

**KNOWLEDGE AND ATTITUDE OF HEALTHCARE PROFESSIONALS TOWARDS
THE HEALTH-RELATED MILLENNIUM DEVELOPMENT GOALS (MDGS) IN A
TERTIARY HEALTH INSTITUTION IN KANO STATE, NIGERIA**

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Abstract

Background

The Millennium Development Goals (MDGs) are series of eight time-bound development goals that seek to address issues of poverty, education, gender equality, health, environment and global partnerships for development agreed upon by the international community to be achieved by the year 2015. This study was aimed at assessing the knowledge and attitude of Healthcare Professionals on the health-related MDGs, being important stakeholders in the achievement of these goals.

Method

A cross-sectional descriptive study was conducted among healthcare professionals working at the Aminu Kano Teaching Hospital (AKTH) Kano, a tertiary health institution. Information was obtained through the use of self-administrated semi-structured questionnaires containing both close-ended and open-ended questions.

Results

Up to 46% of the respondents were medical doctors, 42% were nurses, 9% were laboratory technologists and 3% were pharmacist. The mean age of respondents was 35 ± 6.8 years with the males constituting 51%. Majority of the respondents (40%) qualified within the last 5 years preceding this study. Only 6% of the respondents had good knowledge of the MDGs while 73% had poor knowledge. Knowledge of health-related MDGs was also poor with only 9% of the respondents having good knowledge while 71% had poor knowledge.

Most of the respondents had a positive attitude towards the MDGs, with as high as 82% feeling that the declaration was necessary while 67% of them felt the strategies were adequate.

Similarly, 84% of the respondents felt that they have a role to play in achieving the health-related MDGs in particular. There was a statistically significant association between the knowledge of MDGs, and health-related MDGs among the professionals.

Conclusion

Even though achieving the Millennium Development Goals by the year 2015 will largely depend on good knowledge and involvement of all stakeholders at all levels, knowledge of the MDGs among the various healthcare professionals is generally poor. This study therefore reveals the gap in knowledge of MDGs among healthcare professionals who are important stakeholders in the realization of the health-related MDGs. Appropriate education and sensitization of the various health professionals on MDGs particularly the health related MDGs through seminars and workshops are imperative towards bridging this knowledge gap.

Keywords: *Knowledge, Attitude, Healthcare professionals, Health-related MDGs*

Introduction

A number of declarations, conventions and initiatives have been made at different times in different places at various levels and tiers of government; international, regional, national and sub-national. The aims of these conventions and declarations were to foster cooperation among different countries, improve socio-economic situations, solve emerging problems, improve or tackle health-related problems or events. Notable among these declarations include: the Alma-Ata declaration of 1978 for achieving health for all in the year 2000; Bamako initiative of 1987 for the revitalization of the Primary Health Care (PHC); Kyoto declaration of 1997 for the control of atmospheric pollution among others.^{1,2,3}

Similarly, a millennium declaration popularly known as the Millennium Development Goals (MDGs) was made by 192 United Nation member-nations in September 2000.^{4,5,6} The MDGs are a series of eight time bound development goals that seek to address the world's most staggering health and poverty issues agreed by the international community by the year 2015.⁷ Meeting these goals or a substantial progress towards meeting them would produce a healthier and economically sound world.⁸ These goals include: eradicating extreme poverty and hunger; achieve Universal Primary Education; promote gender equality and empowerment of women; reduce child mortality; improve maternal health; combat HIV/AIDS and other diseases; ensure environmental sustainability; and develop a global partnership for development. In addition to the eight goals, the MDGs have targets and indicators for performance monitoring.⁹ Three out of the 8 MDGs, are directly health-related and health also contributes significantly to several other goals.¹⁰

Achieving the health-related MDGs will require the establishment of effective health systems that provide equitable and affordable access to quality health services. The achievement of the health-related MDGs and the progress being made towards achieving the other MDGs, including the overall fight against poverty, will be compromised if the right to health is not secured, especially for the most vulnerable groups. Responding to the challenge of ensuring equitable access to quality health services requires a fundamental shift in prevailing health policies.

Midpoint from adoption of the MDGs and the 2015 target date, political changes, economic difficulties, natural and man-made disasters have all been highlighted as the derailing factors especially in Sub-Saharan Africa. Achieving the health-related MDGs is therefore central to the attainment of all of the goals including the eradication of poverty.

The success of the realization of the goals and targets of the MDGs by 2015 largely depends on adequate knowledge and participation of all stakeholders in the programmes and activities targeting the MDGs. Healthcare professionals, being major stakeholders in achieving the health-related MDGs, especially as regards the reduction of childhood and maternal mortality and the reversal of the trends of HIV/AIDS and other infectious diseases, need to be adequately enlightened and knowledgeable on the strategies of the MDGs especially those directly related to health. Though several studies have been done in developed countries regarding the MDGs, there is paucity of data on the knowledge of the MDGs among healthcare professionals.¹¹ This study therefore aimed at assessing the knowledge and attitude of healthcare professionals (Medical Doctors, Pharmacists, Nurses and laboratory Scientists) regarding the health-related millennium development goals.

Materials and Methods

A cross-sectional descriptive study was conducted among 300 healthcare professionals at the Aminu Kano Teaching Hospital (AKTH), a Federal tertiary institution located in Tarauni Local Government area of Kano metropolis.¹² First commissioned at its temporary site on 24th August 1988 by Professor Ransome Kuti, it was later moved to its permanent site and renamed AKTH in July 1996.¹³ The Hospital provides specialist and general medical services and also serves as a referral center for various peripheral hospitals within Kano, its neighboring states and people from Niger Republic.¹⁴

Stratified sampling technique with proportionate allocation was used to select the respondents from the various categories of healthcare professionals in the hospital. Data was collected using a pre-tested, semi-structured self-administered questionnaire that sought information on the biodata of the respondents, basic knowledge on the Millennium Development Goals (MDGs) and specifically, the health-related MDGs and attitude towards the health-related MDGs. The Data were analyzed using Epi info version 6 statistical software.¹⁵ Descriptive statistics were presented as absolute numbers, percentages, mean and standard deviation as the case may be and chi-square test was used to determine significant association between categorical variable while a p value of 0.05 or less was considered significant. Knowledge of the respondents was scored and graded as good, fair and poor based on a scoring system adopted from past studies.¹⁶⁻¹⁹ In determining the knowledge of the respondents, a score of one was awarded to each of the

questions on knowledge. Thus for each correct response, one point was awarded while incorrect response attracted no point. Out of a maximum score of 50 for questions on MDGs generally, a score of 0 -19 was graded as poor, 20 – 29 as fair while 30 and above was considered as good. In grading their knowledge on the health related MDGs, out of a maximum score of 35, a score of 0-14 was considered as poor, 15-24 as fair while 25 and above was considered as good. Ethical clearance was obtained from the Ethical Committee of Aminu Kano Teaching Hospital before the commencement of the study while informed consent of each of the respondents was also sought for and obtained.

Results

Two hundred and ninety five out of the 300 health professionals completed the questionnaires giving a response rate of 98.3%. Up to 46% of the respondents were medical doctors, 42% were nurses, 9% were laboratory scientists and 3% were pharmacists as shown in table I. The mean age of the respondents was 35 ± 6.8 years, 51% of whom were males while 49% were females. Majority of the respondents (53%) were married while 47% were single. Up to 40% of the respondents qualified within the last five years, while 31%, and 29% qualified in the last 5-10 years, and more than 10 years respectively as shown in table II.

Eighty five percent of the health professionals had heard of the Millennium Development Goals (MDGs) before, half (50%) of them first heard of MDGs more than 3 years ago, while 15% admitted to not having ever heard of the MDGs. The major sources of information of the respondents were through newspapers and journals (26%) followed by radio and television with 20% each. Only 15% of the respondents heard about the MDGs during seminars and conferences.

Knowledge of the MDGs was poor among the respondents, with majority (73%) of them having poor knowledge, 21% fair knowledge and only 6% have good knowledge. Knowledge of the health-related MDGs was also poor among the respondents with as high as 71% having poor knowledge, 20% fair knowledge and only 9% having good knowledge. There was no statistically significant difference in knowledge of both MDGs and health-related MDGs between doctors and other health professionals ($P > 0.05$) as shown in tables III and IV.

Most of the respondents had a positive attitude towards the MDGs with as high as 82% having the feeling that the declaration was necessary while 15% felt it was not necessary. Up to 67% of

the respondents felt that the itemized strategies were adequate, while 18% thought otherwise and mainly ascribed it to their inadequate level of awareness. Similarly, 84% of the respondents felt that they have a role to play in achieving the health-related MDGs in particular, and up to 62% reported that they were specifically or adequately involved in the MDGs program or activities. Again, 58% of the respondents were optimistic that Nigeria as well as other developing countries will attain the MDGs by 2015, while 42% held a contrary view, majority of whom stated poor governance, inadequate funding, bad leadership strategies, administrative bottlenecks and high disease burden as reasons for their pessimism. Among these respondents with pessimistic view, many of them good governance matched with adequate funding of programmes as indispensable means of achieving the MDGs.

Discussion

This study revealed that the general knowledge of MDGs (and health-related MDGs) among the various healthcare professionals is abysmally low with only 6% having good knowledge. This finding certainly is not good news in view of the strategic role the healthcare professionals have to play in the attainment of the MGDs. In addition to the provision of health services, healthcare professionals in tertiary institutions are charged directly with the responsibility of training other lower cadres of health staff, who, also based on the indicators and strategies itemized for attaining the MGDS, play majority of the monitoring activities.²⁰

It was noted that professionals with appropriate training and good knowledge of the MDGs, can help develop efficient monitoring systems and emphasize health education, public information, health promotion, disease prevention and social marketing of public health issues. Progress so far, especially reduction of maternal and child mortality in Nigeria has been judged to be below average for sub-Saharan Africa²¹ which as a whole lags generally behind other regions in the world.²² A previous study had underscored the importance of human resources particularly healthcare professionals in attaining the health related MDGs.^{8,21}

From this study, 84% of the respondents recognised that being healthcare professionals, they have a role to play in achieving the MDGs and 62% acknowledged their involvement in specific programs and activities of the MDGs. Though this can be regarded as a positive marker, however, against the background of overall poor knowledge of the MDGs, one will attribute this to the fact that specific involvement may have been misinterpreted as services rendered. For

example a paediatrician may feel that providing curative service to children helps to reduce child mortality which in the long run is one of the aims of the MDGs. Similarly, a community physician or an obstetrician may adopt the same attitude because of the direct relation of his speciality to the goals, targets and indicators.

The study also revealed that there was no significant difference in the knowledge of both MDGs and health-related MDGs among the various healthcare professionals. This underscores a possible assumption that healthcare professionals are vast and should be familiar with such initiatives. Regarding the feasibility of meeting the MDGs in Nigeria by 2015, up to 58% of respondents were optimistic while 41% were pessimistic. The feasibility of meeting the health-related MGDs had been debated in the report of WHO Macro Commission on Health.²² On one side of the debate are the optimists who believe that health goals in low income countries will take care of themselves as a fairly automatic product of economic growth and development. On the other side of the debate are the pessimists who underestimated the considerable progress made in low income countries and argued that the remaining high disease burden is a product of corrupt and broken down health services which is unlikely to be revived in the near future.²²

Conclusion

This study reveals that stakeholders who are supposed to play a significant role in meeting the health-related MDGs in particular and the overall MDGs in general, have poor knowledge of the subject matter and are grossly ill-informed on the context and process of achieving it. These findings therefore call for a more concerted effort towards educating, enlightening and involving all cadres of health workers in the programs and activities of the MDGs as the prospect of the realization of the goals by the year 2015 would depend largely, among other things, on adequate knowledge and involvement of all the stakeholders at all levels.

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Table I: Distribution of the respondents by their professions

Profession	Frequency	Percentage
Medical Doctors	136	46.0
Nurses	124	42.0
Laboratory Scientists	26	9.0
Pharmacists	9	3.0
Total	295	100.0

Table II: Distribution of the respondents according to their post qualification experience

Years post qualification	Frequency	Percentage
Less than 5 years	118	40.0
5 – 10 years	91	31.0
More than 10 years	86	29.0
Total	295	100.0

Table III: Association between knowledge of MDGs and profession

Knowledge/Profession	Doctors	Other health professionals*	Total
Good	8	10	18
Fair	34	28	62
Poor	93	122	215
Total	135	160	295

***Pharmacists, Nurses and Laboratory Scientists**

$$\chi^2 = 2.61, df = 2, p > 0.05$$

Table IV: Association between knowledge of health related MDGs and profession

Knowledge/Profession	Doctors	Other health professionals*	Total
Good	13	14	27
Fair	27	31	58
Poor	95	115	210
Total	135	160	295

***Pharmacists, Nurses and Laboratory Scientists**

$$\chi^2 = 0.10, df = 2, p > 0.05$$