which includes product publicity, product placement, third party endorsement, use of spokespersons, participation in trade exhibitions, and cause related marketing (Jackson,2007).Relationship management entails the role of public relations in identifying key public and establishing strategies for building and maintaining mutually beneficial relationships with those publics. (Jounghiwa & Yoohyeung, 2009).

Image management involves planning and carrying out of policies, procedures and strategies that show the commitment of the organization to public and social responsibilities Gray & Balmer (2008).Risk management involves making the organization recognize areas of potential danger so that needed changes can be effected before potential threat

develops into crisis. Strategic management helps the management team to develop sound policies that are in the best interests of the public as well as the organization. Worcester (2017). Public relations professionals present the face of an organization usually to articulate its objectives and official views on issues of relevance, vital to the media. Public relations activity contributes to the way an organization is perceived by influencing the media and maintaining relationships with stakeholders. Charles (2013)

### **Statement of the Problem**

Public relations in all ramifications including reputation building and management is crucial for any organization especially one that seeks profit maximization. However, despite the widely acknowledged enormous roles of public relations in hotel industry, they focus on marketing practice to maximize sales rather than public relation practice. In the hospitality sector of Nigeria, public relation is not properly treated as a management tool and function. In all the organizations in Nigeria, there is no or little room for public relations experts or professionals on the Board of Directors (Charles, 2013). This situation deprives the organizations of the advantages of having public relations input in the policy formulation stage, where it is most crucial. A public relations department will only be as useful to management as the managers want it to be. If management thinks of the public relations functions in a small way, then it will occupy a minor place in the scheme of things and its contributions would be inconsequential indeed, this is the one of the matters as it raises the question of the level of consideration the public relations is presenting.

### **Objective of the Study**

This study examined the contribution of public relation practice to the two selected hotels in Abeokuta, Ogun State by Investigating the impact of public relations practice on customer patronage of the hotels, determined the roles of public relation in promoting the image of the hotels and. examined the effects of public relation practice on competitive strength of the hotels.

### **Research H ypotheses**

H<sub>01</sub>: Public relation has no significant effect on customer patronage in hotel

H<sub>02</sub>: There is no relationship between public relation and image promotion of a hotel

H<sub>03</sub>: There is no significant relationship between public relation practice and competitive strength of the hotel.

## **MATERIALS AND METHODOLOGY**

### **Study Area**

Abeokuta lies below the Olumo Rock, home to several caves and shrines. The town depends on the Oyan River Dam for its water supply. The dam is situated in the Abeokuta North local government area of Ogun State in the West of Nigeria. The dam crosses the Oyan River, a tributary of the Ogun River. Abeokuta metropolis is the capital of Ogun State and seat of the Ogun State government. The city is the homes of the Egbas who are major tribe in the Western Part of Nideria. The Ake is the traditional residence of the Alake, the traditional and paramount ruler of the Egba people.

### **Green Legacy Resort**

The green legacy was established in 2013 by the former president Olusegun Obasanjo. It is located near Olusegun Obasanjo presidential Library Complex along the presidential boulevard way, NNPC Bus stop, Oke-Mosan, Abeokuta, Ogun State. The luxurious 4-star resort offers breathtaking scenery with world class facilities over a large expanse of land. The resort have 250 staff and 120 rooms that come in the categories of standard rooms, Deluxe, Easter package., family connecting room standard suite and the Ambassadorial suite. The Green legacy Resorts offer a wide variety of top class hospitality facilities

### **Daktad Suites**

Daktad Suites was established in the year 2010 by honorable Habeeb Ajayi. It is located at Majek Kembo close, off Quarry Road (post office), Ibara, Abeokuta, Ogun State. It is close to the Nigerian postal service



office in Abeokuta. Daktad suite has 35 staff and 47 rooms that are grouped into the exclusive rooms, classic rooms, elegance Room, Deluxe room, Royal Double, Executive mini-suite, VIP rooms and presidential suites Facilities at Daktad suites include an event hall, ample car parking space, regular power supply, restaurant with an array of excellent tasting dishes plus complimentary breakfast service, a bar, a swimming pool and gym facilities.

#### Research Population

The population of this study were staff of the two selected hotels, that is, Green Legacy Resort and Darktard Suites.

#### Sample Size and technique

A total number of 80(eighty) respondents who were staff of the two establishments were selected using a convenient sampling technique.

#### Research Instrument

A well-structured questionnaire was administered to the respondents to gather data from them.

#### Data Collection

Data were collected from both primary and secondary sources for the purpose of this study

#### Data Analysis

Data collected were analyzed using simple descriptive statistical analysis, that is, frequency and percentage; Chi-square was used to test the hypotheses.

**RESULTS AND DISCUSSION**

TABLE 1: Socio-economic characteristics of the respondents

Source: Field Survey, 2018

**Table 1: Socio-demographic and economic characteristics of the respondents**

Variables	Frequency	Percentages(%)
Gender		
Male	46	57.5
Female	34	42.5
Total	80	100.0
Age		
18 – 30	33	41.25
31 – 40	27	33.75
41 – 50	20	25.0
Total	80	100.0
Marital Status		
Single	46	57.5
Married	30	37.5
Divorce	4	5.0
Total	80	100.0
Educational Background		
SSCE	22	27.5
NCE/OND	33	41.3
BSC/HND	14	17.5
MSC/PHD	11	13.8
Total	80	100.0
Department		
Front Office	30	37.5
Beverage	22	27.5
House Keeping	10	12.5
Maintenance	10	12.5
Security	8	10.0
Total	80	100.0
Length of Service		
0 – 5years	36	45.0
6 – 10years	22	25.5
11 – 20years	9	11.3
21 – 30years	12	15.0
Above 31years	1	1.2
Total	80	100.0
Religion		
Muslim	29	36.3
Christian	50	62.5

Others	1	1.2
Total	80	100.0
Position in the Organization		
Supervisor	25	31.3
Junior Staff	19	23.8
Manager	21	26.3
Waiter	15	18.8
Total	80	100.0

**Discussion of Findings**

**Gender**

Table 1: showed that 46 respondents which represent 57.5% of the total population are males, while 34 respondents which represent 42.5% of the total population are females.

**Age**

Thirty-three (33) respondents who constitute 41.25% of the total population were between the age ranges of 18-30 years, 27 respondents represent 33.75% of the total population were between the age range 31-40 years, 20 respondents represent 25.0% of the total population were between the age range of 41-50 years. It can therefore be deducted that, respondents between the ages of 18-30 years responded more to questionnaire compared to others.

**Marital Status**

Forty-six (46) respondents who represent 57.5% of the total population are single, 30 respondent which represent 37.5% of the total population are married, 4 respondent which represent 5.0% of the population are divorced, it can therefore be deducted that single respondent are more than the others.

**Educational background**

Twenty-two (22) respondents who represent 27.5% of the total population have SSCE, 33 respondents represent 41.25% of the total population have NCE/OND, 14

respondents represent 17.5% of the total population have BSC/HND, only 11 respondents represent 13.8% of the total population have MSC/PHD holder.

**Department**

Thirty (30) respondents who represent 37.5% of the total population work in front office, 22 respondents represent 27.5% of the total population work in beverage department, 10 respondents represent 12.5% of the total population work in house-keeping department, 10 respondents represent 12.5% of the total population work in maintenance department while 8 respondents represent 10.0% of the total population work in security department.

**Length of service**

Thirty-six (36) respondents who represent 45.0% of the total population have worked for 0-5 years, 22 respondents represent 27.5% of the total population have worked for 6-10 years, 9 respondents represent 11.3% of the total population have worked for 11-20 years, 12 respondents represent 15.0% of the total population have worked for 21-30 years while 1 respondent represent 1.3% of the total population. The table shows that majority of the respondent working in the hotel have year experience of 0-5 years.

**Religion**

The table above showed that 36.3 of the respondents are Muslim, 62.5% of them are Christian while the remaining 1.2% of the respondents are others.

**Table 2:** Effects of public relation on customer patronage

Variables	Frequency	Percentage (%)
Does public relation increase Customers patronage		
Yes	78	97.5
No	2	2.5
Total	80	100.0
Is public relation practice compulsory To every growth in your hotel		
Yes	45	56.3
No	35	43.8
Total	80	100.0
Does public relation promote the Image of hotel		
Yes	59	73.8
No	21	26.2
Total	80	100.0
Public relation practice by a hotel Increase their competitive strength		
Yes	34	42.5
No	46	57.5
Total	80	100.0
Does effective public relation practice give your hotel a competitive strength in the hospitality industry		
Yes	43	53.8
No	37	46.2
Total	80	100.0
Public relation practice increase Customer awareness of the hotel		
Yes	52	65.0
No	28	35.0
Total	80	100.0
Are you satisfied with the service Rendered by the hotel		
Yes	75	93.8
No	5	6.2
Total	80	100.0

**Discussion of Findings**

Does public relation increase customers’ patronage?

The table2 above shows that 78 of the respondents representing 97.5% responded YES that public relation increase customer patronage while 2 of them representing 2.5% responded NO.

Is public relation practice compulsory to every growth in your hotel?

This table above shows that 45 of the respondents representing 56.2% responded YES that public relation practice is compulsory to every growth in their hotel while 35 of them representing 43.8% responded NO.

Does public relation promote the image of hotel?

The table2: show that 59 of the respondents representing 73.8% responded YES that public relation promotes the image of the hotel while 21 of them representing 26.2% responded NO.

Public relation practice by a hotel increases their competitive strength?

This table above shows that 34 of the respondents representing 42.5% responded YES that public relation

practice by a hotel increases their competitive strength while 46 of them representing 57.5% responded NO.

Does effective public relation practice give your hotel a competitive strength in the hospitality industry?

This table above shows that 43 of the respondents representing 53.8% responded YES that effective public relation practice gives their hotel a competitive strength in the hospitality industry while 37 of them representing 46.2% responded NO.

Public relation practice increases customer awareness of the hotel?

This table above shows that 52 of the respondents representing 65.0% responded YES that public relation practice increases customer awareness of the hotel while 28 of them representing 35.0% responded NO

Are you satisfied with the services rendered by the hotel?

This table above shows that 75 of the respondents representing 93.8% responded YES that they are satisfied with the services rendered by the hotel while 5 of them representing 6.2% responded

m<sup>2</sup> respectively. Also, no significant different (p>0.05) was observed between the mean weight, height and body mass index of the respondents.

**Table 3:** The impact of public relation practice in promoting the image of the hotel.

Variables	Frequency	Percentage %
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Public relation practice is the best techniques for advertising hotels services and products		
Strongly Agree	66	82.5
Agree	11	13.8
Undecided	21	2.5
Disagree	1	1.3
Total	80	100.0
Public relation can be used as a promotional tool to attract new and distance customer to hotel business in Abeokuta.		
Strongly Agree	43	53.8
Agree	25	31.3
Undecided	9	11.3
Disagree	3	3.8
Total	80	100.0
Organization image of hotel industry can be improved through effective application of public relation practice		
Strongly Agree	43	53.8
Agree	16	20.0
Undecided	16	20.0
Disagree	5	6.3
Total	80	100.0
Hotel can get good public opinion on their product through an effective public relation practice.		
Strongly Agree		
Agree		
Undecided	34	42.5
Disagree	18	22.5
Strongly Disagree	17	21.3
Total	10	12.5
	1	1.3
Effective public relation practice assist the hotel cultivating a mutual and cordial relationship with customer.	80	100.0
Strongly Agree		
Agree		
Undecided	25	31.3
Disagree	16	20.0
Strongly Disagree	18	22.5
Total	15	18.8
	6	7.5
	80	100.0
Public relation practice is crucial to attainment of organization objectives.		
Strongly Agree		
Agree		

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Public relation practice is the best techniques for advertising hotels services and products.

Table 3 indicates that 82.5% of the respondents strongly agree that public relation practice is the best technique for advertising hotels services and product, 13.8% agree that public relation practice is the best technique for advertising hotels services and product, 2.5% of the respondents were undecided if public relation practice is the best technique for advertising hotels services and product and 1.3% of respondents disagree that public relation practice is the best technique for advertising hotels services and product.

Public relation can be used as a promotional tool to attract new and distant customer to hotel business in Abeokuta.

This table indicates that 53.8% of the respondents strongly agree that public relation practice can be used as a promotional tools to attract new and distant customer to hotel business in Abeokuta, 31.3% of the respondents agree that public relation practice can be used as a promotional tools to attract new and distant customer to hotel business in Abeokuta, 11.3% were undecided if public relation practice can be used as a promotional tools to attract new and distant customer to hotel business in Abeokuta while 3.8% of the respondents disagree that public relation practice can be used as a promotional tools to attract new and distant customer to hotel business in Abeokuta.

Organization image of hotel industry can be improved through effective application of public relation practice.

This table above shows that 53.8% of the respondents strongly agree that organizational image of hotel industry can be improved through effective application of public relation practice, 20.0% agree that organizational image of hotel industry can be improved through effective application of public relation practice, another 20.0% were undecided if organizational image of hotel industry can be improved through effective application of public relation practice while 6.3% disagree that organizational image of hotel industry can be improved through effective application of public relation practice.

Hotel can get good public opinion on their product through an effective public relation practice.

This table shows that 42.5% of the respondents strongly agree that hotels can get good public opinion on their product through an effective public relation practice,

22.5% agree that hotels can get good public opinion on their product through an effective public relation practice, 21.3% were undecided if hotels can get good public opinion on their product through an effective public relation practice, 12.5% disagree that hotels can get good public opinion on their product through an effective public relation practice while 1.3% strongly disagree that hotels can get good public opinion on their product through an effective public relation practice.

Effective public relation practice assist the hotel cultivating a mutual and cordial relationship with customer.

This table above shows that 31.3% of the respondents strongly agree that effective public relation practice assist the hotel in cultivating a mutual and cordial relationship with customer, 20.0% agree that effective public relation practice assist the hotel in cultivating a mutual and cordial relationship with customer, 22.5% were undecided if effective public relation practice assist the hotel in cultivating a mutual and cordial relationship with customer, 18.8% disagree that effective public relation practice assist the hotel in cultivating a mutual and cordial relationship with customer while 7.5% strongly disagree that effective public relation practice assist the hotel in cultivating a mutual and cordial relationship with customer.

Public relation practice is crucial to attainment of organization objectives.

This table above shows that 25.0% of the respondents strongly agree that Public relation practices is crucial to attainment of organization objective, 11.3% agree that Public relation practices is crucial to attainment of organization objective, 15.0% were undecided if Public relation practices is crucial to attainment of organization objective, 30.0% disagree that Public relation practices is crucial to attainment of organization objective while 18.8% strongly disagree that Public relation practices is crucial to attainment of organization objective.

Corporate public relation can improve the overall positive public perception on the marketing of hotels product and services.

This table above indicates that 51.3% of the respondents strongly agree that corporate public relation can improve the overall positive public perception on the marketing of hotels products and services, 17.5% agree that corporate public relation can improve the overall positive public perception on the marketing of hotels products and services, 8.8% of them were undecided if corporate public

relation can improve the overall positive public perception on the marketing of hotels products and services, 16.3% disagree that corporate public relation can improve the overall positive public perception on the marketing of hotels products and services while 6.3% of the respondents strongly disagree that corporate public relation can improve the overall positive public perception on the marketing of hotels products and services.

Media relation can improve the public perception of marketing hotel product and services.

This table indicates that 53.8% of the respondents strongly agree that media relation can improve the public perception of marketing of hotels product and services, 25.0% agree that media relation can improve the public perception of marketing of hotels product and services, 5.0% were undecided if media relation can improve the public perception of marketing of hotels product and services, 5.0% of them disagree that media relation can improve the public perception of marketing of hotels product and services while 11.3% strongly disagree that media relation can improve the public perception of marketing of hotels product and services.

SS Community relation/corporate social responsibility can improve public perception on hotels product and services.

This table above shows that 53.8% of the respondents strongly agree that community relation / corporate social

responsibility can improve public perception on hotels product and services, 17.5% agree that community relation / corporate social responsibility can improve public perception on hotels product and services, 7.5% of them were undecided if community relation / corporate social responsibility can improve public perception on hotels product and services, another 7.5% disagree that community relation / corporate social responsibility can improve public perception on hotels product and services while 13.8% of the respondents strongly disagree that community relation / corporate social responsibility can improve public perception on hotels product and services.

An effective public relation practice increases the level of hotels survival in the hospitality industry.

This table above shows that 26.3% of the respondents strongly agree that an effective public relation practice increase the level of hotel survival in the hospitality industry, 23.8% agree that an effective public relation practice increase the level of hotel survival in the hospitality industry, 10.0% of them were undecided if an effective public relation practice increase the level of hotel survival in the hospitality industry, 11.3% of the respondents disagree that an effective public relation practice increase the level of hotel survival in the hospitality industry while 28.8% of the respondents strongly disagree that an effective public relation practice increase the level of hotel survival in the hospitality industry.

TABLE4: Association between social- economic characteristic and public relation of the respondent

Crosstab

			Public relation		Total
			negative relationship	positive relationship	
Sex	Male	Count	10	36	46
		% within sex	21.7%	78.3%	100.0%
		% within Public relation	52.6%	59.0%	57.5%
		% of Total	12.5%	45.0%	57.5%
	Female	Count	9	25	34
		% within sex	26.5%	73.5%	100.0%



	% within Public relation	47.4%	41.0%	42.5%
	% of Total	11.25%	31.25%	42.5%
Total	Count	19	61	80
	% within sex	23.75%	76.25%	100.0%
	% within Public relation	100.0%	100.0%	100.0%
	% of Total	23.75%	76.25%	100.0%

Source: field Survey2021

This table above shows that 19 of the respondents representing 23.75% have a negative relationship with public relation while 61 of them representing 76.25 have positive relationship with public relation.

Table5: Chi- Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pears Chi-Square	.726 <sup>a</sup>	2	.696
Likelihood Ratio	1.269	2	.530
Linear-by-Linear Association	.447	1	.504
No of Valid Cases	80		

Source: field Survey2021

Table 6: Test Statistics

	DOES PUBLIC RELATION INCREASE CUSTOMER PATRONAGE?	DOES PUBLIC RELATION PROMOTE THE IMAGE OF THE HOTEL?	PUBLIC RELATION PRACTICE BY A HOTEL INCREASE HER COMPETITIVE STRENGTH
Chi-Square	63.625 <sup>a</sup>	65.625 <sup>a</sup>	51.625 <sup>a</sup>
Df	2	2	2
Asymp. Sig.	.000	.000	.542

Source: field Survey2021

## DISCUSSION

This table above shows the Chi-Square Value, degree of freedom and the significant value for each objective.

### TEST OF HYPOTHESES

Hypothesis one

H<sub>01</sub>: Public relation has no significant effect on customer patronage in hotel

In Table 4.1.29 above, since the significant value corresponding to the objective is 0.000 which is lesser than 0.05, we reject H<sub>0</sub> and conclude that Public relation has significant impact on customer patronage in hotel

Hypothesis two

H<sub>02</sub>: There is no relationship between public relation and image promotion of a hotel.

In Table above, since the significant value corresponding to the objective is 0.000 which is lesser than 0.05, we reject H<sub>0</sub> and conclude that there exists a relationship between public relation and image promotion of a hotel.

Hypothesis three

H<sub>03</sub>: There is no significant relationship between public relation practice and competitive strength of the hotel.

In Table above, since the significant value corresponding to the objective is 0.542 which is greater than 0.05, we fail to reject H<sub>0</sub> and conclude that there is no significant relationship between public relation practice and competitive strength of the hotel.

## CONCLUSION

From the empirical research work and findings, it was revealed and established that public relation practice has positive impact on the performance of the two selected establishments in Abeokuta, Ogun State. The findings further revealed that public relation has significant effect on customer patronage as the sig-value showed 0.000 which is statistically significant at 5% level of significance, thus the researcher found it appropriate to

conclude that public relation has significant effect on customer patronage in hotel. The study also revealed that there was significant relationship between public relation and image promotion of a hotel as the sig value showed 0.000 which is statistically significant at 5% level of significance. And lastly, it was also revealed that there is no significant relationship between public relation practice and competitive strength of the hotel as it has sig value of 0.542 which is statistically insignificant at 5% level of significance, and thus the researcher can conclude that there is no significant relationship between public relation practice and competitive strength of the hotel.

### Recommendations

Based on the finding of this study, the researcher finds it appropriate to urge hoteliers who aim at improving the performance and upgrading the level of their hotels in other to enhance profitability should focus more on public relations as it helps increase customer patronage and also promote the image of the hotel. Most importantly, hotel should ensure efficient use of social media to gain more customers and sell the hotel well. The study further recommends hotels should reduce or eliminate unhealthy competition among themselves as it will not help to improve the profitability, image and patronage of the concerned hotels.

Researchers are also urged and encouraged to investigate other problems identified in this research study.

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