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Awareness of Medical Services and Staffs' Productivity Within educational Sectors in Cross River State, Nigeria.

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Abstract
The trust of this paper is to unravel the role of medical services as motivator and workers' productivity in educational sectors. By its objectives, the importance of medical services as motivator to employees shall be discuss. To achieve the purpose of this study, one research question was posed, and one null hypothesis was generated. Survey research design was adopted for the study. A sample of seven hundred and ninety-two (792) respondents out of eight thousand one hundred and twelve (8112) administrative staff being the population was randomly selected from this study. The selection was done through the stratified random sampling technique. Questionnaire was the main instrument used for data collection. The instrument was subjected to face validation. The reliability estimate of the instrument was established using the Cronbach-Alpha reliability method. Pearson Product Moment Correlation Analysis was the statistical analysis techniques adopted in the study. The hypothesis was subjected to testing at 0.05 level of significance with relative degrees of freedom. The results of the findings revealed that, there is a positive relationship between medical services as motivational factor and workers' productivity. Based on the findings of the study, it was recommended among others that management of all educational sectors should ensure that they build a healthy public policy, zero bills, subsided medical services as motivational package for efficient performance and productivity.
Key words: Medical services, Motivation, Productivity

Introduction

In general, most organization exists for the purpose of providing services and at the same time working towards achieving profit motives. To attain sustainability in business given the complexities and competitiveness in an organization, educational sectors must have their cardinal programme, provision of qualitative services as well as employee satisfaction. Thus, achieving this goal anchors mostly on employees' satisfaction. This is because employees can only work hard to achieve a corporate goal only when they are well motivated by their employees." Edoho, Ojong and Ukpanukpong (2024)" pointed out that a highly motivated workforce is indispensable if high performance outcomes are to be achieved consistently in any organization. This goes in line to explain that a motivated employee will certainly perform better than his/her counterpart that is less or not motivated at all.

According to "Andong, Okey. Betiang. Edoho. and Offiong (2023)" . Health' is defined as 'complete physical and mental well-being, not only the absence of illness or infirmity'. To achieve a state that is complete in terms of physical, mental, and social wellbeing, an individual or group must have the ability to recognize and realize their aspirations, satisfy their needs, and adapt to changing environments.

Therefore, health can be described as:

1. A resource for everyday living, not the goal of life
2. A positive concept that stresses the importance of personal and social resources along with physical abilities
3. Being created and lived in daily lives; where one learns, works, and plays
4. Being capable of taking care of oneself and having control over one's own life. (World Health Organization 2018).

"Arikpo and Edoho" (2019) confirm that, it is quite imperative for workers to be protected medically from injuries and ailments in workplace, but sometimes when injuries or ill-health are not prevented, other alternative remedies are sought. The medical services provided within institutions are inadequate because specialized physicians are not on ground; it is only during major cases of injuries and ailment that one is transferred to public or private hospitals for immediate treatment. Askon (2020) had observed that workers' level of productivity has abysmally diminished due to lack of proper medical service which result in ineffectiveness of workers, lack of readiness to work and lack of job satisfaction. Health promotion is one the major interventions employed in healthcare delivery generally as primary health care. Health promotion enables individuals, families, populations and communities to adopt /or adapt

lifestyles that promote and improve good health. It helps the community members to make the right choices that can improve their health. Each individual, population and community have factors that influence their health either positively or negatively.

As noted by Owan (2011), most sudden exhaustion and deaths are preventable as the health solutions are well known. A worker needs access to antenatal care, frequent check ups, stress inducement, conducive environment and easy access to equipment in solving some tasks. Care and support in the weeks by colleagues or head of departments. Service enables professional services to be given to even pregnant staff to promote and maintain the health of the woman and the unborn child till the safe delivery of a mature and healthy baby (Owan, 2011). Improving mental health is one of the eight millennium Development Goals (MDGs) adopted by the international community in 2000. Lots of workers' die untimely due to pressure of work, elated complications around the world every day (World Health Organization, 2014). workers in developing countries have a high average deaths rate than in developed countries, and their life time risk of death due to life style is higher. The probability that a 25-year-old woman/man will eventually die from complicated related causes is 1 in 3700 in developed countries versus 1 in 160 in developing countries (World Health Organization, 2014). The high rate of deaths and abandonment can be prevented with the use of different medical services channels which incorporates free medical checkup, subsided drugs, free mosquito nets free immunization, family planning and free antenatal health education for female workers. In attempt to provide answers to questions and issues raised above, the investigation is to sought to the role of motivational strategies in form of provision of effective and affordable medical services and workers' productivity in tertiary institutions in Cross River State, Nigeria.

Statement of the problem

The outstanding problems here that present itself over and over are; persistent complaints of sick leave permission, delayed upload of results of students due to unwellness, delay in processing of academic transcripts and other important documents, omission of students' results, poor management of official's records, poor documentation, widespread bribery and corruption and other forms of malpractices in tertiary institutions have been major source of concern in this study. Productivity as earlier expressed is the measureable output which an average worker contributes towards realizing the production baseline target of the institution. In order to achieve the institutional baseline target, it takes the collective commitment of the entire work force which works interdependently. Therefore, when individual worker fails to meet up his/her job target or fails to do it properly, it affects the entire institutional target negatively hence leading to low productivity as enumerated above.

To the management, this syndrome is not a pleasant one as this will directly affect the productivity of such institution.

On the other hand, the workers blame the lack of commitment (low productivity) on the management insensitivity towards their general welfare. Owing to non-implementation of agreements on welfare issues, The Non-Academic Staff Union of Universities (NASU) had to go on a warning strike now and then over unpaid salary allowance(s) which is perceived to be the main motivator in tertiary institution. The management failure to adopt effective motivational strategies has contributed immensely to the seeming low level of commitment to duty. Motivational strategies like providing good and affordable medical services and regular payment of other fringe benefits can boost workers' commitment. "Idika, Edoho, Egbai, Ekpo, Richard. Arikpo, Eyong, Felicia.and Ntino," (2024).

In tertiary institutions, approving medical bills regularly, payment of leave grants, calling for appraisals regularly without stringent conditions, approving and sponsoring staff for conferences and workshops, as well as other exchange programs are good motivators. Others include providing effective medical services, payment of honoraria, and hazards allowances. Adopting these motivational strategies may boost workers level of commitment to enhance productivity.

Purpose of the study

The purpose of the study was to investigate the role of medical services as motivational strategic and staff productivity in Cross River State educational sector.

Specifically, the study sought to:

1. Ascertain the extent to which medical services relate to workers' productivity in tertiary institutions in Cross River State.

Statement of the hypothesis

The following hypothesis are formulated to give direction to the study.

1. There is no significant relationship between medical services and workers' productivity in tertiary institutions.

Literature review

Medical services and worker's productivity

The impact of poor health worker on the workplace should not be over emphasized. Workers who suffer from physical or mental health problems are more likely to have higher rates of

absenteeism (reduced productivity when they do come to work). “Edoho, Bella, and Violet, (2022)” support that any employees who do not feel they are supported or treated fairly tend to harbor negative feelings about their work situation. In response, they are more likely to act in an uncooperative manner. On the other hand, a supportive environment will mitigate the potential negative impact of stressful or difficult jobs to some extent. These individual factors have wider implications for workplaces, as they translate into dysfunctional working teams, increased burdens on other employees and more widespread negative attitudes. The costs of workers’ poor health and engagement can multiply if unchecked. In particular, disengaged workers display reduced levels of discretionary effort and cooperation. Good mental and physical health impacts wellbeing, which in turn supports productivity, resulting in a competitive advantage for employers.

Despite significant effort, access to good health and sanitation has not considerably increased over the last two or three decades. The World Health Organization (WHO) estimated that in the mid1970s, some 1.9 billion people had no access to good health and some 2 billion had no access to adequate sanitation. Twenty years later, more than 1.1 billion people worldwide were still deprived of access to good health and the number of people without adequate sanitation actually rose to 2.5 billion (UNESCO, 2000). Kazim (2011) is of the opinion that the purpose of emergency medical services is to fill in the place of first aid which is to sustain life, prevent further injury and promote quick recovery. Wikipedia (2004) defined emergency medical services as services provided to promote treatment to those in need of urgent medical care. The provision of medical services to some institution of learning is necessary. Workers need protection from injuries and ailments in workplace to promote worker’s productivity but when injuries or ill health are not prevented, alternative remedies are sought. The medical services provided within an organization may be inadequate because specialized physicians may not be adequate in number. They may therefore concentrate on emergency.

Skipa (2011) stated that the objectives of laying sound foundation in workplace for worker’s health is a sound way to medical services in order to satisfy the immediate needs of workers who sustain injuries. It is only on major cases of injuries and sickness that one is transferred to public hospitals for specialist treatment, and the cost should be borne by the system or employer. Skipa (2011) observed that the specific objectives of laying sound foundation in workplace for the health of workers is a special way to stabilize productivity just as the saying goes, ‘health is wealth’. In line with the findings, the provision of medical services as a way of promoting productivity becomes a second needs in Maslow’s hierarchy of needs of security, security in medical services for promoting productivity. Workers are always very comfortable and relaxed when environment is decent, having first aid treatment at once when facing

injuries, security threat. Health of workers or employees is inextricably linked to the productivity of the workforce and the health of the nation's economy.

Also many employers allow employees to absent from work because of illness without losing pay. Some employers allow employees to accumulate unused sick leave which may be used in case of catastrophic illnesses. Some tertiary institutions have shifted emphasis to reward people who do not use sick leave by giving them extra pay for not taking sick leave (Pencavel, 2019). The Government has incorporated out-patient medical benefits into personal emoluments thereby making a public servant responsible for his own medical requirement. Health population and indeed workforce are indispensable tools for rapid socio-economic and sustainable development. Odu (2018) sees the National Health Insurance Scheme (NHIS) as a social security system that guarantees the provision of needed health services to beneficiaries on the payment of token contributions at regular intervals as provision of quality, accessible and affordable healthcare that remains serious problem. This is because the health sector is perennially faced with gross shortage of personnel, inadequate and outdated medical equipment, poor funding policies and inconsistencies. Other factors that impede quality health care delivery in Nigeria is inability of the consumer to pay for healthcare services (Pencavel, 2019). Health Insurance Scheme is the health social security which guarantees person's access to good healthcare services (physical and financial) and protect families from the financial hardship of huge medical bills. Productivity of health workers is determined by the setting in which they work, their level of motivation, work institutional, management capacity, the division of labor and other resources (e.g. equipment, drugs, examination rooms, and other characteristics of the setting) available.

"Dieleman and Harnmeijer (2019)" is of the opinion that, all health systems have some aspect of dysfunction, inefficiency. Precondition to the sustainability of past and current investments in health care improvement is the availability of a current and future workforce across the health system that have the competence to lead and participate in improving care. If an employee is overweight, unhealthy, smokes or is stressed, then he/she is unlikely to be as productive as an employee who is none of the above institutions that support workplace health care have a greater percentage of employees at work every day because employee health status can impact both the employee and their family.

Similarly, workplace health programs can reduce the measurable extent to which health symptoms, conditions, and diseases adversely affect the work productivity of individuals who choose to remain at work.

"Idika., Edoho., Egbai., Ekpo., Ojini., Arikpo., Eyong., Dan., and Ntino (2024)" is in line with the fact that lack of motivation breeds conflicts which causes stress on workers and perharps leads to death. On the other hand, 15-20% of employees have greater than three (3) but less than nine (9) health risk factors and account for 50% of all healthcare spending in the United States. These employees have one or more chronic conditions that are generally well managed. Their health management goals might include self-care through education, engagement in a primary care medical home model, reduction or risk factors medication compliance as needed, care coordination, and wellness or healthy lifestyles as well as prevention programs. The third and high-risk group is the 1%-2% of employees with more than nine health risks, these employees have a catastrophic diagnosis, multiple chronic conditions, or advanced disease burden, and are not managed well or are frail. "Edoho**.**, Ojong., Ukpanukpong., and Elizabeth (2024)". Their health management goals might include patient engagement, treatment compliance, informed decision making, care coordination, advanced care planning as needed, and treatment compliance and support. The objective with the high-risk population is to stabilize the care, reduce the barriers to care and compliance, utilize a patient centered care plan, and avoid adverse events. Measures of success for the high-risk population are engagement and activation, appropriate utilization of health care services, reduction in emergency room visits and re-admission as well as provider satisfaction. "(Dieleman, and Harnmeijer, 2019)".

Okara (2011), in his presentation during a conference stated that, improvement of motivation and productivity of workers, staff remuneration and even introduction of in- service training are all driving forces in achievement of higher productivity, to management, it compels workers to be diligent and committed to their primary assignment. In a study conducted by Babita (2010) called 'health as a driving force for productivity', the author employed qualitative and quantitative analysis of collecting data for the study. Twenty (20) companies in Cross River State were used with the population of two thousand nine hundred fourteen employees (2,914). Two hundred (200) workers were sampled, questionnaires was additional instrument of collecting data, three hundred were sent out and then one hundred and eighty were returned. The statistics used was a one-way analysis of variance (ANOVA). The result of the study showed that good health and presence of medical services within any institution premises can actually increases workers' productivity. In order words, it has significantly influenced productivity. Also, "Azeem and Akhtar (2014)" investigated the influence of poor medical services and worker's productivity in an institution. Questionnaire was distributed to 275 respondents in the educational sector and 200 to industrial sector. The statistical package (SPSS) was used to analyze the quantitative data including correlation and reliabilities. The finding of the empirical test shows that employees in those industries have moderate level of balance, job satisfaction, commitment which make them productive. There is a positive

relationship between quality medical services and worker's productivity. Similarly, "Nizeon, Mazzola, Baver, Krueger and Spector (2011)" conducted a study on the topic 'can work make you sick?' A meta-analysis of the relationship between job stressors and physical symptoms in the course of this study was adopted. A meta-analysis of 79 studies reported were cross-sectional and longitudinal. Such relationships were quantitatively summarized and contrasted for both individual symptoms and composite symptom scales.
"Speller and Byrne (2018)" stated that it was important for institutions to take a major role in promoting the health of staff by bringing it to their door steps. The findings added that those who consult their doctors every now and then can be role models as health educators, and that they themselves would be able to positively influence their health status in order to reduce stress.

Over the past decade, effective school health programme has attracted much attention in addressing various health issues pertaining to stress. The study of "Speller and Byrne (2018)" titled Influence of Health Programme and Employees Attitude assessed the implementation of health programme in selected tertiary institutions in lbadan metropolis, Nigeria. Key informant interviews of 21 workers were conducted while observational checklist/ pro format was used to document the components of health programme being implemented. Data from key informant interviews were analyzed using thematic approach. The assessment of the implementation of the various components of the health programme revealed that free medical checkup services and sanitary conditions could be better implemented in majority of the organization. The implementation of health programme should be strengthened through advocacy to relevant stakeholders for provision of funds and health facilities" (Kayode and Taiwo, 2014)".

Research Methodology

The research design adopted for this study was the survey design. The population of this study comprised eight thousand, one hundred and twelve (8112) administrative staff from the six tertiary institutions in Cross River State. These include those from Federal College of Education, Obudu (North); Cross River University of Technology, Calabar (south), School of Nursing and Midwifery, Itighidi (central), College of Health Technology, Calabar, College of Education Akamkpa and the University of Calabar, Calabar**.** Sampling techniqueadopted stratified random sampling techniques on the basis of three strata of educational zones. Simple random sampling technique was used to select staff / workers from six tertiary institutions in cross river state which constitute the sample for thestudy. Simple random sampling was adopted to select required number of staff from institutions base on different faculties,

This study adopted multi-stage sampling, In the first stage, stratified random sampling technique was adopted on the basis of institutions, educational zones, namely: Ogoja, Ikom and Calabar educational zones. Stratified random sampling is a method of probability sampling in which the population was divided into different sub-groups and the elements are to be selected from each sub-group. Purposive sampling technique was used to ensure that only administrative staff of the six tertiary institutions in Cross River State were selected to constitute the sample for the study. Simple random sampling technique was also adopted to select required number of administrative workers from each institution. The sample for this study was made up of eight hundred and eleven (811) administrative workers from the six tertiary institutions in Cross River State. This was randomly selected for the study with approximately 10% to ensure adequate representation of workers. The data were analyzed using Pearson's Product Moment Correlation Analysis at .05 significant level and 890 degrees of freedom**.** The instrument for data collection was a modified likert questionnaire, it was constructed by the researcher under a close supervision and guidance of the researcher supervisor. The questionnaire consisted of three sections; A, B& C with the total of 40 items. Each itewm on the questionnaire require the respondents to express their opinion under Strongly Agree (SA), Agree (A), Disagree (D), & Strongly Disagree (SD). The scoring of the instruments was 4points, 3points, 2points, and 1 point respectively.

Presentation of results

Hypothesis one; Medical services have no significant relationship with junior administrative workers' productivity. The independent variable in this hypothesis is medical services while the dependent variable is junior administrative workers' productivity. To test this hypothesis, medical services was correlated with junior administrative workers' productivity using Pearson product moment correlation analysis. .

Table 1: Pearson product moment correlation analysis of the relationship between medical services and junior administrative workers' productivity (N=792)

Variables	$\sum x$	$\sum y$	$\sum x^2$	$\sum y^2$	$\sum xy$	r-cal
Medical services	13,622		155,619			
					464,382	0.256*
Junior administrative workers' productivity	24,625		442,072			

* Significant at 0.05, critical r = 0.062, df = 790

The result of the analysis as presented in Table 1 revealed that the calculated r-value of 0.256 is significant at 0.05 level of significance with 790 degrees of freedom. With this result, the null hypothesis which stated that there is no significant relationship between medical services and junior administrative workers' productivity was rejected. This result implied that medical services have a significant positive relationship with junior administrative workers' productivity. The positive r showed that the higher medical services, the higher the junior administrative workers' productivity tends to be. On the other hand, the lower the medical services, the lower the junior administrative workers' productivity tends to be.

Discussion and result

Medical services and junior administrative workers' productivity

The result of the hypothesis revealed that medical services has a significant relationship with junior administrative workers' productivity. The finding of this hypothesis is in line with the view of Skipa (2011) who observed that the specific objectives of laying sound foundation in workplace for the health of workers is a special way to stabilize productivity just as the saying goes, 'health is wealth'. In line with this work, the provision of medical services as a way of promoting productivity becomes necessary as indicated by the second needs in Maslow's hierarchy of needs of security and stability in health as means of promoting productivity. The term medical services tend to provides stability and for a secured environment and a stable mind that will definitely stabilize situations when needs arise. Workers are always very comfortable and relaxed when environment is decent and equipped with first aid treatment facilities. Therefore, creating a medical unit with health workers within tertiary institution is a welcome idea.

Summary/Conclusion

The study revealed that motivational strategies (like improved staff remuneration, regular staff promotion, granting of annual leave, regular staff training, affordable medical services and fringe benefits as at when due) are significantly related to perceived productivity of junior administrative workers in tertiary institutions in Cross River State.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. Annual leave in whatever form should not be ignored but should be accepted collectively for better employees' productivity in institutions.
2. Since staff welfare cannot be looked away, staff remuneration should serve as legitimate interest to enhance workers' commitment in tertiary institutions.

3. Management of tertiary institution should ensure regular promotion of deserving staff, payment of promotion arrears and wages, payment of leave benefits, career development and in-service training to their workers to ensure workers retention and hospitality in the place of work.
4. The management of tertiary institutions should also see to it that workers are given privileged of in-service training which will bring about new idea, new techniques, new approaches and high productivity.
5. Management of tertiary institution should ensure affordable medical services for their workers to ensure good health, avoid regular excuses during office hour, promote workers retention and hospitality in the place of work.
6. Government and administrators of tertiary institutions should pay housing allowance, staff salaries, wages, all allowances and many other entitlements as at when due and avoid any kind of favoritisms.

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