

Research Article

Assessing Government Hospital Health Services: A Cross-sectional Study Among Students of Selected Degree Colleges in Etawah

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A B S T R A C T

Background: Government hospitals play a pivotal role in ensuring affordable and accessible healthcare for all. College students, as young adults, often encounter unique health challenges and are an important demographic for understanding public healthcare utilisation. However, the extent to which college-going students aged 18 to 25 years utilize these services remains underexplored.

Methods: A cross-sectional survey was conducted among 100-degree college students in Etawah district, Uttar Pradesh. A structured questionnaire assessed demographics, awareness, utilisation patterns, and barriers to accessing government hospital services. Data were analysed using descriptive statistics and visualized through bar charts, pie charts, and tables.

Results: Awareness of government healthcare services was reported by 65% of respondents, with rural students (72%) showing higher awareness than urban students (58%). Utilisation rates were highest for general outpatient services (45%), followed by specialized care (20%), emergency services (10%), and mental health services (5%). Major barriers included long waiting times (60%), perceived inferior quality of care (40%), and lack of awareness (35%). Mental health services were stigmatised, particularly among male students.

Conclusion: Significant gaps in awareness and utilisation of government healthcare services exist among college-going students. Structured awareness campaigns, infrastructure improvements, and targeted mental health initiatives are recommended to improve accessibility and utilisation.

Keywords: Government Healthcare, College Students, Etawah District, Awareness, Utilization, Mental Health Services, Public Healthcare Barriers

Introduction

Healthcare is a fundamental human right, yet its accessibility often depends on awareness and proactive utilisation of services. In India, government hospitals offer subsidised healthcare to bridge the gap between socio-economic disparities. College students, being in a transitional phase of life, face unique health challenges, including mental health concerns, lifestyle disorders, and reproductive health issues. Understanding their engagement with government healthcare services can provide insights into barriers and opportunities for policy intervention.

Objectives of the Study

- To assess the level of awareness regarding government hospital facilities among students of selected degree colleges.
- To examine the pattern and frequency of utilisation of various government healthcare services.
- To identify barriers faced by students in accessing these services.
- To suggest strategies to enhance utilisation among this group.

Methodology

Study Design

A cross-sectional survey was conducted.

Study Setting

The study was carried out in selected degree colleges located in Etawah district, Uttar Pradesh.

Study Population

Students aged 18 to 25 years enrolled in undergraduate courses.

Sampling Frame and College Selection

Etawah district has several government and private degree colleges. Due to logistical constraints such as time, resources, and administrative permissions, it was not feasible to include all colleges in the study. Therefore, two-degree colleges (one urban and one rural) were purposively selected to ensure representation of students from both urban and rural backgrounds.

These colleges were chosen based on the following criteria:

- Accessibility and willingness of college administration to allow data collection
- Availability of a diverse student population in terms of gender, residence, and socio-economic background
- Feasibility of reaching students within the study duration

Sample Size

A sample size of 100 was chosen based on feasibility and resource constraints, aiming for initial insights through

convenience sampling. No formal statistical calculation was applied.

Sampling Method

The study included students from 2 randomly selected degree colleges out of 36 total in Etawah. Inclusion criteria were students aged 18–25 years enrolled in regular courses. Those unwilling to consent or with prior professional medical exposure were excluded. Stratified random sampling was used to ensure both urban and rural representation.

Inclusion Criteria

- Students aged 18 to 25 years
- Enrolled in regular undergraduate courses
- Willing to provide informed consent

Exclusion Criteria

- Students absent during data collection
- Those unwilling to participate
- Those with prior healthcare professional experience (to avoid bias)

Data Collection Tools

A pre-tested, structured questionnaire was used. It collected information on demographics, awareness, utilisation, and perceived barriers to accessing government healthcare services. The questionnaire was validated by public health experts and refined after a pilot with 10 students.

Duration of Utilization Measured

Respondents were asked about their use of healthcare services in the past 12 months to capture a realistic pattern of utilisation.

Data Analysis

Data were entered into MS Excel and analysed using SPSS software. Descriptive statistics (percentages and frequencies) were used. Graphical representations included bar charts and pie charts.

Findings and Discussion

Awareness Levels

Out of 100 respondents, only 65% were aware of the healthcare services provided by government hospitals. Awareness levels were higher among students from rural areas (72%) compared to their urban counterparts (58%).

Table 1. Comparative Awareness Levels Among Urban and Rural

Category	Percentage Awareness
Urban Students	58%
Rural Students	72%
Overall Average	65%

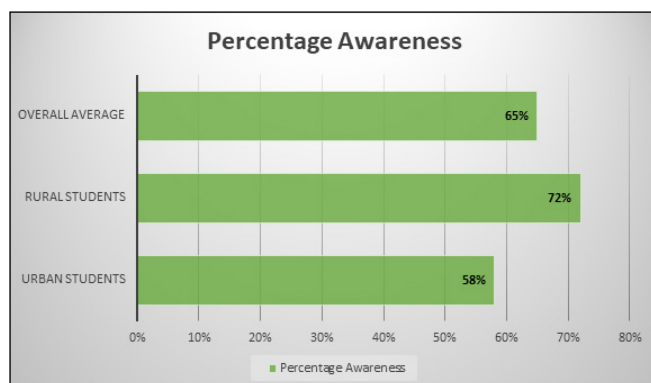


Figure 1. Bar chart showing awareness levels among urban and rural students

The comparative awareness levels regarding [Assessment of Government Hospital Health Services] show notable variation between urban and rural students. While 72% of rural students were aware, only 58% of urban students reported awareness, with an overall average of 65%. These findings are illustrated in Figure 1.

Utilization of Services

- General Outpatient Services: Utilised by 45% of respondents.
- Specialised Care (e.g., gynaecology, orthopaedics): Utilised by 20%.
- Emergency Services: Utilised by 10%.
- Mental Health Services: Utilised by only 5%.

The low utilization of mental health services highlights the need for greater promotion and destigmatisation efforts.

Table 2. Pattern of Health Service Utilization Among Respondents

Service Type	Utilization (%)
General Outpatient	45%
Specialized Care	20%
Emergency Services	10%
Mental Health Services	5%

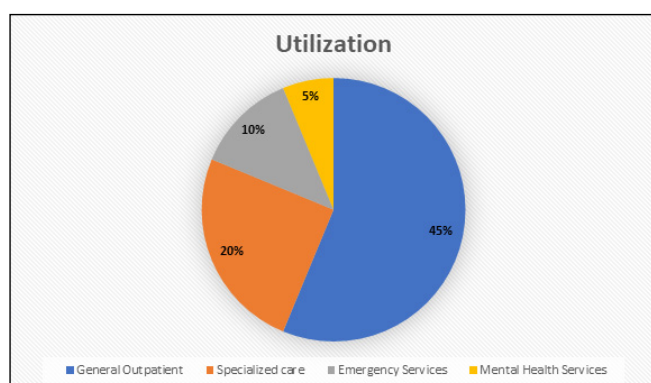


Figure 2. Pie chart depicting utilization of different healthcare services

The analysis of healthcare service utilization patterns revealed that general outpatient services accounted for the highest usage at 45%, followed by specialized care (20%), emergency services (10%), and mental health services (5%). These proportions are illustrated in Figure 2.

Barriers to Utilisation

The study identified multiple barriers:

- Long Waiting Times: Reported by 60% of students.
- Perceived Inferior Quality of Care: Reported by 40%.
- Lack of Awareness: 35% of students cited insufficient information about available services.
- Stigma Around Mental Health Services: Especially among male students.

The socio-demographic distribution of the study participants showed that 60% were male and 40% were female. The majority of respondents (45%) were aged between 18–20 years, followed by 40% in the 21–23 age group. Most participants (55%) belonged to the lower socio-economic class, while 35% were from the middle class and only 10% from the upper class. These characteristics are summarized in Table 3.

Table 3. Socio-Demographic Profile of the Study Participants

n = 100

Characteristic	Frequency	Percentage
Male	60	60%
Female	40	40%
Age 18–20	45	45%
Age 21–23	40	40%
Age 24–25	15	15%
Lower socio-economic	55	55%
Middle	35	35%
Upper	10	10%

Discussion

The findings align with prior studies indicating urban-rural disparities in health awareness. The low uptake of mental health services suggests entrenched stigma, particularly among males. Compared to national reports (MoHFW, 2023)¹, awareness remains moderate, but underutilisation is concerning.

Limitations

- Small sample size and limited college selection restrict generalisability.
- Self-reported data may introduce recall bias.
- No formal statistical association tests were conducted.

Recommendations

- Conduct health awareness programs in colleges to improve knowledge of available government services.
- Reduce waiting time by introducing student-specific service counters in hospitals.
- Improve service perception through better patient interaction and visible service charters.
- Promote mental health access via counselling, awareness drives, and peer-support programs.
- Enhance service visibility using updated online platforms and clear in-hospital signage.
- Introduce feedback systems for students to report issues and suggest improvements.
- Foster College-Health Department Collaboration for regular camps and health promotion activities.

Conclusion

The study highlights a significant gap between awareness and utilisation of government hospital services among college-going students in Etawah district. Addressing these gaps through targeted interventions can empower students to access affordable and quality healthcare, thereby fostering a healthier youth population.

Conflict of Interest: None

Source of Funding: None

Author's Contribution: All authors have contributed equally

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