

AWARENESS AND AVAILABILITY OF TISHIP INFORMATION SOURCES BY UNDERGRADUATE STUDENTS FOR ACCESSING HEALTHCARE SERVICES IN AHMADU BELLO UNIVERSITY, ZARIA

By

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Abstract

This study assessed the awareness and availability of Tertiary Institutions Social Health Insurance Programme (TISHIP) Information Sources by Undergraduate Students for Accessing Healthcare Services in Ahmadu Bello University, Zaria. The objectives of the study is to identify the types of Healthcare Services covered by TISHIP are accessible to Undergraduate Students in Ahmadu Bello University, Zaria, identify the types of TISHIP Information Sources available to Undergraduate Students for accessing Healthcare Services in Ahmadu Bello University, Zaria and to find out the extent Undergraduate Students aware of TISHIP Information Sources available for accessing Healthcare in Ahmadu Bello University, Zaria. Three research questions were formulated in line with the research objectives. The study adopted descriptive survey design. 381 students were sampled using cluster proportionate random sampling out of the entire 42,779 for the study. Questionnaire was the instrument used for data collection which were collected, analysed and presented in tables using frequencies, percentages, mean and standard deviation. Findings of the study revealed that the types of healthcare services covered by TISHIP accessible by the Undergraduate Students were Routine Immunisations, Health Education, Essential Drugs, Accident and Emergency Care, Dental Health Services and Periodic Medical Check-ups. Also, the types of TISHIP information sources available to the Undergraduate Students for accessing healthcare were Orientation and Matriculation, Friends, Notice Boards, Lecturers and Staff, Campus Bulletin, Social Media, Internet, and Religious and Association Leaders. Hence, it was recommended that information services aimed at providing information to the student be provided and the university management should provide more TISHIP information sources and healthcare services that will enhance access for the Undergraduate Students thereby saving their time in accessing information sources.

Keyword: Information Sources, Awareness, Availability, Undergraduate Students, TISHIP

Introduction

To provide effective and efficient healthcare for their citizens especially, the poor and vulnerable; most developing countries recently launched to set up some health financing strategies focusing mainly on social health insurance scheme. These reforms are programmes and strategies aimed at providing easy access to healthcare at an affordable price through various prepayment with expected results of improving the overall health status of the citizens (National Health Insurance Scheme, 2011). This led to establishment of National Health Insurance Scheme in Nigeria.

There are many sources through which the information about policy, objectives, coverage, programmes of the Tertiary Institutions Social Health Insurance Programme TISHIP is intended to reach out to the students in Tertiary Institutions. Such information sources are: television, radio, orientation, the library, seminars, lecturers, peers, billboards, handbills, students' handbook, student's handbook. Current literature suggests that certain information sources are used in varying degrees among different socioeconomic and demographic groups (Redmond, Baer, Clark, Lipsitz, & Hicks, 2010). Students are being confronted with a flood of health information through a wide availability of sources (Epstein, 2003). Therefore, it is important to determine the specific and classes of health information sources, the rapid and widespread development of mass media sources including the Internet is occurring worldwide. (Thuy, Nguyen, Nakamura, Seino, & Vo, 2017) The use of widely available mass media sources like television and the Internet to obtain health information was associated with higher health care utilization (Epstein, 2003).

Such information sources are of great benefits to various groups especially the younger generation of which students of tertiary institution forms a greater percentage. The need for information sources cannot be over emphasized; as the rapid and widespread of information and development various types of information sources including the Internet is on a geometrical progression (Redmond Bear, Clark and Hicks, 2010). As Information source availability is fast growing, people find it difficult to identify which of these information sources are genuine, reliable and beneficial to their utilization of the Tertiary Institutions Social Health Insurance Programme. The National Health Insurance Scheme (NHIS) is an agency of the Federal Government established under Act 35, 1999 to promote regulate and manage the effective implementation of Social Health Insurance Programs. To enable access to qualitative and affordable healthcare services provided to all Nigerians.

According to Ogaboh, Ushie & Osuchuckwu (2010), The challenges in the healthcare sector inspired the decision of Gen. Abdulsalami Abubakar on May 10th 1999, to sign into law the National Health Insurance Scheme (NHIS) Decree Number 35 (NHIS Decree No. 35 of 1999); with the goal of providing general access to quality healthcare to every Nigerians. NHIS became functional after its official launched by the Federal Government in 2005. The National Health Insurance Scheme is the body responsible for the provision of effective and qualitative healthcare services to all Nigerians. Its objectives are among others to: Ensure that every Nigerian has access to good healthcare services and to ensure equitable patronage of all levels of healthcare.

The TISHIP is a social security system whereby the health care of students in tertiary institutions in Nigeria is paid for from funds pooled through compulsory contributions involving the students and the government. The programme is therefore established to ensure access to qualitative health care services and thus ensuring healthy students and creating conducive teaching, learning and research environment (Nduka, 2017).

The success of this scheme depends on the students' knowledge and awareness of its existence as well as the level of its implementation by healthcare providers. The knowledge of TISHIP, the information sources used, its acceptance, and utilization by the students as well as, its proper implementation in the health care facilities is crucial for the actualization of its goals and general benefits. Health Information sources has a great role to play in the dissemination of such health information to the students. Understanding how availability of TISHIP information sources enhances the access to healthcare by the Undergraduate Students is expedient to guide through policy making and hence promote universal healthcare coverage.

Statement of the Problem

Easy access to health care for all can only be possible when there is access to information sources aimed at providing information to students on the services available and its benefits to the students (Nduka, 2017). The importance of good health is captured by the slogan 'health is wealth'. It is a truism that the state of health care services in Nigeria is below the expectation of the average citizen. Previous study by Ilochonwu & Adedigba (2017) revealed that the provision of TISHIP as part of the health care services can be of great help to students and the benefits of insurance cover cannot be exaggerated. It ensures that an individual is not overburdened by the occurrence of an unexpected event. Despite the immense benefits, some people, especially in developing countries, are sceptical about the insurance business. Insurance is easily one of the most misunderstood and sometimes misrepresented institutions (Monye, 2006).

To understand if the access to healthcare services provided under TISHIP is highly dependent on available and reliable health information sources. Hence, the study was conducted on Awareness and Availability of TISHIP Information Sources by Undergraduate Students for Accessing Healthcare Services in Ahmadu Bello University, Zaria to assess the awareness of the healthcare information sources by students to access the types of healthcare services accessible, the availability of TISHIP information sources and to examine the level of awareness on the TISHIP information sources.

Research Objectives

The following research objectives to:

1. Identify the types of Healthcare Services covered by TISHIP accessible to Undergraduate Students in Ahmadu Bello University, Zaria
2. Identify the types of TISHIP Information Sources are available to Undergraduate Students for accessing Healthcare Services in Ahmadu Bello University, Zaria
3. Examine the level of awareness of Undergraduate Students aware on TISHIP Information Sources available for accessing Healthcare in Ahmadu Bello University, Zaria.

Significance of the Study

The findings and recommendations of this study will be beneficial to the management of NHIS as an agency of the Federal Government of Nigeria, the Students, Ahmadu Bello University Zaria and to The Library and Information professionals.

Research Method

Quantitative research method was adopted using descriptive survey research design for this study. The population of this study comprised of full-time Undergraduate Students of Ahmadu Bello University Zaria. They were 42,779 undergraduate students registered under TISHIP in Ahmadu Bello University, Zaria. Three hundred and eighty one (381) students were sampled from the population using Cluster, Proportionate and Random Sampling techniques.

Questionnaire was used to collect the data from the study. Pilot study was conducted in Bayero University Kano (BUK) to test the internal reliability of the instrument. The instrument was subjected to Cronbach Alpha Reliability coefficient test using SPSS Software Version 21.0 where 50 copies of the questionnaire were administered to Undergraduate Students of BUK, retrieved, sorted for and coded into SPSS Software Version 21.0. Cronbach Alpha reliability test was conducted and a reliability of .822 was obtained. Descriptive statistics of mean and standard deviation was used to analyse data collected, graphs and tables were used to show data representations. A benchmark of 2.50 mean score was used for decision making to accept or reject the standard deviation of mean obtained using the four points Likert scale questions. Item below 2.50 mean score was not accepted and was regarded a negative response whereas 50% was the benchmark for the nominal responses for percentages.

Results and Discussion

Table 1 Type of Healthcare Services Covered by TISHIP Accessible by Undergraduate in Ahmadu Bello University, Zaria

S/N	HEALTCARE SERVICES	FREQUENCY	PERCENTAGE (%)
1	Routine Immunizations	185	51.2
2	Surgical Procedures	92	25.5
3	Internal Medicine	134	37.1
4	HIV/AIDS	137	38.0
5	Health Education	181	50.1
6	Essential Drugs	232	64.3
7	STIs/STDs	109	30.2
8	Mental Health	59	16.3
9	Pediatrics	61	16.9
10	Obstetrics and Gynecology	56	15.5
11	Ophthalmology	64	17.7
12	Accident and Emergency Care	183	50.7
13	Family Planning Education	89	24.7
14	Child Welfare Services	66	18.3
15	Referral Services	103	28.5
16	Complex Surgeries	56	15.5
17	Dental Health Services	197	54.6
18	Ear, Nose and Throats (ENT)	140	38.8
19	Periodic Medical Check-ups	185	51.2
20	Family Planning Commodities	69	19.1

Source: Researcher's Field Survey, 2019

Figure 1 Type of Healthcare Services Accessible by Undergraduate Students

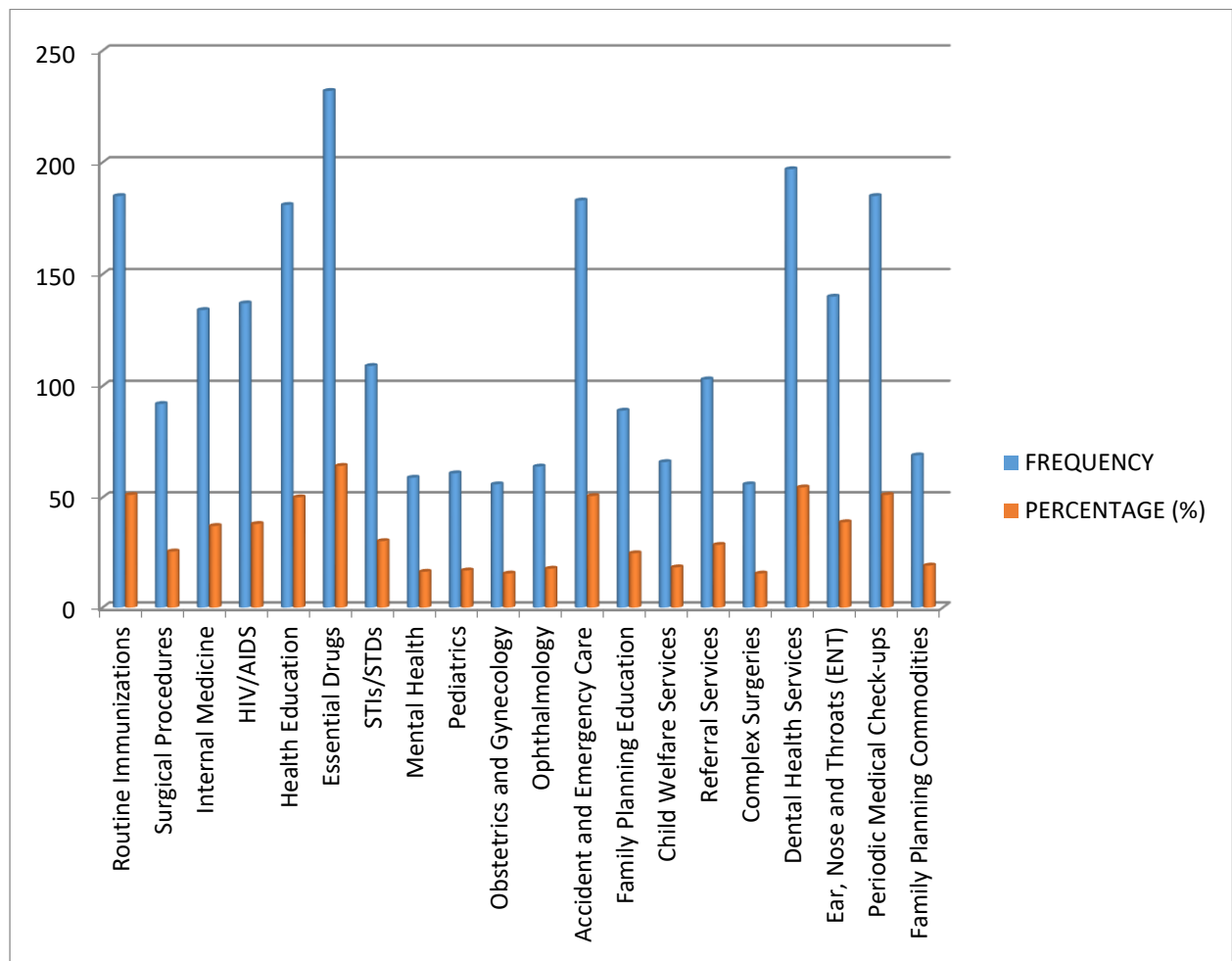


Table 1 shows the types of healthcare services covered by TISHIP accessible to the Undergraduate Students in Ahmadu Bello University, Zaria. The Healthcare Services accessible in order of frequency are: Essential Drugs 232 (64.3%), Dental Health 197 (54.6%), Routine Immunizations 185 (51.2%), Periodic Medical Check-Ups 185 (51.2%), Accident and Emergency Care 183 (50.7%), Health Education 181 (50.1%), Ear, Nose and Throats (ENT) 140 (38.8%), HIV/AIDS 137 (38.0%), Internal Medicine 134 (37.1%), STIs/STDs 109 (30.2%), Referral Services 103 (28.5%), Surgical Procedures 92 (25.5%), Family Planning Education 89 (24.7%), Family Planning Commodities 69 (19.1%), Child Welfare Services 66 (18.3%), Pediatrics 61 (16.9%), Mental Health 59 (16.3%), Complex Surgeries 56 (15.5%), and Obstetrics and Gynecology has 56 (15.5%).

The findings showed that the types of Healthcare services accessible by the Undergraduate Students are; Essential Drugs, Dental Health, Routine Immunizations, Periodic Medical Check-Ups, Accident and Emergency Care and Health Education.

The finding is confirming the postulations of Adefolaju (2014) who stated that persons under the schemes are entitled to benefits such as essential drugs and other healthcare services, likewise with that of Nwafor-Festus (2016) who stated that access to healthcare services under health insurance is relative to being insured as anyone can access as much as needed to solve their health needs.

The implication of this finding is that provision, availability and coverage are a score for accessing healthcare services. Information professionals have a mandate of ensuring provision of adequate information about the healthcare services. Access to the healthcare services is a product of information. More information sources provision will enable more access to the other healthcare services less accessible even though available.

Table 2 Types of TISHIP Information Sources Available for Accessing Healthcare Services

S/N	INFORMATION SOURCES	FREQUENCY	PERCENTAGE (%)
1	Internet	184	51.0
2	Parents	133	36.8
3	Friends	220	60.9
4	Magazines	89	24.7
5	Television	89	24.7
6	Radio	93	25.8
7	Social Media	194	54.0
8	NHIS Operational Guidelines	121	33.5
9	Leaflets, Pamphlets	82	22.7
10	Lecturers/ Staff	201	55.7
11	Campus Bulletin	199	55.1
12	Notice Boards	210	58.2
13	Students Handbook	179	49.6
14	Orientations and Matriculation	256	70.9
15	Religious Association Leaders	182	50.4

Source: Researcher's Field Survey, 2019

Figure 2 Types of TISHIP Information Sources Available

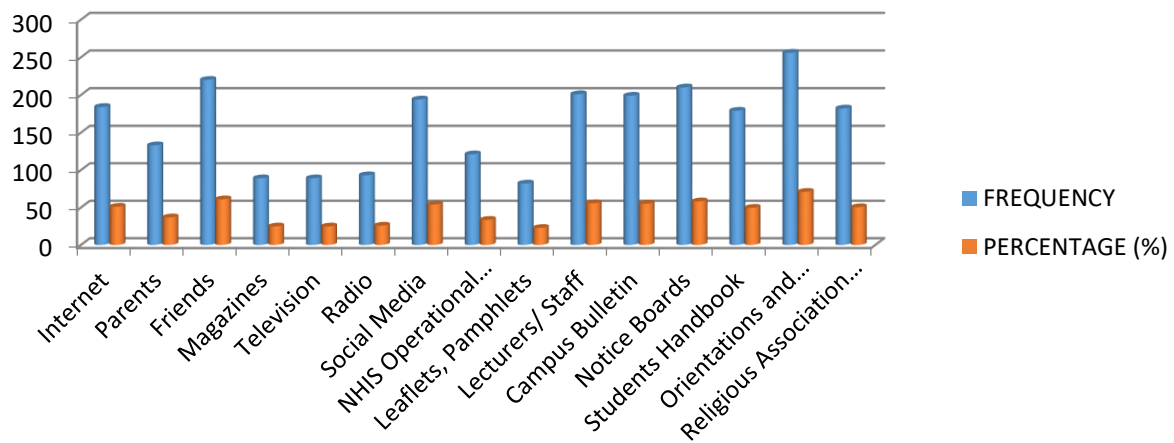


Table 2 shows the types of TISHIP information sources available for accessing healthcare services in Ahmadu Bello University, Zaria. The respondents highlighted that information sources available to them through which they are able to access the healthcare services in Ahmadu Bello University Zaria are: Orientation and Matriculation 256 (70.9%), Friends 220 (60.9%), Notice Boards 210 (58.2%), Lecturers and Staff 201 (55.7%), Campus Bulletin 199 (55.1%), Social Media 194 (54%), Internet 184 (51%), Religious and Association Leaders 182 (50.4%), Students Handbook 179 (49.6%), Parents 133 (36.8%), NHIS Operational Guidelines 121 (33.5%), Radio 93 (25.8%), Television 89 (24.7%), Magazines 89 (24.7%), while Leaflets and Pamphlets has the least response with 82 (22.7).

The finding reveals that types of TISHIP information sources available for accessing healthcare services in Ahmadu Bello University, Zaria are; Orientation and Matriculation, Friends, Notice Boards, Lecturers and Staff, Campus Bulletin, Social Media, Internet, and Religious and Association Leaders.

Most of the information sources available to the respondents are majorly campus based meaning around and within the University. This is in line with the findings of (Shaniece Criss, Jennifer A. Woo Baidal, Roberta E. Goldman, Meghan Perkins, Courtney Cunningham, 2016) and (Yiu et al., 2010) who stated that information sources plays vital roles within the context of healthcare access.

Thus, it implies from the results of the findings that publications from the NHIS if readily available and incorporated into other sources will be a very good source of information about programmes, services and policy. Therefore, availability, accessibility and ease of use of TISHIP

information sources is an advantage to Undergraduate Students ' access to healthcare services covered under TISHIP. Information professionals are obliged to rise up to the responsibilities of providing more sources of TISHIP information to the Undergraduate Students.

Level of Awareness of Undergraduate Students on the availability of TISHIP Information Sources

The researcher under this sub-heading seeks to find out the extent of awareness about the Information Sources available to them as it regards their access to the healthcare services provided under the TISHIP. The individual responses were collected and the findings are presented under Table 4.6.

Table 3 Level of Awareness of Undergraduate Students on the availability of TISHIP Information Sources

S/N	INFORMATION SOURCES	RESPONSES f (%)				MEAN	SD	N (%)
		HA	A	SA	NA			
1	Internet	120 (32.2)	91 (52.2)	58 (16.1)	92 (25.5)	2.66	1.184	361 (100)
2	Parents	82 (22.7)	108 (29.9)	84 (23.3)	87 (24.1)	2.51	1.091	361 (100)
3	Friends	130 (36.0)	143 (39.6)	54 (15.0)	34 (9.4)	3.02	.943	361 (100)
4	Magazines	39 (10.8)	85 (23.5)	98 (27.1)	139 (38.5)	2.07	1.025	361 (100)
5	Television	46 (12.7)	91 (25.2)	85 (23.5)	139 (38.5)	2.12	1.065	361 (100)
6	Radio	54 (15.0)	99 (27.4)	84 (23.3)	124 (34.3)	2.23	1.080	361 (100)
7	Social Media	108 (29.9)	103 (28.5)	76 (21.1)	74 (20.5)	2.68	1.109	361 (100)
8	NHIS Operational Guidelines	75 (20.8)	92 (25.5)	78 (21.6)	116(32.1)	2.51	2.543	361 (100)
9	Leaflets, Pamphlets	41 (11.4)	95 (26.3)	104(38.8)	121 (33.5)	2.16	1.016	361 (100)
10	Lecturers/ Staff	84 (23.3)	140 (38.8)	74 (20.5)	63 (17.5)	2.68	1.018	361 (100)
11	Campus Bulletin	132 (36.6)	96 (26.6)	77 (21.3)	56 (15.5)	2.84	1.085	361 (100)
12	Notice Boards	122 (33.8)	113 (31.3)	78 (21.6)	48 (13.3)	2.86	1.033	361 (100)
13	Students Handbook	127 (35.2)	107 (29.6)	72 (19.9)	55 (15.2)	2.85	1.068	361 (100)
14	Orientations and Matriculation	178 (49.3)	97 (26.9)	53 (14.7)	33 (9.1)	3.16	.991	361 (100)
15	Religious Association Leaders	128 (35.5)	96 (26.6)	66 (18.3)	71 (19.7)	2.78	1.131	361 (100)

Source: Researcher's Field Survey, 2019

Key: HA; Highly Aware, A; Aware, SA; Slightly Aware, NA; Not Aware.

Figure 3 Extent of Awareness of TISHIP Information Sources

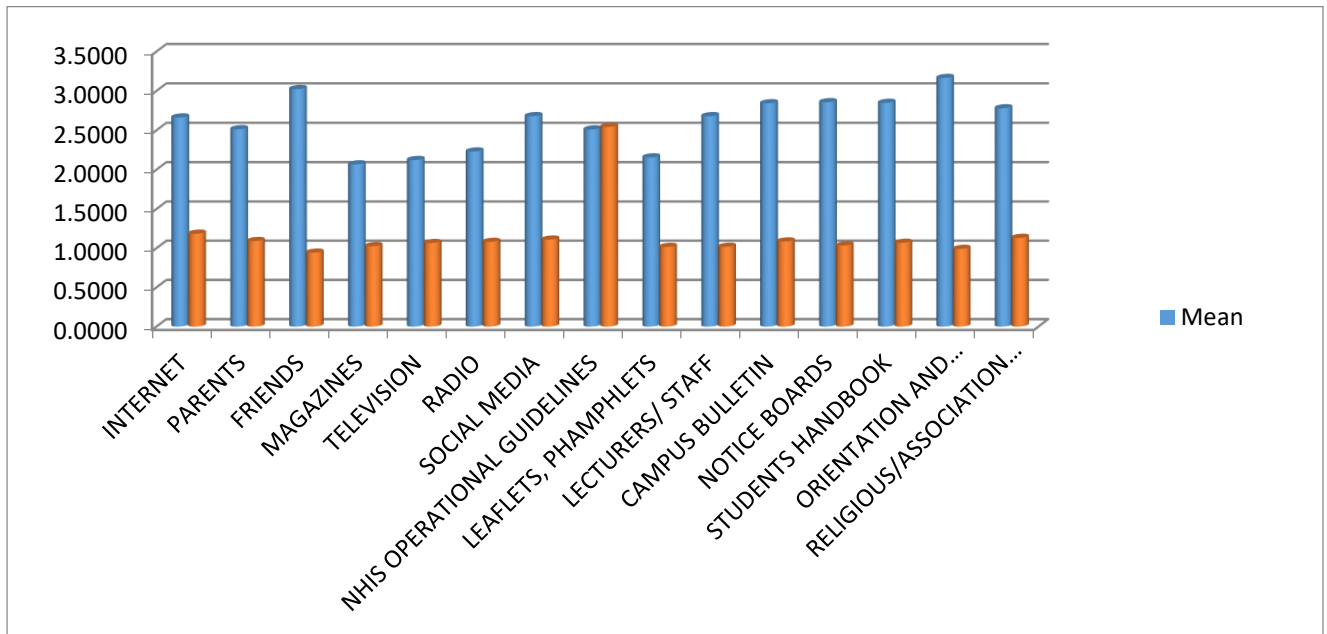


Table 3 shows the extent of awareness of TISHIP information sources available for accessing Healthcare Services in Ahmadu Bello University, Zaria. The result shows that the respondents are highly aware of: Orientation and Matriculation (M=3.16, SD=.991) and Friends (M=3.02, SD=.943) as information sources and are aware of; Notice Boards (M=2.86, SD=1.033), Students Handbook (M=2.85, SD=1.068), Campus Bulletin (M=2.84, SD=.085), Religious and Association Leaders (M=2.78, SD=1.131), Social Media (M=2.68, SD=1.109), Lecturers and Staff (M=2.68, SD=1.018), Internet (M=2.66, SD=1.184), Parents (M=2.51, SD=1.091), and NHIS Operational Guidelines (M=2.51, SD=2.453), with mean above the Benchmark of 2.50 respectively while the results shows that the respondents were not aware of: Magazines (M=2.07, SD=1.025), Television (M=2.12, SD=1.065), Radio (M=2.23, SD=1.080), and Leaflets/Pamphlets (M=2.16, SD=.016) with mean below the 2.50 Benchmark.

The findings reveals that Undergraduate Students in Ahmadu Bello University, Zaria are awareness of TISHIP information sources available for accessing healthcare services such as; Orientation and Matriculation, Friends, Notice Boards, Students Handbook, Campus Bulletin, Religious and Association Leaders, Social Media, Lecturers and Staff, Internet, Parents and NHIS Operational Guidelines.

The finding of this study is in line with the findings of Anyaoku (2017) who stated that awareness to relevant information is essential to access to healthcare services. Also in agreement with Yiu et

al., (2010) and Redmond, Baer, Clark, Lipsitz, & Hicks (2010) whose findings stated that leaflets/pamphlets, television and radio were not indicated not aware by the respondents in their respective studies.

This implies that leaflets and pamphlets, television and radio magazines are becoming extinct as sources of health information to the Undergraduate Students as they are not aware of these as TISHIP information sources.

Summary of Major Findings

The following are the major findings:

1. The types of healthcare services covered by TISHIP accessible by the Undergraduate Students were Routine Immunisations, Health Education, Essential Drugs, Accident and Emergency Care, Dental Health Services and Periodic Medical Check-ups.
2. The types of TISHIP information sources available to the Undergraduate Students for accessing healthcare were Orientation and Matriculation, Friends, Notice Boards, Lecturers and Staff, Campus Bulletin, Social Media, Internet, and Religious and Association Leaders.
3. The Undergraduate Students' level of awareness on TISHIP information sources is high for Orientation and Matriculation, Friends, Notice Boards, Students Handbook, Campus Bulletin, Religious and Association Leaders, Social Media, Lecturers and Staff, Internet, Parents and NHIS Operational Guidelines.

Conclusion

Access to healthcare services especially Social Health Insurance Programmes provided by any Nation is highly dependent on knowledge of the services and their benefits. The information about such if provided through information sources and made accessible to the beneficiaries will go a long way to ensure access to free healthcare to all. As revealed from the study there are many healthcare services available and covered under TISHIP of which the respondents are not aware of some of the services. However, the basic healthcare services needed within their reach like Essential Drugs, Routine Immunizations, Accident and Emergency Care, Dental Health Care, Ear, Nose, and Throats ENT, Health Education are known to them information sources like Orientation and Matriculation, Friends, Students Handbook, Notice Boards, Social Media, Religious and Association Leaders, Campus Bulletin, Internet, Lecturers and Staff and Parents are identified available to the respondents. The extent of awareness of the highlighted information sources is high as such they form the highly utilized information sources for accessing healthcare services

thus enhancing access to Essential Drugs, Routine Immunizations, Accident and Emergency Care, Dental Health Care, Ear, Nose, and Throats (ENT) and Health Education as Healthcare Services. The extent of satisfaction with the TISHIP information sources is high for Orientation and Matriculation, Friends, Notice Boards, Religious and Association Leaders, Campus Bulletin, Students Handbook, Social Media, Lecturers and Staff, Internet and Parents. However, the respondents are not satisfied with Pamphlets/Leaflets, Radio, NHIS Operational Guidelines, Magazines and Television. The major challenges identified by the respondents are that of time and availability of the information sources within their reach.

Recommendations

From the findings of this study, the following recommendations were provided:

1. The management under TISHIP should provide and make available the healthcare services accessible to the students through provision of detailed information of entitlements and benefits of the scheme to the students in terms of those healthcare services accessible to them.
2. Information services aimed at giving adequate information sources about health insurance and its benefits should be incorporated especially on radio and television programs targeted towards provision of health related information to the Undergraduate Students periodically. Also special magazine editions and issuance of leaflets that provides information on health insurance will go a long way to provide awareness to the students.
3. The university management should ensure frequent use of the information sources through provision of programs and seminars to give awareness to the students about other sources at their disposal.

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