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TABLE OF CONTENTS

Title	Page
Estimation of Parallelism of UTME and Post-UTME among Undergraduate Students of Obafemi Awolowo University, Ile-Ife Faleye, B. A. & Eze, C. D. -----	1
In-Class Assessment Strategies and Senior Secondary School Students' Achievement in Electrochemistry Opateye, J. A. -----	15
The Effects of Some Sociological Factors on Career Decision Making among School-Going Adolescents in Katsina State, Nigeria Umar T. I. -----	26
Motivations for Drug Abuse among Students of Tertiary Institutions in Kwara State, Nigeria Adegboyega, L. O., Oniye, A. O. & Adigun, A. -----	33
Learning Styles as Predictor of Performance among Undergraduates of University of Benin, Nigeria Adubale, A. A. -----	40
Will Pedagogy Influence Urban and Rural Students' Knowledge Attitude and Anxiety towards Climate Change? Above, M. A. -----	48
Some Thoughts on Issues Relating to Counselling Children and Young People within School Environment Oramah, E. U. -----	62
The Effect of Some Teachers' Characteristics on Academic Efficacy of Secondary School Students in Lagos State. Adegun, A. O. -----	72
Inspirational Group Therapy (IGT) as a Counselling Strategy for Women in Transition to Menopause Omoworare, S. O. -----	85
Determinants of Poor Corporate Governance in Financial and Manufacturing Firms in Nigeria Adegoke J. F. -----	94
Teacher's Personality Factors as Correlates of Academic Achievement of High Ability Students in Ibadan Fakolade, O. A. & Akinmosin, K. A. -----	110

Effectiveness of Personalized System of Instruction on Students' Retention Ability in Mathematics in Kwara State, Nigeria Adeniyi, C. O.	122
Dispositional and Contextual Factors Influencing Creative Performance of Secondary School Teachers in Ibadan, Oyo State: A Panacea for Academic Reconstruction Agokei, R. C.	134
Appraisal of Moral Freedom among Secondary School Students in Osun State: Implication on Moral Education Curriculum for Improved Morality Quaye, R. M. & Aladejana, A. I.	145
Local Community-Based Clustering Pattern and Sexual Behaviour of Households with HIV/AIDS in Different Residential Densities of a Nigerian Semi-Urban Region. Abegunde A. A., Adedigba M. A., Ogunbodede, E. O., Mobolaji J. W. & Ojo, B.	158
Behaviour Patterns of Nigerian Senior Secondary School Students and their Performance in High-Stake Tests Okesina, A. F.	174
Influence of Socio-Demographic Variables on Job Stress among University Lecturers in South Western Nigeria Soetan, M. K.	186
Patients' Perception of Healthworkers' Attitude towards their Care and Wellbeing in Kwara South Local Government Area of Kwara State, Nigeria Odebode, A. A., Mustapha, M. L. A. & Adeboye, A. A.	192
The Effectiveness of Fishbone Creative Thinking Technique (FCTT) Training on Problem-Solving Skills (PSS) of Teaching Personnel in Ogun State, Nigeria Oba-Adenuga, O. A.	202
Assessing Basic Assumptions of IRT in Mathematics Examination for Junior Secondary School Students in Osun State Ajeigbe, T. O.	211

PATIENTS' PERCEPTION OF HEALTH WORKERS' ATTITUDE TOWARDS THEIR CARE AND WELLBEING IN KWARA SOUTH LOCAL GOVERNMENT AREA OF KWARA STATE, NIGERIA

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Abstract

Patients' perception of health workers attitude towards their care is likely to influence the speed of their recovery. It is essential that professional counsellors investigate the patients' perception of health workers' attitude towards their care and wellbeing. In view of this, this study examined the perception patients hold about health workers' attitude towards their care and wellbeing with Kwara South LGA as case study. The study also examined the influence of gender, age, and educational qualification on the respondents' views. A researcher designed instrument titled 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ)' was used to collect data from six hundred respondents, who were selected through a two-stage sampling procedure. Four research questions were raised while three null hypotheses were formulated and tested using t-test and ANOVA at 0.05 alpha level. The findings of the study showed that patients have a negative perception of health workers' attitude towards their care and wellbeing. It was also found that there was no significant difference in patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender, age and educational qualification. Based on the findings of this study, recommendations were made that hospital management in collaboration with professional counsellors should embark on advocacy drive aimed at creating awareness among health workers about patients' negative perception of their attitudes toward their care and wellbeing. Health Counsellors should be employed and involved in organisation of seminars and workshops from time to time in order to assist health workers to develop positive behavioural disposition towards patients.

Keywords: Attitude, Health workers, Patients, Care and wellbeing

Introduction

The primary function of a hospital is patient care. The patient (irrespective of age, gender, marital status, religion etc.) is the ultimate consumer of health services. Patient care is also one of the yardsticks to measure the success or otherwise of service that the hospital provides (Turkson, 2009). A patient who is the recipient of health care services has certain perception of the health care system. This is likely to include the health workers in general, the environment and the quality of care rendered, this may also be one of the reasons Hogg and Vaughan (2005) stated that patients' satisfaction with an encounter with health care service is dependent on the duration and efficiency of care, and how empathetic and communicable

the health care providers are. The effectiveness of the hospital relates to provision of good patient care and should be paramount to healthworkers; the patient's satisfaction is the real testimony to their efficiency (Al-Daghaiter & Saheed, 2000).

Health workers in this study refers to doctors, nurses, pharmacists and record keeping officers. It is the belief of the researchers that when patients visit the hospital, they would come in contact with at least two of the aforementioned categories of health workers. For instance, a patient that comes for consultation would meet with the record keeping officers first. Also,

patients' perception of healthworkers' attitude refers to the way(s) that patients view the disposition of health workers toward them. It is the perception of healthworkers' attitude to patients.

The Ministry of Health in Nigeria has been particular about quality health care to all and sundry but generally, improvement in health sector appears to be low. This could be because, health sector in many African countries have received inadequate attention (Doyle & Haran, 2000; Turkson, 2009). The way patients perceive health workers is very important in health care, as this would affect patients' dispositions to medication and general care. When patients perceive health workers' attitude to be negative, it could result to loss of lives, morale and trust. Bannerma, Offei, Acquash and Tweneboa affirmed that poor quality health care results to loss of customers, lives, revenue, material resources, time, staff, recognition and individual and communities' apathy towards health services. All these, according to Turkson (2009) contribute to reduced effectiveness and efficiency.

As the hospital serves all the members of the society, it should also be noted that, the perceptions of the users differ from one individual to another because everyone carries a particular set of thoughts, feelings, needs and level of understanding. Patients usually, perceive that the responsibility of the healthworkers is to have positive attitude towards them; they also perceive that healthworkers should be empathic. Patients may not know that this could be difficult for healthworkers to do, considering the ratio of patients to health workers in Nigerian hospital. However, going by the submission of Al-Daghaiter and Saeed (2000), health workers may be perceived as having a positive attitude if some tips such as listening to the patients, asking questions and seeking answers, by doing

something extra for each patient and by admitting mistakes gracefully and so on are used.

According to Health College of Wisconsin Affiliated Hospitals (MCWAH, 2011), attitude of healthworkers can either be positive or negative. **Professional behaviours and positive attitude towards patients include:** clearly identifying one's self with patient and staff, maintaining a clean environment, neat appearance, maintaining composure, treating patients with dignity and respect, collaborating with other members of the healthcare team and treating them with respect, answering questions and explaining the patient's plan of care to patient, family (with patient's permission) and healthcare team members. This means that quality care might be improved by paying more attention to how patients perceive the attitude of health workers, improving the competencies and skills of health workers, improving working environment, provision of up to date health equipment and motivating the health workers for efficiency.

Relationships with patients is critical to health workers. Patients are able the attitude of health workers especially one that is not friendly. Analytically, patients have trust in clinical knowledge and assessment of doctors they perceive as having positive attitude towards them. In the view of Markham (2005), patients view healthworkers' attitude as negative when patients are diagnosed without taking time to listen to their complaints. Although, they may have the right diagnosis at hand and the accurate medications to relieve a patient's condition, patients may not be sure of the quality of care and effectiveness of medication; when a patient does not believe the doctor cares or has heard their complaints properly. Patients are people who are ill and need to be given one form of treatment or the other. These

sicknesses vary from mild, moderate to chronic. Whatever the degree of the illness, patients still have perception of health workers towards them. Although, perceptions may vary as a result of gender, level of education, level of illness among others. It has been suggested by Turkson (2009) that if health programmes are to succeed in developing countries, it is pertinent to get the opinion of the users or consumers

Patients' perception of health care workers cannot be underestimated. The kind of perception that patients have could affect the speed of recovery. A negative perception of health workers attitude could further endanger the lives of patients, many are already in critical conditions as they fail to assess the health care services. Whether it is about the basic package of care that is guaranteed, the waiting times before treatment, access to life-saving health interventions, or vaccination coverage, the patient is always central to policy. If patients perceive all these to be a negative disposition therefore, it should not be handled with levity. In Nigeria, a patient is more likely to die of heart attack as a result of the way they view the attitude of health workers than from the ailment that brought him or her to the health facility in the first place.

The purpose of the study is to examine the patients' perception of health workers' attitude towards their care and wellbeing with study of Ilorin South Local Government Area of Kwara State as a case study. It will also find out if gender, age, and educational qualification will affect the participants' responses.

The researcher has framed the following research questions to be discussed in the course of investigation:

1. How do patients perceive the attitude of health workers towards their care and wellbeing?

Patients' perception of health workers'

2. Is there any difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of age.
3. Is there any difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender.
4. Is there any difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of educational qualification?

The following hypotheses were generated to guide the conduct of this study:

H₁. There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of age.

H₂. There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender.

H₃. There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of educational qualification.

The findings of this study could be of benefit to government by providing information on the level of health care so as to plan and implement programmes. Health Parastatals and Health workers would be given feed back and provide information on the areas that need adjustment. The findings of the study would also be of significance to health counsellors as intervention programmes could be planned for the betterment of the health sector.

Methodology

The research design adopted for this study is the descriptive survey method. The researcher therefore considered the descriptive survey design

method most appropriate because the researchers are interested in describing the patients' perception of health workers' attitude towards their care and wellbeing. The descriptive survey method of research involves direct contact with a population that has characteristics attributes which are relevant to a specific investigation. In the view of Leedy and Ormrod (2005), descriptive survey method is a method that generally involves collections of data from a defined population to describe the present condition of the population using the variables in question.

The population for this study is all patients in General Hospital Offa in Kwara South Local Government Area. The target population for the study is all out patients in the General Outpatient Department (GOPD). The researcher purposely considered patients in the GOPD as it is the first point of call for patients before they are been referred to clinics. A sample, according to

Dunn (2001) is a smaller unit or subset bearing the same characteristic of the population of interest. Therefore, a sample is a mini form of the actual population. A sample size of 600 respondents was selected from the population.

The simple random sampling technique was adopted to select 20 respondents per day. The researchers wrote the names of the patients that registered in the record office on pieces of papers and put in a bowl. A paper was picked and the name on the paper was recorded, this was done until 20 patients were sampled a day. Any patient that was not interested in the study was left out. However, only patients who were not too sick, literate and between the age of 18 years and above were considered for the study. This procedure continued for 30 working days until a total number of 600 respondents were sampled. Table 1 showed the distribution of respondents as they were selected.

Table 1: Distribution of Respondents based on Gender, Age and Educational Qualification

Gender	Frequency	Percentage
Female	322	53.7
Male	278	46.3
Total	600	100.0
Age	Frequency	Percentage
18 - 30 years	191	31.8
31 - 50 years	210	35.0
51 years and above	199	33.2
Total	600	100.0
Educational Qualification	Frequency	Percentage
SSCE and below	40	6.6
NCE/OND	150	25.0
B.SC., B.Ed., B.L	280	47.7
Masters and above	124	20.7
Total	600	100.0

The table showed that 600 respondents were selected to participate in the study out of which 322 (53.7%) were females, while 278 (46.3%) were males. 191 (31.8%) of the respondents were between 18 – 30 years, 210 (35.0%) were between 31 – 50 years, while 199 (33.2%) were 51 years and above. 40 (6.6%) have SSCE qualification and below, 150 (25.0%) have NCE/OND, 280 (47.7%) have B.Sc., B.Ed., B.L., while 124 (20.7%) have masters' degree and above.

The main instrument used in collecting data for this research was a self-designed questionnaire titled 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ). PPHWAQ consists of two sections; sections A and B. Section A sought demographic data such as gender from the respondents while, section B sought information on perception of patients on the attitude of health workers towards their Care and wellbeing; section B consists of 15 items. The sources of the items in section B were from the literature reviewed and they were positively worded. Respondents were to indicate their views by using a four options of 'SA - Strongly Agree (4 points); A - Agree (3 points); D - Disagree (2 points) and SD - Strongly Disagree (1 point). The items were scored using percentages, results were interpreted based on the percentage of each response therefore, any item with 'SA or A' having score of 50% and above was adjudged to indicate a positive perception of attitude of health workers towards care and wellbeing while any item with 'SD or D' having score of 50% and above, indicated a negative perception of attitude of health workers towards care and wellbeing.

To ascertain the usability of the instrument, the questionnaire was pilot tested on a representative sample of twenty out-patients in a private hospital in Offa, Kwara State. These set of out-patients did not eventually participate in the study. Difficult

and ambiguous items which the respondents could not answer were restructured. The validity of the instrument was ascertained by giving the instrument to experts in the field of sociology and medicine to help validate the content and construct validity of the instrument. The experts made corrections and they affirmed that the instrument is valid for use. The reliability of the instrument was established using test re-test method. The researcher administered the instrument on 20 outpatients, after two weeks, the instrument was re-administered on the same set of 20 out-patients. The two scores were correlated using Pearson Product Moment Co-efficient formula. The result yielded a coefficient of 0.68, the instrument is therefore considered to be reliable for the study. Frequency counts, means, standard deviation, t-test and ANOVA were used to analyze the data. All these methods sought to find the difference between the means of two or more variables. All hypotheses were thus, tested at 0.05 significance.

The administration of the questionnaire was done by the researcher with the help of two Research Assistants. The Research Assistants were trained to understand the questionnaire so they can be able to explain to respondents. The Research Assistants helped in administering and collecting back the instrument, this reduced loss of the questionnaire.

Results:

Research Question 1: How do patients perceive the attitude of health workers' attitude towards their care and wellbeing?

To answer this question, the participants' responses to section B of the 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ) analyzed descriptively using frequency counts and percentages.

Table 2: Descriptive Analysis of Patients' Perception of Health Workers' Attitude towards their Care and Wellbeing

Item No.	Whenever I visit the hospital, I perceive that health workers usually:	SA%	A%	D%	SD%
5	make use of polite words.	3.3	2.1	36.3	58.3
4	listen attentively to my complaints	3.7	2.5	35.8	58.0
1	receive me warmly	4.2	3.5	35.0	57.3
16	take my complaints seriously	4.3	4.0	34.7	57.0
10	respect me as an individual	5.0	4.2	34.2	56.7
8	let me know what type of ailment I suffer from	5.5	4.2	34.0	56.3
11	create a conducive environment for me to discuss my ailment	6.0	5.2	33.5	55.3
3	demonstrate that they care for my fast recovery	6.0	5.5	33.5	55.0
7	involve me in the diagnosis of my ailment	6.3	5.5	33.3	54.9
2	take time to ask of my wellbeing	6.3	6.0	33.3	54.3
14	take proper history of my ailment before deciding on the treatment plan	7.0	7.0	33.0	53.0
15	ensure that I am attended to on time	7.3	7.2	32.8	52.7
12	apologize to me when I am not attended to on time	7.3	7.8	32.6	52.6
9	relate with me as if we had known ourselves for a long time	9.3	7.3	32.1	51.3
13	seek my opinion on their treatment plans	9.0	8.5	31.9	50.6
6	crack jokes so that I can feel relaxed	10.0	8.7	31.7	49.6

Table 2 showed the percentages of patients' perception of health workers' attitude towards their care and wellbeing. Item 5 ("make use of polite words when we interact") has the highest percentage of 58.3% of the respondents disagreeing with the statement. Item 4 ("listen attentively to my complaints") has the second highest percentage of 58.0% of the respondents disagreeing with the statement. As shown on the table, fifteen out of the sixteen items with 'SD or D' having percentage score of 50% and above. Therefore, it can be stated that patients hold a negative perception about health workers' attitude towards their care and wellbeing.

Hypotheses Testing:

Hypotheses One: There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of age.

To test this hypothesis, the participants' responses to section B of the 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ) were scored, cumulated and subjected to Analysis of Variance (ANOVA) to test the postulated null hypothesis at 0.05 alpha level.

Table 3: ANOVA on the Patients' Perception of Health Workers' Attitude towards their Care and Wellbeing on the Basis of Age

Source	df	SS	Mean Square	Cal. f-value	Crit. f-value
Between Groups	2	709.250	354.625	2.70	3.00
Within Groups	597	8378.936	131.288		
Total	599	79088.186			

The table showed a cal. f value of 2.70 and a crit. F-value of 3.00. Since the cal.F-value is less than the critical f. Therefore, hypothesis one is accepted.

Hypotheses Two: There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender.

To test this hypothesis, the participants' scores on the 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ) were analyzed using t-test to test the postulated null hypothesis at 0.05 alpha level.

Table 4: Mean, Standard Deviation and t-value on the Patients' Perception of Health Workers' Attitude towards their Care and Wellbeing on the Basis of Gender

Gender	N	Mean	SD	df	Cal. t-value	Crit. t-value
Female	322	56.68	18.93			
Male	278	57.03	19.06	598	1.71	1.96

The table showed a cal. t value of 1.71 and a crit. t value of 1.96. Since the cal.t-value is less than the critical t. Therefore, hypothesis two is accepted.

Hypotheses Three: There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing

on the basis of educational qualification.

To test this hypothesis, the participants' scores on the 'Patients' Perception of Health Workers' Attitude Questionnaire (PPHWAQ) were subjected to Analysis of Variance (ANOVA) to test the postulated null hypothesis at 0.05 alpha level.

Table 5: ANOVA on the Patients' Perception of Health Workers' Attitude towards their Care and Wellbeing on the Basis of Educational Qualification

Source	df	SS	Mean Square	Cal. f-value	Crit. f-value
Between Groups	3	1046.7996	348.9332	2.86	3.00
Within Groups	596	72694.179	121.9701		
Total	599	73740.978			

The table showed a cal. f value of 2.86 and a crit. f value of 3.00. Since the cal.f value is less than the critical f. Therefore, hypothesis three is accepted.

Discussion of Findings

Research question one asked how patients' perceive the attitude of health workers towards their care and wellbeing. Majority of the students disagreed with the items in section B of the questionnaire. This made the researchers to state that patients hold a negative perception of health workers' attitude towards their care and wellbeing.

This is in line with the findings of Obinna (2011) that patients perceived that healthworkers have negative attitude towards patients; they see patients as too demanding, a bother and waste of time. The possible reason for the patients' negative perception of health workers' attitude towards their care and wellbeing could be as a result of their ill health that demands extra care and attention. Health workers who have many patients to attend to might not have time to pay detailed attention to patients.

Hypothesis one stated that there is no

significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of age. This hypothesis is accepted. This thus implies that there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of age. This means that despite the age differences, the perceptions of patients as regards the attitude of healthworkers towards their care and wellbeing do not differ. This finding could be as a result of the way healthworkers relate to patients, age and gender notwithstanding. This is not line with the study of

Ogunleye and Adebayo (2010) that revealed that as an individual grows older, he/she acquires more knowledge and understanding of relationships between issues and perceptions differ.

Hypothesis two stated that there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender. This hypothesis is accepted. This implies that there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender. The finding showed that despite the diversified roles and functions of men and women in the society, gender does not affect the perception of male and female patients as regards the attitude of health workers towards their care and wellbeing. This could be attributed to the fact that health workers relate with patients in the same manner, gender notwithstanding. This could also be that health workers have many patients to attend to and there may be no time to go the extra mile with patients. This could also mean that irrespective of gender, patients notice the attitude of health workers alongside the treatment rendered. This is in line with the findings of Turkson (2009) which revealed that female patients dominated his study, their perceptions of

the attitude of health workers towards care do not differ.

Hypothesis three stated that there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of educational qualification. This hypothesis is accepted. This thus implies that, there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of educational qualification. A possible explanation for this finding is that healthworkers do not relate with different attitude towards patients of different educational qualifications and it could be stated that health workers are not biased in their dealings with patients, patients therefore did not perceive them differently. However this finding disagrees with the findings of Doyele and Haran (2000) who asserted that patients with different educational qualifications perceived the attitude of health workers differently, this was as a result of their skills and experience.

Conclusion

Based on the findings of the study and the discussion that followed, the following conclusions were drawn: patients' hold a negative perception about health workers' attitude towards their care and wellbeing. There is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on the basis of gender, age and educational qualification.

Implications for Health Counsellors

The findings of this study have the following implications for Counsellors:

It has been found out that patients perceive that health workers do not create a conducive environment for them to discuss their ailments,

this implies that, health counsellors should inform health workers on the need to provide a conducive environment for patients to express their concerns, noting that a problem shared is half solved. It was shown in the findings of this study that healthworkers do not involve patients in their treatment plans. The implication of this is that Counsellors should advocate the need for healthworkers to allow patients to take part in their treatment, it is possible that patients value and belief in the treatment given to them especially when they are part of the decision. As found in the result of this study that healthworkers do not apologise to patients when they are not attended to on time, though one of the ethics of health workers is to relate well with patients, Health counsellors should help healthworkers to develop better interpersonal skills towards patients. It was revealed in the study that there is no significant difference in the patients' perception of health workers' attitude towards their care and wellbeing on neither the basis of age, gender nor educational qualification. This implies that, Health counsellors should from time to time organise seminars and workshops to demonstrate the importance of relating well with patients with positive attitude, it should be stated that positive attitude will boost the confidence of patients on

the treatment plan and will also contribute to their fast recoveries.

Recommendations

Based on the findings of this study, it is evident that patients' hold a negative perception of health workers' attitude towards their care and wellbeing, therefore the following recommendations are made:

Hospital management in collaboration with professional counsellors should embark on advocacy drive aimed at creating awareness among health workers about patients negative perception of their attitudes toward their care and wellbeing. Administrators in health institutions might install monitoring gadgets that could be replayed at meetings, these will go along way in enabling healthworkers to relate with positive attitudes towards patients. Healthworkers should try as much as possible to relate well with patients and reduce the waiting time and they should apologise when patients are not attended to on time. Health counsellors should be employed and involved in organisation of seminars and workshops from time to time in order to assist health workers to develop positive behavioural disposition towards patients.

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