

**PATIENTS PERCEPTION AND SATISFACTION WITH NURSING CARE IN A
PRIMARY HEALTH CARE CENTER IN BENIN CITY**

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IN PARTIAL FUFILMENT OF THE AWARD OF “BACHELOR OF NURSING SCINCE”.

FACULTY OF NURSING SCIENCE, UNIVERSITY OF BENIN

OCTOBER, 2025

DECLARATION

This is to certify that the research titled: Patients Perception and Satisfaction with Nursing Care in A Primary Health Care Centre in Benin City was carried out by Palmer Favour Ruth. It is solely the result of my work except were acknowledged as derived from other person(s) or resources.

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CERTIFICATION/APPROVAL

This is to certify that this research project by PALMER FAVOUR RUTH with matriculation number, BMS1906413 has been approved for the award of BACHELOR OF NURSING SCIENCE

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DEDICATION

This project work is dedicated to Almighty God for His Grace, Protection and Mercy throughout the period of this research.

ACKNOWLEDGEMENT

I would like to begin by giving all the glory to the Almighty God, the sovereign owner of my life. I am eternally grateful for His guidance, protection, and unfailing provision throughout my life and academic journey.

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ABSTRACT

This study assessed the patient perception and satisfaction with nursing care in a Primary Health Care Centre in Benin City. A descriptive cross-sectional design was employed and a sample of 150 patients was selected using a non-probability convenient sampling technique. Data were collected through a structured questionnaire. The collected data were analysed using SPSS version 24.0 employing descriptive statistics and chi-square to analyse the collected data. The findings revealed there is a significant relationship between patients' perceptions and their satisfaction with nursing care in a primary health care centre in Benin City. The study concluded that understanding patient perceptions and satisfaction within this context is critical for identifying gaps in nursing care delivery and developing strategies to improve service quality. The study further suggested that in-depth qualitative studies, such as interviews or focus groups, can provide deeper insights into the personal experiences, expectations, and cultural factors influencing patient satisfaction.

Keywords: Perception, Satisfaction, Nursing care, Primary Health Care Centre

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CHAPTER ONE

INTRODUCTION

1.1 Background of study

Patient perception and satisfaction with nursing care are integral aspects of healthcare delivery, serving as critical indicators of care quality and patient-centered approaches (Kahlert *et al.*, 2020). These concepts have garnered significant attention as healthcare systems globally strive to meet the evolving demands and expectations of patients. Patient perception refers to the way individuals interpret and understand the care they receive, influenced by their personal experiences, cultural values, and healthcare expectations. Satisfaction, on the other hand, measures the extent to which these expectations are met or exceeded during interactions with healthcare providers (Palese *et al.*, 2021). Together, these concepts shape patient outcomes, adherence to treatment plans, and overall trust in healthcare systems, making them pivotal in evaluating and improving nursing care delivery (Olowokere *et al.*, 2023).

Nursing care is a cornerstone of healthcare systems worldwide, characterized by its direct and sustained interactions with patients. Nurses are often the first and most frequent points of contact in healthcare settings, and their ability to provide compassionate, competent, and culturally sensitive care directly impacts patient satisfaction levels (McFarland & Epps, 2022). This critical role underscores the importance of continuously assessing and addressing factors that influence patient perception and satisfaction with nursing care to enhance healthcare delivery outcomes.

Globally, the relationship between patient satisfaction and nursing care has been extensively studied across various healthcare systems. In developed countries such as the United States, patient satisfaction is often used as a key performance indicator for healthcare facilities.

McFarland & Epps (2022) explored this dynamic and found that effective communication, empathy, and timely responses are among the most significant factors influencing patient satisfaction with nursing care. The study further highlighted that personalized care and attentiveness to patient needs are fundamental to achieving high satisfaction levels.

In Europe, the emphasis on patient-centered care has led to significant advancements in measuring and improving patient satisfaction. For instance, in Germany and the United Kingdom, healthcare systems have integrated patient satisfaction metrics into policy-making and quality improvement programs (Kahlert *et al.*, 2020). These metrics focus on various aspects of nursing care, including the quality of nurse–patient interactions, technical competence, and cultural responsiveness. Such findings have underscored the need for a holistic approach to nursing care that addresses both clinical and emotional aspects of patient well-being.

In contrast, studies from Asia reveal a diverse range of factors influencing patient satisfaction, shaped by the region’s vast cultural and economic heterogeneity. Patel *et al.* (2023) examined patient perceptions in rural and urban India, identifying significant disparities driven by access to healthcare services, resource availability, and the cultural dynamics of nurse–patient relationships. Similarly, in China, patient satisfaction levels have been linked to the implementation of innovative care delivery models, emphasizing the importance of resource optimization and patient-centered practices in enhancing nursing care quality.

Sub-Saharan Africa presents unique challenges to achieving high patient satisfaction due to systemic issues such as resource constraints, workforce shortages, and infrastructural deficits. In Ghana, Adu-Gyamfi *et al.* (2021) found that while nurses demonstrate dedication and competence, patient dissatisfaction often stems from long waiting times, inadequate communication, and limited access to healthcare resources. The study emphasized the need for

targeted interventions to address these systemic barriers and improve patient experiences. In Kenya, Nyongesa et al. (2023) reported similar findings, with high patient-to-nurse ratios and infrastructural limitations significantly impacting patient satisfaction levels.

In Nigeria, patient perception and satisfaction with nursing care are gaining increasing attention as key components of healthcare delivery. The country's healthcare system, particularly its primary care sector, serves as the foundational layer for addressing the healthcare needs of a growing population. However, challenges such as limited resources, inadequate staffing, and inconsistent quality of care have continued to hinder the delivery of optimal nursing services (Ogunleye *et al.*, 2020). Studies have shown that patient dissatisfaction in Nigerian healthcare facilities often arises from delays in receiving care, perceived neglect, and communication barriers between patients and nurses (Olowokere *et al.*, 2023). These issues are compounded by cultural expectations, socioeconomic disparities, and systemic inefficiencies, which further shape patient perceptions and experiences.

Primary care facilities in Nigeria, designed as the first point of contact for most patients, play a crucial role in determining overall satisfaction with healthcare services. These facilities are often characterized by their proximity to communities, making them essential for promoting health equity and accessibility. However, the challenges faced by primary care facilities, such as limited infrastructure, insufficient workforce, and inadequate patient-centered care approaches, significantly impact the quality of nursing services provided (Ogunleye *et al.*, 2020). Addressing these challenges is essential for enhancing patient satisfaction and fostering trust in the healthcare system.

In Benin City, primary care facilities are vital for meeting the healthcare needs of a diverse population. Understanding patient perceptions and satisfaction within this context is critical for

identifying gaps in nursing care delivery and developing strategies to improve service quality. Recent studies in Nigeria emphasize the importance of incorporating patient feedback into healthcare planning and policy development to address systemic inefficiencies and improve care experiences (Olowokere *et al.*, 2023). This study aims to explore the dynamics of patient perception and satisfaction with nursing care in selected primary care facilities in Benin City, providing valuable insights into patient experiences and identifying areas for improvement.

1.2 Statement of Problem

Patient perception and satisfaction are essential in assessing the quality of healthcare delivery and determining patient-centered outcomes, particularly in nursing care. Despite the critical role of nursing in promoting positive health outcomes, studies indicate that patients in primary care facilities, especially in low- and middle-income countries like Nigeria, often report dissatisfaction with nursing services due to systemic, cultural, and interpersonal challenges (Ogunleye *et al.*, 2020). Inadequate communication, delayed care, limited resources, and insufficient attention to patient-specific needs are common issues that negatively impact patient satisfaction in these settings (Olowokere *et al.*, 2023).

Primary healthcare facilities, designed to provide accessible and equitable healthcare services, are often the first point of contact for patients. However, in Nigeria, resource constraints, infrastructural deficits, and high patient-to-nurse ratios hinder the delivery of quality nursing care (Adu-Gyamfi *et al.*, 2021). These challenges not only compromise care delivery but also reduce patient trust and confidence in the healthcare system. Furthermore, cultural expectations and a lack of patient-centered care exacerbate dissatisfaction, leading to reduced adherence to treatment plans and poor health outcomes (Nyongesa *et al.*, 2023).

In Benin City, these issues are particularly concerning due to the growing demand for primary healthcare services amidst limited resources. While existing studies have explored broader healthcare satisfaction, there is limited research focused specifically on nursing care in primary healthcare facilities in this region (Adepoju *et al.*, 2022). This study aims to investigate patient perceptions and satisfaction with nursing care in selected primary care facilities in Benin City, identifying the underlying challenges and proposing actionable solutions to improve the quality of care delivered.

1.3 Aim

To assess Patient perception and satisfaction with nursing care in a primary health care center in Benin City.

1.4 Objectives

1. To assess patient's perceptions of nursing care rendered in primary health care centers in Benin City.
2. To evaluate patient satisfaction with nursing care in a primary health care center in Benin City.
3. To identify factors influencing patient perceptions of nursing care in a primary health care center in Benin City.

1.5 Research Questions

1. What are patients' perceptions of nursing care rendered in a primary health care center in Benin City?
2. What is patient satisfaction with nursing care in a primary health care center in Benin City?
3. What are the various factors influencing patient perceptions of nursing care in a primary health care center in Benin City?

1.6 Hypothesis

H₀: There is no significant relationship between patients' perceptions and their satisfaction with nursing care in a primary health care center in Benin City.

H₁: There is a significant relationship between patients' perceptions and their satisfaction with nursing care in a primary health care center in Benin City.

1.7 Significance of the Study

The significance of this study lies in its potential to enhance the quality of nursing care and patient satisfaction in primary care facilities. By examining patient perceptions and satisfaction with nursing services, the research aims to identify key factors influencing care delivery. The findings will provide valuable insights for improving nursing practices, shaping nursing education, and guiding healthcare policies. Additionally, the study will contribute to the broader nursing profession by emphasizing the importance of patient-centered care and offering recommendations to address challenges in healthcare delivery, ultimately benefiting patients, healthcare providers, and the government.

1. To Nursing Practice

This study will provide valuable insights into how patients perceive nursing care and their levels of satisfaction, offering direct feedback that can be used to improve nursing practice. Understanding these perceptions will help nurses identify areas needing improvement, such as communication skills, responsiveness, and overall quality of care. Improved patient–nurse relationships can lead to better patient outcomes and enhanced job satisfaction among nurses.

2. To the Nursing Profession

The findings will contribute to the development of nursing as a profession by highlighting the importance of patient-centered care. By identifying factors that influence patient satisfaction and

perceptions, this research can guide the adoption of best practices and policies that ensure highquality nursing care. It reinforces the professional responsibility of nurses to enhance patient care

3. Nursing Research

This study will add to the growing body of nursing research focused on patient satisfaction and nursing care quality, particularly in the context of primary care facilities in Benin City. It will open avenues for further studies on improving patient perceptions and care outcomes and may serve as a foundation for longitudinal studies and cross-regional comparisons.

4. To Nursing Education

Findings from this study will inform nursing education programs by identifying essential skills and priority areas such as effective patient communication, empathy, and clinical practice. Educators can use these insights to tailor curricula that equip future nurses with the capabilities necessary to meet patient expectations.

5. To Patients

This study offers patients an opportunity to voice their opinions on nursing care, contributing to improved care experiences. Better understanding of patient satisfaction factors can lead healthcare providers to adopt more tailored, patient-centered practices, resulting in improved patient outcomes and increased trust.

6. To the Government

The study's findings will provide essential data to guide healthcare policies aimed at improving primary care services. Insights into the relationship between nursing care and patient satisfaction can inform decisions on resource allocation, staff training, and policy interventions to improve healthcare delivery.

1.8 Scope of the Study

- 1. Setting:** The study is focused on primary care facilities in Benin City, Edo State, Nigeria.
- 2. Participants:** The study targets patients who have received nursing care in selected primary care facilities within Benin City.
- 3. Variables:** The research examines factors influencing patient perceptions and satisfaction with nursing care, including nurse–patient communication, care quality, healthcare accessibility, and socioeconomic factors.

1.9 Operational Definition of Terms

- 1. Patients:** Individuals who seek or receive nursing care in primary care facilities for various health conditions.
- 2. Nursing Care:** The quality and effectiveness of the care provided by nurses, including tasks such as patient assessment, administering treatments, providing emotional support, and educating patients about health management.
- 3. Satisfaction:** The level of contentment patients feel regarding the nursing care received in a Primary Health Care Facility.

CHAPTER TWO

LITERATURE REVIEW

2.0 Overview

This chapter reviews extant literature as it relates to the present study. It is discussed under the following headings: conceptual review, empirical review, and theoretical framework. The literature reviewed is organized under the following sub-headings:

2.1 Conceptual Review

Patient Perception in Healthcare

Patient perception plays a crucial role in shaping healthcare experiences and outcomes. It refers to the way individuals interpret their interactions with healthcare providers, services, and systems, which ultimately influences their level of satisfaction and adherence to medical recommendations. Perception is subjective and varies from person to person, depending on factors such as prior healthcare experiences, cultural background, communication with healthcare professionals, and personal expectations (Eshete et al., 2023). Understanding patient perception is essential for healthcare providers, especially nurses, as it allows them to tailor their services to meet the unique needs of diverse patient populations.

Prior experiences significantly influence how patients perceive healthcare services (Khan *et al.*, 2020). A history of positive interactions with healthcare providers often leads to increased trust, confidence, and willingness to seek medical care. On the other hand, negative past experiences, such as perceived neglect, misdiagnosis, or poor treatment, can create skepticism and reduce patient engagement (Khan *et al.*, 2020). For example, a study conducted among diabetic patients in North Shoa Zone found that patients with a strong perception of their illness were more likely to adhere to prescribed medications and treatment regimens (Eshete *et al.*, 2023). This indicates

that healthcare providers must not only focus on clinical interventions but also on fostering positive experiences that enhance patient perception.

Cultural background also plays a fundamental role in shaping patient perception. Different cultural groups have distinct beliefs about health, illness, and medical treatment, which influence their expectations and interactions with healthcare systems (Wikipedia, 2025). Some cultures prioritize holistic and traditional healing methods, while others may emphasize biomedical approaches. Healthcare providers must develop cultural competence to ensure that they respect and integrate diverse cultural beliefs into patient care. According to the Connecticut Insider (2025), cultural humility has been identified as a critical factor in building trust between patients and healthcare professionals. By acknowledging and accommodating cultural differences, nurses can enhance patient comfort and improve the overall perception of care.

Effective communication between healthcare providers and patients is another key determinant of patient perception. When nurses and doctors communicate clearly, listen actively, and demonstrate empathy, patients are more likely to feel valued and understood (Wall Street Journal, 2025). Miscommunication, on the other hand, can lead to frustration, misunderstanding of medical instructions, and dissatisfaction with care. In a study assessing patient adherence to treatment plans, it was found that physicians often underestimated the extent of medication nonadherence among their patients (Khan *et al.*, 2020). This gap highlights the need for improved patient-provider communication, as patients who do not fully comprehend their treatment plans may struggle with adherence, leading to worsened health outcomes.

Patient expectations also play a significant role in shaping their perception of healthcare services. Every patient enters a healthcare facility with certain expectations regarding the quality of care, responsiveness of healthcare providers, and effectiveness of treatment (Eshete *et al.*, 2023).

When these expectations align with their actual experiences, they are more likely to have a positive perception of care. However, if their expectations are not met whether due to long wait times, lack of communication, or perceived neglect patients may develop negative perceptions that affect their overall satisfaction. This is particularly important in primary care settings, where patients expect prompt attention, personalized care, and effective management of their health concerns.

The impact of patient perception extends beyond individual satisfaction to influence healthcare utilization and adherence to treatment. When patients have positive perceptions of healthcare services, they are more likely to seek timely medical attention, adhere to prescribed treatments, and participate in preventive healthcare measures (Eshete *et al.*, 2023). Conversely, negative perceptions may lead to avoidance of healthcare facilities, delayed treatment, and poor adherence to medical recommendations. A study in Karachi, Pakistan, revealed that physicians estimated the rate of medication non-adherence to be 40%, whereas the actual rate among patients with chronic diseases was found to be 85% (Khan *et al.*, 2018). This discrepancy suggests that healthcare providers must pay closer attention to patients' perceptions and address barriers that contribute to non-adherence.

Determinants of Patient Satisfaction in Primary Health Care Facilities

Patient satisfaction is a multidimensional concept that reflects the degree to which patients feel their expectations regarding healthcare delivery have been met. In primary health care (PHC) settings, where the first point of contact with the healthcare system occurs, patient satisfaction serves as a critical indicator of the quality and effectiveness of care (Adepoju *et al.*, 2022). Satisfaction is influenced by a combination of interpersonal, structural, and systemic factors,

including the behavior of healthcare providers, availability of resources, waiting time, facility environment, and the effectiveness of communication.

1. Behavior of Health Care Providers

One of the most significant determinants of patient satisfaction in PHC facilities is the attitude and interpersonal behavior of healthcare providers, especially nurses. Patients often evaluate their care experiences based on how they are treated interpersonally. Respect, empathy, patience, and active listening by nurses and other healthcare workers greatly enhance satisfaction levels. According to Oyeyemi and Abubakar (2021), patients in Nigerian PHC centers reported higher levels of satisfaction when they perceived nurses as compassionate, attentive, and courteous. Conversely, patients who felt ignored or treated rudely expressed dissatisfaction regardless of the clinical outcomes of their visit. The interpersonal aspect of care serves as both an emotional and psychological reinforcement of the patient's experience.

2. Waiting Time and Service Promptness

Long waiting times are often cited as a major source of frustration for patients in public PHC centers, particularly in resource-limited settings where understaffing and high patient volumes are common (Ameh *et al.*, 2021). Patients tend to evaluate the quality of healthcare not just by outcomes, but by the efficiency of service delivery. A cross-sectional study conducted in SouthWest Nigeria showed that reducing waiting time significantly increased overall satisfaction scores among patients attending PHC facilities (Adepoju *et al.*, 2022). Timeliness is perceived as a marker of respect for patients' time and needs, and delays are often interpreted as signs of inefficiency or neglect.

3. Availability of Medical Resources

The availability of essential resources, including drugs, diagnostic tools, and basic infrastructure, shapes patients' perception and satisfaction in PHC. Patients are more satisfied when they are confident that the facility can meet their healthcare needs in a timely and effective manner. The unavailability of essential medications or lack of equipment for basic tests often leads to dissatisfaction and loss of trust in the system (Odetola, 2020). In rural areas, where alternative facilities may be scarce, resource limitations compound patient frustration. Additionally, poor physical conditions of facilities such as unclean environments, inadequate water supply, or broken furniture can negatively affect satisfaction by giving the impression of neglect and low-quality care.

4. Communication

Effective communication and information sharing between healthcare providers and patients are crucial determinants of satisfaction. When patients understand their condition, treatment plans, and follow-up procedures, they feel more involved and in control of their healthcare journey (Ameh *et al.*, 2021). Studies have shown that patients who receive adequate information and have opportunities to ask questions report significantly higher satisfaction than those who feel uninformed. In the Nigerian context, where health literacy levels may vary, the ability of nurses and other health workers to simplify complex medical terminology into understandable language is vital for enhancing patient experience (Oyeyemi & Abubakar, 2021).

5. Accessibility and Affordability of Care

Accessibility and affordability are critical to satisfaction in PHC settings. When services are easily reachable and financially accessible, patients tend to report higher satisfaction (Odetola, 2020). In many Nigerian PHC centers, affordability is a key concern, particularly for patients from low-income households. Despite government efforts to provide free or subsidized primary

care, hidden costs such as the need to purchase medications externally due to shortages can negatively affect patient satisfaction.

6. Patient Involvement in Decision-making

Patient-centered care encourages shared decision-making, where patients are treated as partners in their healthcare. When patients are involved in discussions about treatment options and can express their preferences, they tend to feel more respected and empowered, which enhances satisfaction (Adepoju *et al.*, 2022). However, in many PHC settings, particularly in developing countries, a paternalistic approach still prevails, with decisions often made without consulting the patient. This lack of inclusion may contribute to feelings of powerlessness and dissatisfaction.

7. Continuity of Care

Continuity of care and follow-up practices significantly affect patient satisfaction. Patients prefer facilities that provide consistent follow-up and allow them to see the same nurse or doctor over time. Consistent care builds trust, fosters a better understanding of a patient's history, and enhances the overall quality of care (Ameh *et al.*, 2021). When care is fragmented or follow-up is lacking, patients may become frustrated by having to repeat their medical histories at each visit, leading to reduced satisfaction.

8. Socio-demographic Factors

Socio-demographic factors, such as age, education level, and socio-economic status, can also influence patient expectations and satisfaction levels. For example, more highly educated patients might expect greater communication and involvement in decision-making, whereas older patients may value empathy and reassurance more. A study by Oyeyemi and Abubakar

(2021) found that patients with tertiary education were less satisfied with the level of information received from PHC workers, possibly because their expectations were higher. Recognizing these demographic variations can help tailor services to the unique needs of different patient groups.

Challenges in Assessing and Improving Patient Satisfaction in Primary Health Care

Facilities

Patient satisfaction is a crucial metric for evaluating the quality of healthcare services, particularly in PHC settings where patients experience their initial interactions with the healthcare system. However, assessing and improving patient satisfaction presents several challenges, ranging from methodological difficulties in measurement to structural limitations within healthcare systems. These challenges hinder efforts to enhance care quality and ensure that patient expectations are effectively met (Ameh et al., 2022). Understanding these challenges is essential for designing strategies that improve patient-centered care, increase trust in healthcare providers, and optimize health outcomes.

1. Subjectivity of Patient Experiences

One significant challenge in assessing patient satisfaction is the subjectivity of patient experiences. Satisfaction is influenced by individual expectations, cultural perceptions, and personal health beliefs. Two patients receiving the same services may report different satisfaction levels due to personal biases, past experiences, and socio-economic backgrounds (Adepoju et al., 2021). Additionally, non-clinical factors such as waiting times, provider

attitudes, and facility cleanliness can influence satisfaction independently of the actual quality of care provided (Odetola, 2020).

2. Lack of Standardized Instruments

Another challenge is the absence of standardized measurement tools for assessing patient satisfaction. Various instruments such as structured questionnaires, interviews, and feedback forms are used to evaluate satisfaction, yet no universally accepted approach exists (Ameh et al., 2022). Some surveys focus on specific aspects (e.g., provider communication) while others assess overall satisfaction, making comparisons across studies or settings difficult. Furthermore, many current assessment tools have not been culturally adapted to reflect the specific expectations and health-seeking behaviors of patients in different regions (Oyeyemi & Abubakar, 2021).

3. Inadequate Training of Healthcare Professionals

Inadequate training in patient-centered care further complicates efforts to improve satisfaction. Many nurses and healthcare workers in PHC settings focus primarily on clinical duties, with limited emphasis on interpersonal communication and emotional intelligence (Oyeyemi & Abubakar, 2021). A lack of empathy, poor communication, and dismissive attitudes are common sources of patient dissatisfaction. Training programs designed to enhance provider-patient interactions are often underfunded or deprioritized, limiting the implementation of patient-centered care models.

4. Poor Infrastructure

Structural challenges, such as poor healthcare infrastructure and resource constraints, also pose significant barriers to improving patient satisfaction. Many PHC facilities, particularly in low-resource settings, suffer from inadequate staffing, insufficient medical supplies, and outdated

equipment, leading to suboptimal service delivery (Adepoju *et al.*, 2021). Patients experiencing long waiting times due to staffing shortages or being referred to external pharmacies because essential medications are unavailable often express dissatisfaction. Without adequate investment in infrastructure, efforts to enhance patient satisfaction remain limited.

5. Financial Constraints

Financial limitations can restrict the effectiveness of initiatives aimed at improving patient satisfaction. Implementing quality improvement measures such as hiring additional staff, upgrading facilities, or investing in patient-centered training requires significant funding, which may not be available in underfunded healthcare systems (Oyeyemi & Abubakar, 2021). Budget constraints force healthcare administrators to prioritize essential medical services over satisfaction-enhancing interventions, leading to persistent gaps in patient-centered care.

6. Socio-cultural Factors

Lastly, socio-cultural factors can influence both the assessment and improvement of patient satisfaction. In some communities, cultural norms may discourage patients from openly expressing dissatisfaction with healthcare providers, which can result in artificially high satisfaction ratings that do not accurately reflect the true patient experience (Ameh *et al.*, 2022).

Recognizing these cultural dynamics is crucial for designing assessment tools and improvement strategies that capture genuine patient feedback.

Despite these challenges, several strategies can be employed to enhance patient satisfaction in PHC facilities. Strengthening patient-provider communication through training programs focused on empathy, active listening, and shared decision-making is one effective approach (Adepoju *et al.*, 2021). Additionally, reducing waiting times through optimized appointment scheduling, increasing staff capacity, and implementing efficient triage systems can significantly

enhance patient experiences. Improving healthcare infrastructure, ensuring the availability of essential medications, and adopting real-time feedback mechanisms are also key strategies for boosting satisfaction levels.

Policy reforms and increased investment in healthcare are essential to overcoming the systemic barriers to patient satisfaction. Governments and healthcare institutions must allocate sufficient resources to improve PHC service delivery, addressing both clinical outcomes and patient experiences (Odetola, 2020). Adopting standardized and culturally adapted patient satisfaction assessment tools can further improve the accuracy and reliability of feedback, enabling more targeted improvements.

Assessing and improving patient satisfaction in PHC facilities presents multiple challenges, including subjectivity in patient experiences, methodological inconsistencies, response biases, evolving patient expectations, inadequate infrastructure, and resistance to change. Addressing these challenges requires a multifaceted approach that combines structural improvements, provider training, technological innovations, and policy interventions. By prioritizing patient satisfaction as a core component of healthcare quality, PHC facilities can build trust, improve health outcomes, and foster a more patient-centered healthcare system.

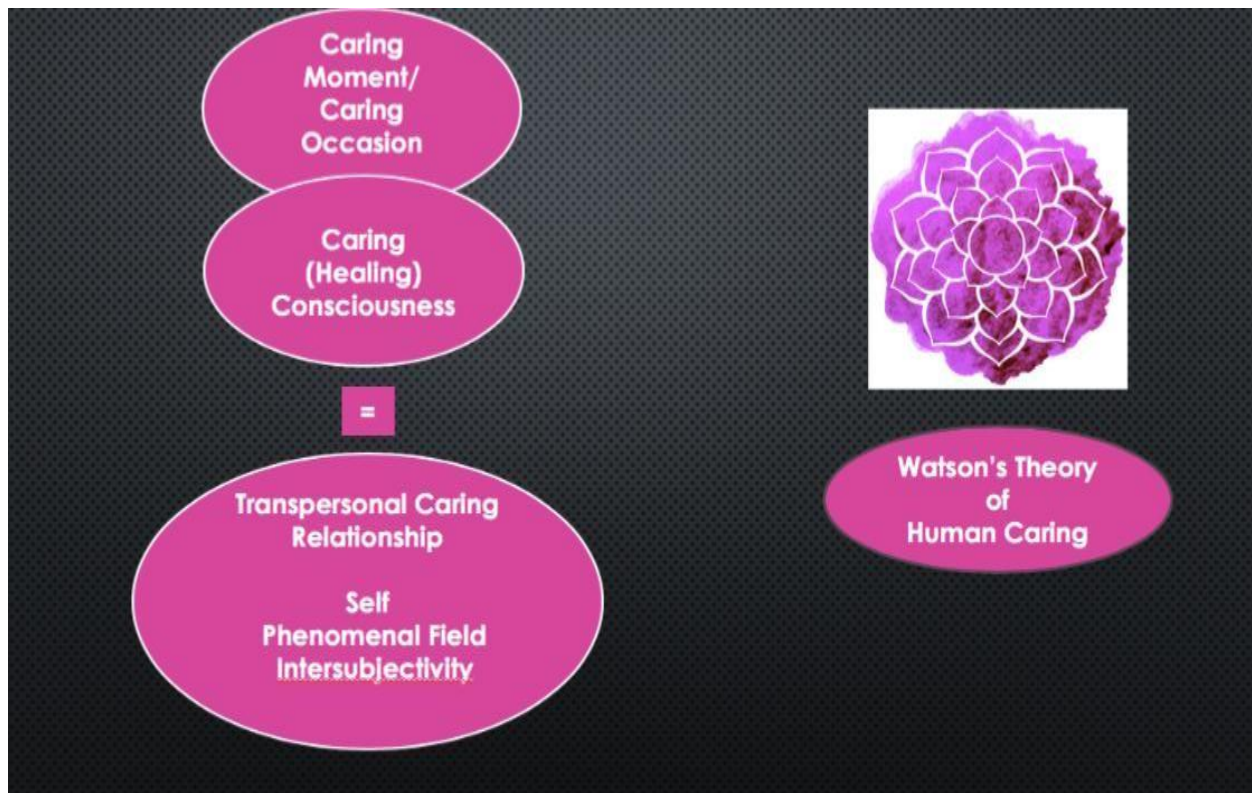
2.2 Theoretical framework

Watson's Theory of Human Caring was used as a Theory for this Study

Jean Watson's Theory of Human Caring, developed in 1979 and expanded over the years, centers on the idea that nursing is more than a set of clinical tasks it is a human-to-human interaction that promotes healing, dignity, and holistic well-being. Watson emphasized the importance of caring relationships in nursing, focusing on compassion, empathy, and the therapeutic bond between nurses and patients. The theory is grounded in ten carative factors, which later evolved into clinical caritas processes that guide nursing practice. These factors highlight essential aspects of nursing, such as:

1. Practicing loving-kindness and equanimity
2. Being authentically present and enabling deep belief systems
3. Cultivating one's own spiritual practices
4. Developing a helping-trusting relationship
5. Creating a healing environment

The theory posits that when patients feel cared for holistically, their perception of nursing care improves, leading to higher satisfaction levels.



A pictorial illustration of Watson's theory (source Ali *et al.*, 2022)

Application of Watson's Theory to This Study

The study titled Patients' Perception and Satisfaction with Nursing Care in a Primary Health Care Center in Benin City it aims to assess how patients view the care they receive and whether it meets their expectations. Watson's theory is particularly relevant as it emphasizes caring behaviors, patient-centered interactions, and emotional support as key in shaping patient experiences.

1. Enhancing Patient Perception of Nursing Care

According to Watson, a nurse's presence, empathy, and effective communication significantly influence how patients perceive their care. In primary healthcare settings in Benin City where resources may be limited patients often form their perceptions based more on interpersonal interactions than solely on clinical efficiency. Demonstrating genuine concern and practicing active listening can make patients feel valued, thereby improving their perception of the quality of nursing care.

2. Impact on Patient Satisfaction

Patient satisfaction is not solely determined by treatment outcomes; it also hinges on the emotional and psychological experience during care. When nurses practice caring behaviors, offer comfort, and create a supportive atmosphere, patients are more likely to feel satisfied even in resource-limited settings. In Benin City's primary care settings, this may involve taking extra time to educate patients, addressing their concerns, and offering reassurance all aligning with Watson's holistic caring approach.

3. Addressing Barriers to Quality Perception and Satisfaction

One challenge in primary healthcare settings in Nigeria is the high patient load and staffing shortages, which can lead to rushed interactions. Watson's theory suggests that even within time constraints, nurses can enhance patient perception and satisfaction through small but meaningful gestures, such as maintaining eye contact, using a gentle tone, and acknowledging patient concerns. Moreover, cultural beliefs and varying healthcare expectations mean that nurses must adapt their approach based on patient needs in order to bridge any gaps in expectation versus experience.

4. Creating a Healing Environment

Watson emphasized that a healing environment fosters trust and promotes overall well-being. In primary care facilities in Benin City, creating such an environment might involve ensuring that patients feel safe, comfortable, and respected throughout their visit. Even in settings with infrastructural challenges, nurses can apply Watson's theory by being emotionally present, communicating clearly, and advocating for patient needs to create a therapeutic atmosphere that enhances care perception and satisfaction.

2.3 Empirical Review

2.3.1 Patients' Perceptions of Nursing Care Rendered

Johnson and Smith (2022), in their study titled "Patient Satisfaction with Nursing Care in Primary Healthcare Centers in Texas, USA," conducted a cross-sectional study with 400 participants. Data were collected using structured questionnaires and analyzed using SPSS version 26. Findings revealed that 72% of patients reported satisfaction with nursing care, with communication and empathy being the most valued aspects. Patients who received clear explanations about their conditions and treatment plans had higher satisfaction scores. The study also found that younger patients expressed more dissatisfaction due to longer waiting times and perceived neglect. The study concluded that improving nurse-patient communication and reducing waiting times could enhance patient satisfaction.

Adeyemi and Oladipo (2021), in their study titled "Perception of Nursing Care among Inpatients in a Tertiary Hospital in Lagos, Nigeria," conducted a descriptive cross-sectional study with 300 inpatients. Data were collected using a validated questionnaire and analyzed using chi-square tests. Findings showed that 68% of patients rated nursing care as satisfactory, while 22% reported dissatisfaction, primarily due to delays in response to call bells. Patients in private wards expressed higher satisfaction levels compared to those in general wards ($p < 0.05$). The study concluded that patient-centered approaches and staff responsiveness should be prioritized to improve patient experiences.

Wang et al. (2023), in their study titled "Patient Perceptions of Nursing Care in Public Hospitals in Beijing, China," utilized a mixed-methods approach involving 250 patients and 20 in-depth interviews. Quantitative findings indicated that 65% of patients were satisfied with the care provided, while qualitative data highlighted concerns about the short interaction time with nurses. Patients emphasized the importance of emotional support, with many suggesting that even brief but meaningful interactions significantly enhanced their hospital experiences. The study

recommended that hospitals implement policies to improve nurse staffing and training in communication skills.

Garcia and Fernandez (2020), in their research titled "Patient Experience and Satisfaction with Nursing Care in Spanish Hospitals," employed a descriptive correlational design with 500 patients across five hospitals. Data were collected using the Newcastle Satisfaction with Nursing Scale. Results showed that 75% of patients expressed high satisfaction with nursing care, especially valuing nurses' attentiveness and respect for patient dignity. However, dissatisfaction was associated with night-shift care, where staffing levels were lower. The authors concluded that ensuring consistent quality across all shifts is crucial for maintaining high patient satisfaction.

Okeke and Chukwu (2021), in their study "Evaluation of Patient Satisfaction with Nursing Services in University Teaching Hospital, Enugu, Nigeria," conducted a cross-sectional survey of 350 patients. Findings revealed that 70% of respondents were satisfied with nursing care. Major factors influencing satisfaction included promptness in attending to needs, politeness, and professionalism. Dissatisfaction stemmed from lack of privacy during procedures. The study recommended the reinforcement of nursing ethics and periodic patient feedback assessments to enhance service delivery.

Brown et al. (2022), in their study "Understanding Patient Perceptions of Nurse-Delivered Care in Rural Clinics in Canada," conducted a qualitative study using semi-structured interviews with 45 patients. Findings showed that while patients appreciated the dedication and friendliness of nurses, they also expressed concerns about limited resources and occasional delays in care. Participants emphasized the role of trust and continuity of care in shaping their positive

experiences. The study concluded that supporting rural nurses with better infrastructure could further enhance patient satisfaction.

Ahmed et al. (2023), in their study titled "Patient Satisfaction with Nursing Care in Tertiary Care Hospitals in Cairo, Egypt," conducted a cross-sectional study involving 420 inpatients. Data were collected through interviewer-administered questionnaires. Results indicated that 69% of patients were satisfied with the nursing services. Factors positively influencing satisfaction included frequent nurse rounds, effective pain management, and respectful treatment. Dissatisfaction was linked to inadequate communication about medications and discharge plans. The study recommended strengthening patient education and ensuring nurses provide timely information as part of holistic care.

2.3.2 Patient Satisfaction with Nursing Care

Brown and Taylor (2022), in their study titled "Determinants of Patient Satisfaction with Nursing Services in Urban Hospitals in Canada," conducted a cross-sectional survey involving 500 hospitalized patients. Data were collected using a standardized patient satisfaction questionnaire and analyzed using logistic regression. Results showed that 75% of patients were satisfied with the nursing care received. Key determinants of satisfaction included nurse competence, respectful communication, and timely assistance. The study concluded that continuous professional development and communication skills training for nurses are essential to maintain high patient satisfaction.

Chukwu and Ibrahim (2021), in their study titled "Patient Satisfaction with Nursing Care in Selected Teaching Hospitals in Northern Nigeria," employed a descriptive cross-sectional design with 350 participants. Data were gathered through structured interviews and analyzed using

SPSS version 25. Findings revealed that 70% of patients expressed satisfaction, with pain management and emotional support being the most influential factors. However, dissatisfaction was linked to perceived nurse shortages and high workload. The study recommended the recruitment of more nursing staff to improve care quality and patient satisfaction.

Li et al. (2023), in their research titled "Assessment of Inpatient Satisfaction with Nursing Care in Shanghai Public Hospitals," utilized a mixed-methods approach involving 280 survey respondents and 15 qualitative interviews. Quantitative results indicated that 68% of patients were satisfied, while qualitative findings pointed to dissatisfaction related to short interaction times and lack of individualized care. The study emphasized the importance of increasing nurse-patient interaction time to boost satisfaction levels.

Martins and Dogo (2020), in their study titled "Evaluation of Patient Satisfaction with Nursing Care in Rural Health Centers in Brazil," used a descriptive design with 300 participants. Data were analyzed using descriptive statistics and t-tests. Findings showed that 80% of patients rated their care as satisfactory, particularly valuing nurses' kindness and attentiveness. Nonetheless, poor infrastructure and limited medical supplies were noted as barriers to optimal satisfaction. The study suggested that improving healthcare infrastructure would enhance overall patient satisfaction.

Ogunleye and Adebayo (2022), in their study titled "Satisfaction of Patients with Nursing Services in Private Hospitals in Lagos State, Nigeria," conducted a cross-sectional study involving 250 patients. Using a structured self-administered questionnaire, results revealed that 77% of patients reported high satisfaction levels. Factors contributing to satisfaction included promptness in attending to patient needs and the courteousness of staff. The study recommended

that private hospitals should sustain quality improvement initiatives to maintain high levels of patient satisfaction.

Singh et al. (2021), in their research titled "Patient Satisfaction with Nursing Care in Government Hospitals in India," surveyed 400 patients using a validated satisfaction scale. Findings showed that 66% were satisfied, with nursing professionalism and communication identified as significant predictors. However, overcrowding and understaffing were major causes of dissatisfaction. The study concluded that addressing hospital congestion and improving nurse-patient ratios would significantly enhance patient satisfaction.

Rodriguez and Perez (2023), in their study titled "Patient Satisfaction with Post-Surgical Nursing Care in Spain," utilized a longitudinal study design with 200 post-operative patients. Data were collected at discharge and one month after discharge. Results indicated that 85% of patients were satisfied with nursing care during their hospital stay. Follow-up interviews highlighted that continuity of care and emotional support post-surgery played a crucial role in sustained patient satisfaction. The study suggested that post-discharge follow-up by nurses could further improve patient outcomes and satisfaction.

2.3.3 Factors Influencing Patient Perceptions of Nursing Care

Williams and Carter (2022), in their study titled "Factors Affecting Patient Perception of Nursing Care Quality in Community Hospitals in the United States," conducted a descriptive cross-sectional study with 420 patients. Data were collected using structured questionnaires and analyzed with multivariate regression analysis. Results showed that communication skills, empathy, and attentiveness of nurses were the most significant predictors of positive patient

perceptions. Patients who perceived nurses as attentive and empathetic were five times more likely to report positive perceptions (AOR = 5.12, 95% CI [2.73, 9.61]).

Okafor and Musa (2021), in their study titled "Determinants of Patient Perception of Nursing Care in Public Hospitals in Nigeria," employed a cross-sectional survey involving 350 patients. Findings revealed that socio-demographic factors such as age, education level, and previous hospitalization experiences influenced patient perceptions. Younger and more educated patients were more critical of nursing care, citing poor communication and long waiting times as major concerns.

Zhang et al. (2023), in a study titled "Patient Perceptions of Nursing Care in Urban Chinese Hospitals: A Multicenter Study," used a mixed-methods design with 400 patients and 30 interviews. Quantitative findings highlighted nurse workload and communication style as major factors. Patients reported lower satisfaction when nurses appeared rushed or stressed. Qualitative data further revealed that personalized attention enhanced positive perceptions.

Johnson and Adeyemi (2022), in their study titled "Influence of Nurse Attitude and Work Environment on Patient Perception of Care Quality in South African Hospitals," conducted a correlational study involving 300 patients. Analysis showed that nurse attitude ($p < 0.01$) and the overall work environment ($p < 0.05$) significantly influenced patient perceptions. Patients noted that nurses who demonstrated kindness and patience created a more positive care experience.

Santos and Lopez (2022), in their research titled "Impact of Nurse Communication and Professionalism on Patient Perception in Spanish Healthcare Centers," carried out a cross-sectional study with 270 participants. Results indicated that 82% of patients who rated nurse

professionalism highly also had positive perceptions of nursing care. Poor communication skills, however, were strongly linked to negative patient views.

Adebayo and Hassan (2021), in their study titled "Socioeconomic Factors and Patient Perceptions of Nursing Care in Nigerian Tertiary Hospitals Ondo State surveyed 320 patients. The study found that income level and type of hospital ward (private vs. general) influenced perceptions. Patients from higher socioeconomic backgrounds and those admitted to private wards reported better perceptions of care quality compared to those in general wards.

Kim et al. (2023), in their study titled "Patient-Related Factors Influencing Perception of Nursing Services in South Korea," conducted a cross-sectional study with 360 inpatients. They found that cultural expectations, prior healthcare experiences, and language barriers played crucial roles. Patients who had previous negative healthcare experiences were more likely to perceive current nursing care poorly, while effective communication helped overcome cultural and language barriers.

2.4 Summary of Empirical Studies and Gap in Literature

The empirical review reveals that patient perception and satisfaction with nursing care are influenced by various factors such as nurse-patient communication, empathy, competence, and the healthcare environment. Studies conducted in Nigeria, the United States, China, Canada, and Spain consistently show that compassionate, attentive, and skilled nursing leads to higher patient satisfaction, while poor communication, perceived neglect, and long waiting times often result in dissatisfaction. Cultural beliefs, socioeconomic status, education level, and previous hospitalization experiences were also identified as important factors affecting patient perceptions. Furthermore, challenges such as nursing staff shortages, high patient-nurse ratios, administrative

burdens, emotional exhaustion, and inadequate healthcare infrastructure frequently hinder the delivery of quality nursing care, particularly in low-resource settings like Nigeria. However, several gaps were identified from the literature reviewed. Most studies were conducted in tertiary or urban hospital settings, with limited focus on primary healthcare facilities. There is also a lack of studies that comprehensively examine the combined impact of the healthcare environment, nurse communication, and patient socio-demographic factors specifically within primary healthcare settings. In addition, research addressing patient perceptions and satisfaction with nursing care in Benin City, Edo State, remains underexplored, especially within primary healthcare centers. While global studies highlight systemic challenges such as nurse shortages and burnout, limited localized evidence exists on how these challenges uniquely affect patient satisfaction and perception at the primary healthcare level in Edo State. Moreover, most of the existing studies adopted either quantitative or qualitative designs separately, with few using mixed-methods approaches that could provide a deeper and more holistic understanding of patient experiences. This study aims to fill these gaps by examining factors influencing patient satisfaction and nursing care delivery in primary healthcare settings in Benin City. The Theory of Human Caring by Jean Watson provides the theoretical framework for this study, emphasizing that caring interactions between nurses and patients are central to patient satisfaction. Watson's theory highlights compassionate, humanistic care as vital for positive patient outcomes and suggests that nurses' caring behaviors significantly influence patients' perceptions of nursing care. This study will apply Watson's theory to explore how nurses' empathetic care can improve patient satisfaction and perceptions in primary care settings in Benin City.

CHAPTER THREE

RESEARCH METHODOLOGY

This chapter outlines the research design, setting, target population, sample size determination, sampling technique, instrument for data collection, method of data analysis, validity, reliability, and ethical considerations.

3.1 Research Design

A descriptive cross-sectional design was employed using a structured questionnaire. This approach enables systematic measurement of patient experiences and perceptions of nursing care in a primary healthcare setting.

3.2 Research Setting

Primary Health Care (PHC) facilities form the foundation of Nigeria's healthcare delivery system, providing essential health services at the grassroots level in line with the National Primary Health Care Development Agency (NPHCDA) framework. Edo State, located in the

South-South geopolitical zone of Nigeria, has a well-established network of PHCs distributed across its 18 Local Government Areas (LGAs). According to the Edo State Primary Health Care Development Agency (EDSPHCDA), there are over 500 functional Primary Health Care Centres across the state, strategically positioned to ensure accessibility and coverage of essential health services to both urban and rural populations. Within this network, Egor Local Government Area one of the most densely populated LGAs in Edo State hosts several PHCs, including Ugbowo, Useh, and Uselu Primary Health Care Centres. Among these, Uselu Primary Health Care Centre (PHC) stands out as one of the busiest and most accessible due to its strategic urban location and high patient attendance.

The study was conducted at Uselu Primary Health Care Centre, situated in the Uselu axis of Benin City, Edo State, Nigeria. Uselu serves as the headquarters of Egor Local Government Area, located at coordinates 6°24'32"N 5°36'51"E. The centre is a government-owned health facility that provides comprehensive, affordable, and accessible healthcare services to residents of Uselu and its surrounding communities.

Uselu PHC is staffed with qualified healthcare professionals, including registered nurses, midwives, community health extension workers, and medical officers, who collaborate to deliver essential health services such as maternal and child health care, immunization, family planning, disease prevention, and health education. The facility is also integrated into the referral system, linking primary care to secondary and tertiary health institutions when specialized services are required.

The choice of Uselu PHC as the study site was informed by its high patient turnout, diversity of nursing services, and central location within Egor LGA. Its accessibility and reputation for providing consistent primary health care make it an ideal setting for assessing patients' perception and satisfaction with nursing care in a typical urban PHC environment in Edo State.

3.3 Target Population

The target population for this study comprised patients seeking care at the Uselu Primary Health Care Centre, located in Benin City, Edo State. According to records obtained from the National Primary Health Care Development Agency (NPHCDA, 2025), a total of 150 patients constituted the target population for the study. These figures were derived from clinic attendance records covering a four-month period, as presented in Table 3.1.

Table 3.1: Monthly Attendance Records of Patients at Uselu Primary Health Care Centre, Benin City

Months	Attendance
June	155
July	135
August	165
September	150
Total	605
Average Monthly Attendance (Target Population)	150

Source: NPHCDA (2025).

3.4 Sample Size Determination

A sample size of 150 patients seeking care in Uselu primary health care center were randomly selected using the famous Taro Yamane formula as calculated below: $n=N/(1+Ne^2)$ at 95% confidence level.

Where; n= sample size, N = target population, e =Constant (0.05%) margin

error $n=150/1+150(0.05^2) = 86$ 10% Attrition rate = $86 +8.6 =94.6$

Approx 95.

Therefore, the sample for this study would include 95 respondents who is seeking care in Uselu primary health care center Benin City Edo state.

3.5 Inclusion Criteria

The inclusion criteria in the study were patient seeking care in Uselu Primary Health Care Center who are willing to participate in the study.

3.6 Exclusion criteria

The exclusion criteria in the study include those would be unavailable at the time of data collection and those who are not ready to participate were excluded from the study.

3.7 Sampling Technique

A non-probability convenient method was used in this study. This technique was used because it ensured that the population was properly presented and that there is no bias in selection of the study subjects since there was randomization of the study subjects.

3.8 Instrument for Data Collection

The instrument used for data collection in this study was a structured, self-administered questionnaire (see Appendix 1). The questionnaire was developed by the researcher based on the objectives of the study and relevant literature. It is composed of close-ended questions, which enabled the respondents to select the most appropriate option that reflects their opinion or experience. This format ensured ease of response, consistency in answers, and facilitated quantitative analysis.

The questionnaire was divided into five sections (A–D), with a total of 26 items, as outlined below:

Section A: Sociodemographic Data – This section contains 7 items aimed at obtaining background information on the respondents, such as age, sex, marital status, educational qualification etc.

Section B: Patients' Perceptions of Nursing Care – This section consists of 6 items that assess how patients perceive the nursing care they receive at primary health care centers in Benin City.

Section C: Patient Satisfaction with Nursing Care – This section includes 7 items designed to evaluate the level of satisfaction patients derive from nursing care services.

Section D: Factors Influencing Patient Perceptions – This section has 6 items focused on identifying the factors (e.g., nurse behavior, communication, facility environment) that shape patients' perceptions of nursing care.

All items were rated using a 5- point Likert scale ranging from 5 = strongly agree 4 = agree 3 = neutral 2 = disagree 1 = strongly disagree . This format was adopted to measure the level of agreement or disagreement with the statements provided.

The questionnaire was designed to be completed within 10–15 minutes, ensuring that it was userfriendly and did not place undue burden on respondents.

3.9 Method of data collection

Data collection for this study was through the administration of structured questionnaires to Patient seeking care in Uselu primary health care center Benin City, Edo state. Respondent were provided with all necessary information about the study. The researcher then administered the questionnaires to those from whom verbal consent is gotten; each respondent was offered assistance when needed and the questionnaire took approximately 15 mins to answer. For respondents who were not literate, the questionnaire was administered through an interviewer-assisted approach. Trained research assistants read out each question and the available response options in English, Pidgin English, or the local language (depending on the respondent's preference) and then recorded the responses accurately on the questionnaire. This ensured that all participants, regardless of literacy level, were able to understand the questions and provide valid responses without bias.

3.10 Method of Data Analysis

Data from the questionnaires was used to analyzed using the IBM Statistical Package for Social Sciences (SPSS) version 24.0 for Windows. Frequencies, percentages, and median with IQR were computed to describe the key variables of the study. Binary logistic regression was used to run to determine significant relations of independent variables with the dependent variable and all independent variables which was less than 0.2 in bivariate analysis will be entered into

multivariable logistic regressions. A chi square test was also conducted and a P-value of < 0.05 was considered significant for all analyses.

3.11 Validity of the Instrument

The instrument's validity pertained to its capability to accurately measure the intended construct or concept (Surucu & Maslakci, 2021). Researchers assessed various validity types such as content, construct, criterion, and face validity to evaluate the instrument's accuracy. For this research, face and content validity will be utilized to validate the research tool. The questionnaire will undergo validation by a field expert, and necessary adjustments will be implemented by the researcher before starting the main study.

3.12 Reliability of the study

The reliability of an instrument referred to its stability and consistency in delivering uniform outcomes when assessing the same criteria under identical circumstances (Surucu & Maslakci, 2020). It essentially gauged how consistently the instrument produced similar results across multiple trials. A reliable instrument is one that could produce the same results if the behavior was measured again by the same scale. The Cronbach's alpha reliability technique will be employed in this study. This researcher will conduct reliability testing on the instrument by distributing 10 questionnaires, which constituted 10% of the total sample size of 95, to patient seeking care in Edo Specialist Hospital (which are outside the sampled population). If a coefficient of 0.71 is obtained the instrument will be considered reliable. After the test a coefficient of 0.77 was gotten which proved it reliability

3.13 Ethical Considerations

There are certain ethical requirements that was considered by the researcher before conducting research. They include voluntary and autonomous participation of the participants and right to

complete information about the research. More so, the principles of voluntary participation, confidentiality and privacy, and maintenance of anonymity must continue throughout the study and beyond. The participants of the study were not coerced against their wishes and the utmost confidentiality levels was ensured. Also, Ethical approval was gotten from the Ethical committee in Egor LGA Secretariat situated at 19 Omobenson Street, Uselu, Benin City. The following are ethical considerations that was maintained during this study

Confidentiality: No names or addresses was requested in the course of the interview to ensure confidentiality. Before the interview it was explained clearly to the participants that their responses remained confidential and that the observations made was used solely for scientific research purposes. Also, to maintain anonymity, no personal identifiers were used or indicated in the questionnaire.

Voluntary Participation: The participants of the research had the freedom to decide whether or not they want to participate in the study without any external coercion or fear of prejudice or penalty. They also had the liberty of opting out of the study at any time and be able to withhold any information they are not comfortable sharing.

Plagiarism: All authors used in this study were appropriately cited in the body of the work and at the reference page.

Informed consent: Before the data collection, all necessary information about the purpose and benefit of the study was explained to the participant and all questions answered.

CHAPTER FOUR

RESULTS

Ninety-five (95) respondents who are patients seeking care in Uselu primary health care centre, participated in the study and were administered the questionnaire out of which, data for this analysis was obtained from ninety (90) respondents, giving a response rate of 94.7%. Some respondents were unavailable at the time of data collection, while others declined participation or returned incomplete questionnaires that could not be used for analysis. The respondents were asked questions concerning their socio demographic profile, perceptions of nursing care rendered in primary care health care center, patient satisfaction with nursing care in a primary health care center, factors influencing patient perceptions of nursing care and challenges affecting the delivery of quality nursing care among patients receiving care in Uselu primary health care centre, Benin City. The results are presented in the following tables.

4.1 Analysis of Socio-Demographic Characteristics of the Respondents

Table 4.1: Socio-Demographic Characteristics of the Respondents

Variables	Frequency (n=90)	Percent (%)
Age		
<20	5	5.56
20-24	14	15.56
25-29	13	14.44
30-34	23	25.56
35-39	16	17.78
40 and above	19	21.11
Marital status		
Single	32	35.56
Married	56	62.22
Divorced/ separated	0	-
Widowed	2	2.22
Educational status		
No formal education	20	22.22
Primary	11	12.22
Secondary	36	40.00
Tertiary	23	25.56
Occupation		
Emoloyed	32	35.56
Unemployed	21	23.33
Self employed	37	41.11
Religion		
Christian	75	83.33
Muslim	15	16.67
African traditional religion	0	-
Others	0	-

Variables	Frequency (n=90)	Percent (%)
Tribe		
Benin	21	23.33
Esan	24	26.67
Yoruba	13	14.44
Igbo	8	8.89
Hausa	5	5.56
Others	19	21.11

The table represent a total of 90 respondents participated in the study. 5 (5.56%) were aged below 20 years, 14 (15.56%) were aged 20-24 years, 13 (14.44%) were between age 25-29 years, 23 (25.56%) were between 30-34 years of age, 16 (17.78%) were between 35-39 years of age and the remaining 19 (21.11%) were 40 years and above. In terms of marital status 32 (35.56%) were single, 56 (62.22%) were married and the remaining 2 (2.22%) were widowed. In terms of educational status, 20 (22.22%) stated they had no formal education, 11 (12.22%) stated they had primary education, 36 (40.00%) stated they had secondary level education and the remaining 23 (25.56%) stated they had tertiary level education. In terms of occupation, 32 (35.56%) stated they were employed, 21 (23.33%) stated they were unemployed and the remaining 37 (41.11%) stated they were self employed. In terms of religion, 75 (83.33%) stated they were Christians and the remaining 15 (16.67%) stated they were Muslims. In terms of tribe, 21 (23.33%) stated Benin, 24 (26.67%) stated Esan, 13 (14.44%) stated Yoruba, 8 (8.89%) stated Igbo, 5 (5.56%) stated Hausa and the remaining 19 (21.11%) stated others.

4.2 Answering Research Questions

Table 4.2: Analysis of the perceptions of nursing care rendered in Uselu primary care health care center

S/N	QUESTIONS	5 F (%)	4 F (%)	3 F (%)	2 F (%)	1 F (%)	Mean	SD
1	The nurses listened carefully to my concerns.	54 (60)	36 (40)	0 (0)	0 (0)	0 (0)	18.8	24.80
2	The nurses explained my condition and treatment clearly	41 (45.56)	42 (46.67)	7 (7.78)	0 (0)	0 (0)	18.8	21.64
3	The nurses used simple and understandable language	48 (53.33)	42 (46.67)	0 (0)	0 (0)	0 (0)	18.8	24.74
4	The nurses provided enough information about my health condition.	43 (47.78)	37 (41.11)	10 (11.11)	0 (0)	0 (0)	18.8	20.60
5	The nurses showed competence confidence and providing care showed and while	50 (55.56)	37 (41.11)	3 (3.33)	0 (0)	0 (0)	18.8	23.76
6	The nurses responded promptly when I needed assistance.	35 (38.89)	34 (37.78)	12 (13.33)	9 (10.00)	0 (0)	18.8	15.70

Table 4.2 is the result of the analysis of the perceptions of nursing care rendered in Uselu primary care health care center. The 6 items had mean scores of 18.8 with standard deviation ranging from 15.70 - 24.80. All of the respondents 100% stated that the nurses listened carefully to their concerns, 92.23% stated that the nurses explained their conditions and treatments clearly, all the respondents 100% stated that the nurses used simple and understandable language while communicating, 88.89% stated that the nurses provided enough information about their health conditions, 96.67% stated that the nurses showed competence and confidence while providing care and lastly 76.67% stated that the nurses responded promptly when they needed assistance.

Results showed that respondents had a high level of perception of nursing care rendered in Uselu primary health care center.

Table 4.3 Analysis of patient satisfaction with nursing care in Uselu primary health care center

S/ N	QUESTIONS	5 F(%)	4 F(%)	3 F(%)	2 F(%)	1 F(%)	Mean	SD
1	The nurses communicated effectively with me during my visit.	48 (53.33)	26 (28.89)	10 (11.11)	6 (6.67)	0 (0)	18.8	19.34
2	The nurses treated me with respect and courtesy	55 (61.11)	35 (38.89)	0 (0)	0 (0)	0 (0)	18.8	26.64
3	The nurses responded promptly to my needs and requests.	42 (46.67)	35 (38.89)	9 (10.0)	4 (4.44)	0 (0)	18.8	19.14
4	The nurses demonstrated professionalism and competence	60 (66.67)	30 (33.33)	0 (0)	0 (0)	0 (0)	18.8	26.83
5	The nurses paid attention to my individual needs and concerns.	47 (52.22)	43 (47.78)	0 (0)	0 (0)	0 (0)	18.8	24.69
6	The nurses provided sufficient information about my condition and treatment.	44 (48.89)	46 (51.11)	0 (0)	0 (0)	0 (0)	18.8	24.66
7	Overall I am satisfied with the nursing care I received at this facility.	58 (64.44)	32 (35.56)	0 (0)	0 (0)	0 (0)	18.8	26.31

Table 4.3 is the result of the analysis of the mean responses and standard deviation of respondents on patient satisfaction with nursing care in Uselu primary health care center. The 7 items had mean scores of 18.8 with standard deviation ranging from 19.14 to 26.83. Majority (82.22%) stated the nurses communicated effectively with them during their visits. All the respondents stated that the nurses treated them with respect and courtesy. 85.53% stated that the nurses responded promptly to their needs and requests. All the respondents acknowledged that the nurses demonstrated professionalism and competence, the nurses paid attention to their individual needs and concerns, and that the nurses provided sufficient information about their conditions and treatment, and lastly that they were satisfied with the nursing care received at this facility. Results states that these patients were very satisfied with the nursing care provided at Uselu primary health care centre.

4.4 Analysis of the factors influencing patient perceptions of nursing care

S/ N	QUESTIONS	5 F(%)	4 F(%)	3 F(%)	2 F(%)	1 F(%)	Mean	SD
1	The nurses' communication skills positively influenced my perception of the care I received	38 (42.22)	49 (54.44)	3 (3.33)	0 (0)	0 (0)	18.8	23.63
2	The respect and courtesy showed by nurses affected how I viewed the nursing care	37 (41.11)	53 (58.89)	0 (0)	0 (0)	0 (0)	18.8	25.29
3	The promptness of nursing care influenced my overall satisfaction.	35 (38.89)	45 (50.00)	10 (11.11)	0 (0)	0 (0)	18.8	20.80
4	The nurses' level of professional competence shaped my opinion about the care provided	47 (52.22)	43 (47.78)	0 (0)	0 (0)	0 (0)	18.8	24.69
5	My previous experience with health care influenced how I perceive the current nursing care.	26 (28.89)	20 (22.22)	5 (5.56)	27 (30.00)	12 (13.33)	18.8	9.41
6	Recommendations from friends and family influenced my expectations and perception of nursing care	20 (22.22)	32 (35.56)	17 (18.89)	14 (15.56)	7 (7.78)	18.8	9.19

Table 4.4 is the result of the analysis of the mean responses and standard deviation of respondents on the factors influencing patient perceptions of nursing care. The 6 items had mean scores of 18.8 with standard deviation ranging from 9.41 to 25.29. Majority of the respondents 96.67% stated that the nurses' communication skills positively influenced their perception of the care they received. All the respondents stated that the respect and courtesy showed by nurses

affected how they viewed the nursing care. 88.89% stated that the promptness of nursing care influences their overall satisfaction. And all the respondents stated that the nurses' level of professional competence shaped their opinion about the care provided. 51.11% stated that their previous experience with health care influenced how they perceived the current care. Lastly 57.78% stated that recommendations from family and friends influences their expectations and perception of nursing care. Results indicates that the factors above had a a positive influence on the patient's perception of nursing care.

4.3 Test of Hypothesis

Hypothesis (H₀): There is no significant relationship between patients' perceptions and their satisfaction with nursing care in a primary health care center in Benin City.

Using Tables 4.2:

TABLE 4.6: Computation of Calculated Chi-Square Value on Hypotheses

VARIABLES	Observed Frequency (o-i)	Expected Frequency (e-i)	(oi-ei)	(oi – ei) ²	<u>(oi– ei)²</u> ei
5	58	18	40	1600	88.89
4	32	18	14	196	10.89
3	0	18	-18	324	18
2	0	18	-18	324	18
1	0	18	-18	324	18
	90	90		2768	153.78

$$X^2 = 153.78$$

The critical value using 5% level of significance is 8.675

Decision: Since 153.78 is greater than $X^2 = 8.675$, we reject the null hypothesis at the 0.05 level of significance and accept the alternate hypothesis which state that there is a significant relationship between patients' perceptions and their satisfaction with nursing care in a primary health care center in Benin City.

CHAPTER FIVE

DISCUSSION OF FINDINGS

5.2 Discussion of Findings

5.2.1 Level of perception of nursing care rendered in Uselu primary health care center.

In the analysis of level of perception of nursing care rendered in Uselu primary health care center. Results showed that respondents had a high level of perception of nursing care rendered in Uselu primary health care center.

This is consistent with study research conducted in Benin City, by Oyeyemi & Abubakar, (2021), which emphasized the importance of interpersonal communication and compassionate care in shaping patients' experiences. In these studies, patients reported that clear explanations about their condition, gentle communication styles, and sustained nurse–patient relationships positively influenced their perception of the care rendered. This also agrees with a study by Ameh *et al.*, (2021). in which surveys were conducted across multiple states, and indicated that patients who perceive nurses as empathetic and responsive are more likely to trust and adhere to treatment regimens. It is also consistent with a study by Eshete *et al.*, (2023), which showed that positive patient perceptions are largely driven by the quality of interpersonal communication, empathy, and the presence of continuity in care. In a multi-country study, for example, patients in both developed and developing contexts reported that clear communication and a caring attitude from nurses were key predictors of overall satisfaction.

5.2.2 Patient's satisfaction with nursing care in Uselu primary health care center in Benin City

The analysis of the patient's satisfaction with nursing care in Uselu primary health care center in Benin City. All the respondents acknowledged that the nurses demonstrated professionalism and competence, the nurses paid attention to their individual needs and concerns, and that the nurses provided sufficient information about their conditions and treatment, and lastly that they were satisfied with the nursing care received at this facility. Results states that these patients were very satisfied with the nursing care provided at Uselu primary health care centre.

This is in line with a local study, in which mixed methods were used to measure satisfaction levels among patients accessing primary health care in Benin City. (Odetola, 2020) Findings indicated that despite resource constraints, even modest gestures such as a smile or individualized attention contributed significantly to patient satisfaction. The studies further noted that overcrowding and prolonged waiting times negatively affected patients' perceptions, urging healthcare administrators to address infrastructural bottlenecks (Adepoju *et al.*, 2022). It also correlates with studies done to examine socio-demographic variables such as education level, age, and income, which further influence patient perceptions. Findings suggest that younger and more educated patients often have higher expectations regarding the technical competence and communication skills of nursing staff. Conversely, older patients tend to prioritize the emotional aspects of care, such as empathy and reassurance (Oyeyemi & Abubakar, 2021). Effective communication between nurses and patients is consistently linked with higher satisfaction levels. Whether it is through verbal clarity or non-verbal cues like eye contact and empathetic behavior, patients value knowing that they are heard (Oyeyemi & Abubakar, 2021; Eshete *et al.*, 2023).

5.2.3 Factors influencing patient perceptions of nursing care in Uselu primary health care centre in Benin City

The analysis of factors influencing patient perceptions of nursing care in Uselu primary health care center in Benin City. Results indicates that the factors had a positive influence on the patient's perception of nursing care.

This correlates with a study by Zhang *et al.* (2023), titled Patient Perceptions of Nursing Care in Urban Chinese Hospitals: A Multicentre Study with 400 patients and 30 in-depth interviews.

Quantitatively, the study highlighted that nurse workload and communication style were major factors, with patients reporting lower satisfaction when nurses appeared rushed or stressed.

Qualitatively, findings indicated that personalized attention was linked with enhanced positive perceptions. Also, Johnson and Adeyemi (2022), In their study titled Influence of Nurse

Attitude and Work Environment on Patient Perception of Care Quality in South African Hospitals, involving 300 patients. Their analysis revealed that nurse attitude ($p < 0.01$) and the overall work environment ($p < 0.05$) significantly influenced patient perceptions. Patients noted that nurses who demonstrated kindness and patience created a more positive care experience.

Again, Adebayo and Hassan (2021), In the study titled Socioeconomic Factors and Patient Perceptions of Nursing Care in Nigerian Tertiary Hospitals Ondo State, Adebayo and Hassan surveyed 320 patients. They found that income level and the type of hospital ward (private vs.

general) influenced perceptions; patients from higher socioeconomic backgrounds and those admitted to private wards reported better perceptions of care quality compared to those in general wards.

Kim *et al.* (2023), Kim *et al.* conducted a cross-sectional study titled Patient-Related Factors Influencing Perception of Nursing Services in South Koreaal with 360 inpatients.

They found that cultural expectations, prior healthcare experiences, and language barriers played

crucial roles. Patients with previous negative healthcare experiences were more likely to perceive current nursing care poorly, whereas effective communication helped overcome cultural and language barriers.

5.2.4 Discussion of Hypothesis

The result of the hypothesis test revealed a significant relationship between patients' perceptions and their satisfaction with nursing care in the selected primary health care center in Benin City. The calculated Chi-square value (153.78) exceeded the critical value (8.675) at a 0.05 level of significance, leading to the rejection of the null hypothesis. This finding implies that patients' perceptions of nursing care such as how they view nurses' communication, empathy, responsiveness, and professionalism play a crucial role in shaping their overall satisfaction with the care they receive.

In simple terms, when patients perceive nurses as caring, respectful, and attentive to their needs, they are more likely to express higher levels of satisfaction. Conversely, poor communication, delays in attending to patients, or lack of empathy can negatively affect satisfaction. This highlights the importance of nurses' interpersonal relationships and their ability to create a positive care experience for patients.

The finding of this study is consistent with the observations of Okeke and Chukwu (2021), who found that prompt attention, politeness, and professionalism were key drivers of patient satisfaction in Enugu, Nigeria. Similarly, Adeyemi and Oladipo (2021) reported that patients who perceived nurses as responsive and respectful expressed greater satisfaction with nursing services. Johnson and Smith (2022) also emphasized that patients who received clear explanations and compassionate communication from nurses were significantly more satisfied

with their care. These studies collectively support the conclusion that patients' perceptions are directly linked to how satisfied they feel with the nursing care they receive.

Therefore, the result of this study reinforces existing evidence that improving patients' perceptions of nursing care through effective communication, empathy, and timely attention can substantially enhance patient satisfaction within the primary health care setting.

5.3 Implication of Findings to Nursing Profession

The implications of the findings of patient's perception and satisfaction with nursing care in Uselu primary health care center in Benin City, Edo State to the nursing profession are significant and far-reaching.

1. Quality Improvement in Nursing Care

The findings reveal strengths and weaknesses in how nurses deliver care, helping identify areas needing improvement (e.g., communication, empathy, responsiveness). It promotes a culture of continuous quality improvement, which is essential in meeting patients' expectations and improving health outcomes.

2. Patient-Centered Care Emphasis

Understanding patient perceptions encourages nurses to prioritize patient-centered care, tailoring care to individual needs and preferences. It reinforces the importance of emotional intelligence, empathy, and cultural competence in nursing practice.

3. Training and Professional Development

Insights from the study may highlight gaps in nursing competencies, leading to targeted training programs which could influence curriculum development in nursing schools by emphasizing areas where patients express dissatisfaction.

4. Policy and Management Decisions

Hospital and health care administrators can use findings to develop evidence-based policies for nurse-patient ratios, supervision, or resource allocation. It may influence staffing, scheduling, and infrastructure investments in the primary health care system.

5. Accountability and Performance Evaluation

Promotes accountability among nursing staff, encouraging them to maintain high standards since patient feedback directly impacts performance assessment. Can be used as part of performance appraisal systems or nursing audits.

5.4 Limitations of the Study

A key challenge in the research was the reluctance of participants to complete the questionnaire accurately and return it. To address this, the research instrument was administered directly by the researcher with the help of two research assistants, and the completed questionnaires were collected immediately from the participants. In essence, these limitations do not impinge on the reliability of the result of this study.

5.5 Summary

This study was designed to evaluate patient's perception and satisfaction with nursing care in Uselu primary health care center in Benin City, Edo State. To achieve this objective, the study was structured into five chapters.

Chapter one provided the background to the study, the statement of the research problem, the objectives of the study, the significance of the study, among other headings.

Chapter two dealt with a detailed review of related literature on the subject matter of the investigation which includes the conceptual, theoretical review and empirical of literature.

Chapter three described the methods and procedure that was adopted in the study. It covered the research design, population, sample and sampling technique, instrumentation, validity and reliability of the instrument, procedure for data collection, data analysis and ethical consideration.

Chapter four contained the data presentation, interpretation and analysis of research questions and research hypotheses.

Chapter five contains the discussion of the findings, the summary, the conclusion reached and recommendations.

5.6 Conclusion

In conclusion Patient perception encompasses how individuals interpret and make sense of the care they receive, shaped by their personal experiences, cultural background, and expectations of the healthcare system. In contrast, satisfaction reflects how well these expectations are fulfilled or surpassed during their interactions with healthcare professionals (Palese et al., 2021). Both concepts play a critical role in influencing patient outcomes, compliance with treatment, and trust in the healthcare system, thereby serving as essential indicators for assessing and enhancing the quality of nursing care (Olowokere et al., 2023).

In Nigeria, the importance of patient perception and satisfaction with nursing care is increasingly recognized as a vital aspect of effective healthcare delivery. The primary healthcare sector, which forms the backbone of the country's health system, is central to meeting the needs of its expanding population. Despite this, several persistent challenges such as resource constraints, understaffing, and inconsistent care quality continue to impede the provision of high-standard nursing services (Ogunleye et al., 2020). Research indicates that dissatisfaction among patients

often stems from long waiting times, feelings of neglect, and poor communication between nurses and patients (Olowokere et al., 2023).

These concerns are further influenced by cultural norms, economic inequalities, and systemic flaws, all of which significantly impact how patients perceive and experience nursing care. Understanding patient perceptions and satisfaction within this context is critical for identifying gaps in nursing care delivery and developing strategies to improve service quality.

5.7 Recommendations

- i. Nurses should improve communication with patients by showing empathy, respect, and providing clear information about care.
- ii. Health administrators should increase staffing levels and reduce nurse workload to ensure timely and quality care.
- iii. The management should provide continuous professional development (CPD) through regular workshops and training on patient-centered care and ethics.
- iv. Primary healthcare facilities should strengthen feedback and complaint mechanisms such as suggestion boxes and surveys to enhance accountability.
- v. Healthcare providers should ensure patient privacy and confidentiality during consultations and treatment.
- vi. The government and facility managers should improve infrastructure, maintain cleanliness, and provide adequate medical supplies.
- vii. Nurses and healthcare teams should encourage patient involvement in decision-making to promote satisfaction and adherence to care.

5.8 Suggestions for further Studies

i. Comparative Studies Across Multiple Health Centers

Future research could compare patient satisfaction with nursing care in Uselu PHC and other primary health care centers in the region to identify broader trends and best practices.

ii. Longitudinal Studies on Patient Satisfaction

A long-term study could assess how patient satisfaction and perception evolve over time in response to policy changes, training programs, or infrastructural improvements.

iii. Qualitative Exploration of Patient Experiences

In-depth qualitative studies, such as interviews or focus groups, can provide deeper insights into the personal experiences, expectations, and cultural factors influencing patient satisfaction.

iv. Impact of Nurse-Patient Ratio on Satisfaction Levels

Future research could investigate the relationship between staffing levels and patient satisfaction to provide data that can inform human resource planning.

v. Assessment of Nurses' Perspectives on Patient Satisfaction

Exploring nurses' viewpoints on the factors that influence patient satisfaction may offer a balanced perspective and reveal internal challenges in delivering optimal care.

vi. Study on the Role of Socio-Demographic Factors

Researchers could examine how factors such as age, gender, education level, and income influence patient perception and satisfaction with nursing care.

vii. Effectiveness of Communication and Empathy Training

A study evaluating the impact of communication and empathy training programs on patient satisfaction could help support investments in such initiatives.

viii. Evaluation of Service Quality Using Standardized Tools

Utilizing standardized tools like SERVQUAL to measure different dimensions of service quality (e.g., reliability, responsiveness, assurance) can add rigor and comparability to future research.

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APPENDIX
QUESTIONNAIRE

Dear Respondent,

The researcher is a student of the above-named Institution, carrying out research on Patients Perception and satisfaction with nursing care in a primary care centre in Benin city. I hereby solicit for your support and co-operative in supplying correct and adequate information to the question below to ensure the success of the study all information provided will be treated confidentiality.

Thanks for your co-operation.

Yours faithfully,

Palmer favour Ruth

Section A : Socio-Demographic Data

Instruction: Tick the appropriate

box (✓)

- 1) Age (years): less than 20() 20-24() 25-29() 30-34 () 35-39() 40 and above ()
- 2) Marital status: single (), married(),divorced/separated(), widowed()
- 3) Educational status: no formal education (), primary(), secondary(), tertiary ()
- 4) Occupation: employed (), unemployed ()self-employed ()
- 5) Religion: christianity (), islam() african traditional religion(), others()
- 6)tribe: bini(),esan(), yoruba(),igbo(),hausa(), others ()

Section B

This section asks questions to determine the Patients' perceptions of nursing care rendered in a primary care center in Benin City.

Please indicate your level of agreement with the following statements: 5=Strongly Agree, 4=Agree, 3=Neutral, 2=Disagree ,1=Strongly Disagree

S/N		5	4	3	2	1
8	The nurses listened carefully to my concerns					
9	The nurses explained my condition and treatment clearly					
10	The nurses used simple and understandable language when speaking with me					
11	The nurses provided enough information about my treatment and health condition					
12	The nurses demonstrated competence and confidence while providing care					
13	The nurses responded promptly whenever I needed assistance					

Section C:

This section asks questions to determine the Patient satisfaction with nursing care in selected primary care facilities in Benin City Please indicate your level of agreement with the following statements: 5=Strongly Agree, 4=Agree, 3=Neutral, 2=Disagree ,1=Strongly Disagree

S/N		5	4	3	2	1
14	The nurses communicated effectively with me during my visit.					
15	The nurses treated me with respect and courtesy					
16	The nurses responded promptly to my needs and requests					
17	The nurses demonstrated professionalism and competence					
18	The nurses paid attention to my individual needs and concerns					
19	The nurses provided clear and sufficient information about my condition and treatment					
20	Overall, I am satisfied with the nursing care I received at this facility					

Section D

This section asks questions to determine the Factors influencing patient perceptions of nursing care in selected primary care facilities in Benin City.

Please indicate your level of agreement with the following statements: 5=Strongly Agree, 4=Agree, 3=Neutral, 2=Disagree ,1=Strongly Disagree

S/N		5	4	3	2	1
21	The nurses' communication skills positively influenced my perception of the care I received					
22	The respect and courtesy shown by nurses affected how I viewed the nursing care					
23	The promptness of nursing care influenced my overall satisfaction					
24	The nurses' level of professional competence shaped my opinion about the care provided					
25	My previous experiences with healthcare influenced how I perceived the current nursing care					
26	Recommendations from family or friends influenced my expectations and perception of nursing care					

APPENDIX II

RELIABILITY OF INSTRUMENT (QUESTIONNAIRE) OF PATIENTS PERCEPTION AND SATISFACTION WITH NURSING CARE IN A PRIMARY HEALTH CARE CENTER IN BENIN CITY A pilot study was conducted using 10% of the target population to test the reliability of the Instrument, lapses in the tool was amended and corrections were made making the instrument reliable

The pilot test involved 9 participants outside the main study sample. Responses were collected, and the following Cronbach's alpha values were calculated for each section:

Section	Number of Items	Cronbach's Alpha
patient's perceptions of nursing care rendered	6	0.77
patient satisfaction with nursing care	7	0.72
factors influencing patient perceptions of nursing care	6	0.80
challenges affecting the delivery of quality nursing care	5	0.79
Overall reliability (average)	24	0.77

RELIABILITY STATISTICS		
Cronbach's Alpha based on standardized items	Cronbach's Alpha	NO of items
0.70	0.77	24

Cronbach's Alpha = 0.77

APPENDIX III



EGOR LOCAL GOVERNMENT

OFFICE:
Local Government Secretariat Road,
Behind Edaiken Market, Uselu, Benin City, Edo State.

P.M.B. 001, Ugbowo
e-mail: egorlocalgovernment@gmail.com

11th April, 2025

Our Ref: _____

Date: _____


The Head of Department,
Department of Nursing Science,
School of Basic Medical Science,
University of Benin.

LETTER OF ETHICAL APPROVAL

I am directed to inform you that the management has approved the research project "*Patient Perception and Satisfaction with Nursing Care in Primary Care Center in Benin City*", for Palmer Favour Ruth, A student of your department.

It is the belief of the Local Government that this study can be used to enhance the knowledge of Nursing Care in Benin City and Nigeria in general.

The Local Government will appreciate if the result of this study is shared amongst the relevant stakeholders at the end of this exercise.



DR. IRAOYAH G.E.
Medical Officer of Health,
For: The Chairman,
Egor Local Government.