

A Survey of the Effect of Quality and Cost of Healthcare Services on Health-Seeking Behaviour in Amuwo-Odofin

Adeniji, L.A¹, Alakija, T², Bakre, F.O³, Ndubuisi⁴, L.K.; Idris, Akeni, D.A⁵

^{1,2,5}Department of Statistics, Yaba College of Technology, Yaba Lagos

³Department of Mathematics, Yaba College of Technology, Yaba Lagos

⁴Department of Biological Science, Yaba College of Technology, Yaba Lagos

*Corresponding author

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ABSTRACT

It is very obvious that individual form a nation. Hence, seeing health as a vital component of our welfare, access to good healthcare is a prerequisite to attaining lasting economic growth both sustainable and prosperous. A cross-sectional study design with a qualitative approach was used in this study. The administered questionnaires were by systematic technique to collect data from 305 participants in Amuwo-Odofin, Mile-2. The research employed both descriptive statistics and inferential statistics (chi-square tests). The data collected was analyzed using the SPSS version 27. The findings showed that there is significant association between cost of healthcare services and health-seeking behavior (p-value < 0.05). Also, there is significant association between quality of healthcare received and health-seeking behavior (p-value < 0.05). The findings also indicated that there is significance association between standard of living and health-seeking behavior (p-value < 0.05). Based on the study, health-seeking behaviors depend on the cost of health services, the quality of health services, and the individual standard of living. This means people living in poverty are more likely to experience adversity in seeking for quality of health services. There is need for government intervention to enhance high quality of healthcare services at a reduced cost.

Keywords: Quality of healthcare services, Healthcare, Healthcare facilities, Government intervention, Fundamental human right, Welfare, Chi-square technique.

INTRODUCTION

The country's healthcare system faces challenges such as neglect, underfunding, and inadequate provisions for optimal healthcare delivery. As a result, impoverished populations in Nigeria lack basic health amenities, competent medical practitioners, and immunization opportunities, leading to high infant mortality and low life expectancy.

The Lancet Nigeria Commission highlights the inequitable distribution of income, wealth, and health in Nigeria, emphasizing the need for government intervention to provide health insurance coverage for the millions of poor Nigerians who cannot afford to pay premiums.

Health-seeking behavior (HSB) means to the actions and decisions peoples make to address health concerns, including preventive measures, diagnosis, treatment, and rehabilitation.

Particularly, Lagos state part of south-west in Nigeria, the most populous and economically vibrant region, access to quality health services and the cost of healthcare are critical determinants of health-seeking behavior. Lagos State, being a commercial hub, presents unique challenges and opportunities in healthcare delivery, with a mix of public and private health facilities. Therefore, disparities in the quality and affordability of these services significantly influence residents' health-seeking behaviors. Understanding these factors is crucial for

developing policies that can improve healthcare access and utilization, ultimately enhancing public health outcomes.

Furthermore, a comprehensive report from the World Health Organization (WHO) elucidates the structural issues within Nigeria's healthcare system, emphasizing factors such as neglect, underfunding, and inadequate infrastructure as major hindrances to effective healthcare delivery (WHO, 2020).

The Lancet Nigeria Commission's landmark study (2018) underscores the stark disparities in income, wealth, and health within the country. This influential report stresses the urgent need for governmental intervention, specifically in the form of health insurance coverage, to bridge the healthcare gap for millions of impoverished Nigerians.

This study addresses the gap by focusing on the socio-economic diversity in Lagos, investigating the dual impact of healthcare costs and service quality on HSB. Findings will contribute to targeted policies and interventions aimed at improving healthcare access and reducing disparities in urban settings. By using data from Amuwo-Odofin, Lagos, this research provides context-specific insights into the determinants of HSB, aiding stakeholders in aligning healthcare strategies with local needs.

The Sustainable Development Goals (SDGs), as outlined by the United Nations, notably Goal 3 (Good Health and Well-being), underscore the interconnected nature of poverty eradication and health promotion. Identifying the sources of funding healthcare and their ability to share these resources so that they can help each other achieve common goals are amongst the challenges facing most low- and middle-income countries (LMICs) such as Nigeria. The failure to exploit these components of healthcare financing leads to high poverty rates and a result people inability to use available health services. One of the key factors to determine the quality of human capital, which is needed for growth, is health. Consistent with the foregoing, a consensus of opinion has formed among scholars that recognize health as a public good, supply and demand cannot be left to the invisible hand or of an individual maximally profit maximization as well as utility maximization consider driving only one. Therefore, government needs to play a key role in providing quality, accessible and affordable health services to the majority of the population. Recognizing the importance of the above led the World Health Organization (WHO) to propose issues to the World Health Assembly in 2010 to address health financing, which would ensure quality and affordable health care services (Ataguba and Akazili, 2010).

These key studies and reports provide a foundational understanding of the complex interplay between poverty and healthcare access in Nigeria, offering insights into the challenges faced and the imperative for targeted interventions.

Statement of Problems: The cost of healthcare services in public and private health facilities has skyrocketed in recent years and is likely to continue for many years to come unless interventions are taken urgent.

The quality and affordability of healthcare services have a significant impact on health-seeking behavior, which is a crucial driver of population health. Residents of Amuwo-Odofin Estate in Lagos State, Nigeria, deal with a variety of socioeconomic and infrastructure issues that affect their ability to get medical treatment. Although there exist healthcare facilities, there are questions concerning their affordability, acceptability, and ability to successfully meet the community's health requirements.

If people seek medical attention in a timely manner, it is mostly determined by the quality of healthcare services, which includes elements like infrastructure, service delivery, and personnel competency. The cost of medical services, such as consultation fees, prescription drug costs, and other related costs, can also be a deterrent to getting the treatment that one needs, particularly for low-income households.

Though few studies have explicitly looked at their combined influence on health-seeking behavior in Amuwo-Odofin Estate, studies have shown that these factors contribute to disparities in health outcomes. Designing interventions to enhance healthcare usage and general health outcomes in the region requires an understanding of this dynamic.

By investigating the connection between healthcare service quality and cost and how it affects inhabitants of Amuwo-Odofin Estate's health-seeking behavior, this study aims to close this gap. The results will support evidence-based decisions and initiatives aimed at improving Lagos State's access to high-quality, reasonably priced healthcare services.

Aim and Objectives of the Study

The **Aim** of the study is to improve the quality of health services in the area, in order to reduce the spread of disease and mortality, and thereby increasing the life expectancy of residents in the area.

Objectives:

1. To examine the association between quality of healthcare services and health seeking behavior and easy access to healthcare in Lagos.
2. To examine the association between cost of healthcare services and health seeking behavior and easy access to healthcare in Lagos.

Research Hypotheses

Hypothesis 1

H₁₀: There is no association between quality of healthcare services and health seeking behavior and easy access to healthcare.

H_{1a}: There is association between quality of healthcare services and health seeking behavior and easy access to healthcare.

Hypothesis 2

H₂₀: There is no significant association between the cost of healthcare service and health seeking behavior.

H_{2a}: There is a significant association between the cost of healthcare service and health seeking behavior.

Definition of Terms

I.) Healthcare: Health care, or healthcare, is the improvement of health via the prevention, diagnosis, treatment, amelioration or cure of disease, illness, injury, and other physical and mental impairments in people.

II.) Healthcare Outcomes: This term can be defined as those events occurring as a result of an intervention. It can also be said to be the health consequence brought about by the treatment of a health condition or as a result of an interaction with the health system.

III.) Government Intervention: It refers to the regulatory action taken by the government that aims to change decision made by individuals, organization, or small groups regarding economic and social matters.

LITERATURE REVIEW

Health-Seeking Behavior (HSB)

HSB refers to the various steps individuals take to address their health, including preventive measures, obtaining diagnoses, and seeking treatment. The extent to which individuals utilize healthcare services varies. Some people pursue medical care promptly, while others delay until their health significantly deteriorates. Previous research has established significant links between HSB and factors such as service quality, cost, proximity, education, income, and promptness of care using tools like Chi-square and binary logistic regression analyses (Latanji and Akinyemi, 2018). Accessibility, affordability, and perceptions of service quality are also crucial determinants. Research reveals that communities with accessible and cost-effective healthcare exhibit better health-seeking behaviors (Faronbi et al., 2017).

Cost of Healthcare Services

The cost of healthcare is a critical factor influencing access and usage. High out-of-pocket expenses for consultations, medications, and diagnostic tests act as significant barriers to medical care (Ogunleye et al., 2021). In Nigeria, where health insurance coverage is limited, financial constraints disproportionately impact low-income households, causing delays or avoidance of necessary treatments (Sambo et al., 2023). Consequently, individuals often resort to self-medication or alternative medicine, which may worsen health issues (Faronbi et al., 2017).

In Lagos State, high expenses related to consultations, diagnostics, and medicines discourage timely access to care (Sambo et al., 2023). Similar financial barriers exist in countries like India and Bangladesh, where economic challenges result in delayed or skipped treatments (Balarajan et al., 2011). These findings highlight the need for government-subsidized healthcare and broader insurance schemes to alleviate financial obstacles.

Quality of Healthcare Services

High-quality healthcare services are essential for promoting timely health-seeking behaviors. Factors like infrastructure, the availability of medical supplies, and staff competence are pivotal (Onwujekwe et al., 2022). Poor service quality—marked by extended waiting periods and unfriendly staff—discourages healthcare utilization, resulting in treatment delays and negative health outcomes (Aregbeshola and Khan, 2023). In Lagos, disparities in service quality between public and private facilities exacerbate inequities in healthcare access (Abiodun et al., 2022).

Association between Quality of Healthcare Services and HSB

Perceived quality of care is directly linked to HSB. Superior healthcare services motivate individuals to seek medical attention, whereas perceived poor quality fosters neglect (Onwujekwe et al., 2022). Research indicates that patient satisfaction with provider competence and facility standards significantly influences future health-seeking decisions (Aregbeshola and Khan, 2023). In Lagos, initiatives to improve service quality through investments in medical resources and staff training have proven effective (Abiodun et al., 2022).

A study of civil servants in Ibadan by Latunji and Akinyemi (2018) found that 34.5% of respondents identified good service delivery as the most crucial factor influencing HSB, followed by proximity (23.9%) and affordability (20.4%). Perceptions of provider competence, facility cleanliness, and medication availability are key drivers of improved HSB (Kruk et al., 2018).

Association between Cost of Healthcare Services and HSB

Healthcare costs significantly influence HSB, with high expenses deterring timely and proper utilization (Sambo et al., 2023). Research shows that individuals from low-income households often forego medical attention due to financial constraints, relying instead on cheaper, less effective alternatives (Abiodun et al., 2022). Policies that reduce out-of-pocket healthcare costs, such as subsidized services and expanded insurance, positively impact HSB (Ogunleye et al., 2021).

In Northeast Nigeria, insured patients are more likely to seek care promptly than uninsured ones, emphasizing the protective role of health insurance (Daramola et al., 2020). Similarly, research by Faronbi et al. (2017) highlighted how healthcare costs, long distances to facilities, and limited treatment options affect patients' behavior. Globally, universal health coverage has proven effective in minimizing the financial burdens that deter healthcare utilization, as seen in countries with increased healthcare access and better health outcomes (WHO, 2021).

METHODOLOGY

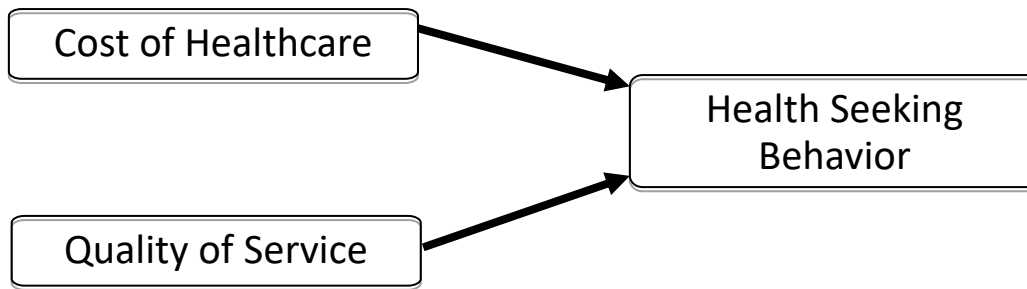


Fig.1: Research Model

Study Design: The study adopted cross-sectional design which allows data to be collected at a single point in time, providing insights into the current situation regarding access to healthcare at Amuwo-Odofin, Mile 2. This design is appropriate for capturing workers, students and young adults perspectives and access related to access to healthcare.

Study Area: The study was conducted at Jakande Estate Zone E, Mile 2.

Study Population: The study population comprised of adults living in the estate. Working class personals and other youths enrolled in filling of the questionnaire at Mile 2 during the survey.

Sampling Technique and Sample Size: A systematic sampling technique was used to sample 305 respondents from Amuwo-Odofin, Lagos-State.

Method of Data Collection: Data gathered involved the distribution of self-administered questionnaires to chosen participants. These questionnaires were administered in person, allowing participants sufficient time to finish them. Clarifications were given upon inquiry.

Method of Data Analysis: Descriptive statistics used, including frequencies and percentages, to summarize the demographic characteristics of the participants. Inferential statistics, such as chi-square test, was employed to test the research hypotheses and analyzed on Statistical Package for Social Sciences (SPSS) version 27.

RESULTS AND DISCUSSIONS

This section elaborates on the discoveries of the study, interpretations of the findings and discussions. It discusses the study variables in details and how they relate. The study collected data from 305 students. The demographic data that was collected was based on age, gender and religious of the respondent etc. the questionnaire contained the scales for testing.

Table 1: Demographic characteristics of the respondents

Demographic characteristics of respondent		Frequency	Percent
Gender	Male	157	51.5
	Female	148	48.5
Age (in years)	16-20	96	31.5
	21-25	130	42.6
	26-30	79	25.9
Religion	Christian	153	50.2
	Muslim	152	49.8

Marital Status	Single	185	60.7
	Married	120	39.3
Family Practice	Monogamy	283	92.8
	Polygamy	22	7.2
Institution Attended	Private school	95	31.1
	Public school	210	68.9

Table 1 shows the demographics analysis of the respondents, out of 305 total respondents sampled, 51.5% of the respondents were males and the remaining 48.5% were females. This implies that male participant was slightly higher than their female counterpart. Also, 42.6% of them were between the age range of 21-25 years. While 60.7% of the sampled individuals in Amuwo-Odofin Estate, Lagos were single, 39.3% were married.

In addition, 31.1% of them were for private school and 68.9% had for public school. While Christian was 50.2%, 49.8% identified as Muslim. And the family practice for monogamy were 92.8% while for polygamy is 7.2%.

H₁₀: There is no association between quality of healthcare services and health seeking behavior and easy access to healthcare.

Table 2: Crosstab of association between some quality of healthcare services and health seeking behavior

Crosstab: Quality of healthcare services * Health seeking behavior						
			Health seeking behavior			Total
			Always	Often	Never	
Quality of healthcare services	very satisfied	Count	0	30	0	30
		Expected Count	3.0	20.3	6.8	30.0
	somewhat satisfied	Count	0	22	0	22
		Expected Count	2.2	14.9	5.0	22.0
	Somewhat dissatisfied	Count	30	123	69	222
		Expected Count	21.8	149.9	50.2	222.0
	Very dissatisfied	Count	0	31	0	31
		Expected Count	3.0	20.9	7.0	31.0
Total		Count	30	206	69	305
		Expected Count	30.0	206.0	69.0	305.0
X ² = 54.802, p-value = 0.001 < 0.05						

The study results show a significant association between the quality of healthcare services and health-seeking behavior (p-value = 0.001 < 0.05). Therefore, the null hypothesis (H₀₁: There is no association between quality of healthcare services and health-seeking behavior) is rejected.

H₂₀: There is no significant association between the cost of healthcare service and health seeking behavior.

Table 3: Crosstab of association between cost of healthcare services and health seeking behavior

Crosstab: Cost of healthcare services * Health seeking behavior						
			Health seeking behavior			Total
			Always	Often	Never	
Cost of healthcare services	Very affordable	Count	2	32	2	36
		Expected Count	3.5	24.3	8.1	36.0
	somewhat affordable	Count	4	16	12	32
		Expected Count	3.1	21.6	7.2	32.0
	Neutral	Count	16	93	10	119
		Expected Count	11.7	80.4	26.9	119.0
	somewhat expensive	Count	2	36	6	44
		Expected Count	4.3	29.7	10.0	44.0
	very expensive	Count	6	29	39	74
		Expected Count	7.3	50.0	16.7	74.0
Total		Count	30	206	69	305
		Expected Count	30.0	206.0	69.0	305.0
X ² = 16.974, p-value = 0.000 < 0.05						

The findings reveal a significant association between the cost of healthcare services and health-seeking behavior ($p\text{-value} = 0.000 < 0.05$). Thus, the null hypothesis (H_{02} : there is no significant association between the cost of healthcare services and health-seeking behavior) is rejected.

DISCUSSIONS OF FINDINGS

The findings of this study highlight the significant impact of healthcare costs and quality of services on health-seeking behavior (HSB) among residents of Amuwo-Odofin, Lagos State. These results are consistent with national and international evidence and provide crucial insights into improving healthcare access and utilization.

Quality of Healthcare Services and HSB

This study identified a significant relationship between healthcare quality and HSB ($p\text{-value} < 0.05$). Residents were more inclined to seek care when services were perceived as efficient, professional, and resourceful. This aligns with Onwujekwe et al. (2022), who noted improved healthcare utilization through enhanced service quality under sub-national insurance schemes. Similarly, Aregbeshola and Khan (2023) found that long wait times, insufficient supplies, and unfriendly staff often discourage care-seeking behavior.

Globally, service quality is a pivotal factor. Kruk et al. (2018) highlighted that low-quality systems in LMICs cause more deaths than inadequate access. Likewise, Waweru et al. (2020) reported that patients in Kenya avoided public facilities due to poor hygiene, delays, and unprofessional staff, preferring private care despite higher costs. Ghanaian research by Duku et al. (2018) emphasized that provider competence and resource availability are critical determinants of HSB.

Cost of Healthcare Services and HSB

The study confirmed a strong association between healthcare costs and HSB (p -value < 0.05). Financial constraints were a significant barrier, particularly for low-income residents. This finding supports Sambo et al. (2023), who highlighted the impact of costs on delayed treatment and alternative practices. Ogunleye et al. (2021) similarly emphasized the prohibitive nature of consultation fees, diagnostics, and medications for low-income households.

Globally, healthcare costs remain a major challenge. Xu et al. (2019) reported that over 930 million people face catastrophic expenses, pushing many into poverty. In India, Gupta et al. (2019) found that high healthcare costs limited access for marginalized groups. Rwanda's health insurance initiatives demonstrate that reducing out-of-pocket expenses can enhance healthcare access and outcomes (Lu et al., 2022).

These findings stress the urgency of implementing financial protection mechanisms, such as subsidized care and insurance, to reduce cost-related barriers and ensure equitable healthcare access across socio-economic groups.

CONCLUSION

The study concludes that the quality of health services is a critical determinant of health-seeking behavior among residents in Amuwo-Odofin, Lagos State. High-quality services, characterized by competent healthcare personnel, adequate medical resources, and positive patient experiences, encourage individuals to seek timely and appropriate medical care. Conversely, perceived poor quality in healthcare delivery may lead to delays in seeking treatment, resulting in negative health outcomes.

The study find that the cost of healthcare remains a significant barrier to accessing health services in Lagos State. High out-of-pocket expenses deter many residents of Amuwo-Odofin from seeking needed medical attention. This financial burden contributes to inequities in healthcare utilization and exacerbates health disparities.

RECOMMENDATION

There should be an intervention from government that will lead to high quality of healthcare services at a reduced cost of healthcare services.

In other words, the government need to spend money updating medical facilities and making sure they have the necessary equipment and qualified people to deliver top-notch treatment. Therefore, it is important to undertake frequent training and professional development programs to improve healthcare personnel' competency and customer service abilities, which will increase patient satisfaction.

To lessen the financial burden of out-of-pocket medical bills, the government should encourage and increase access to health insurance programs, particularly for citizens with low incomes. Lastly, the government could enact laws to regulate the costs of medical treatment in private facilities so that the general public can continue to pay them.

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