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Corporate Social Responsibility in Public Hospitals: A Qualitative Sociological Study of Health Service Provision in Gusau Metropolis, Zamfara State, Nigeria

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Abstract

Corporate Social Responsibility (CSR) has increasingly become a critical framework for understanding how organizations contribute to societal well-being beyond their core mandates. While CSR is often associated with private-sector organizations, public healthcare institutions also engage in socially responsible practices that influence health service provision and community trust. This study explores the nature, forms, and sociological implications of CSR practices in selected public hospitals in Gusau Metropolis, Zamfara State, Nigeria. Using a qualitative research design, in-depth interviews and key informant interviews were conducted with healthcare administrators, medical personnel, and patients across three public hospitals. Thematic analysis revealed that CSR in public hospitals manifests through subsidized healthcare services, community outreach programs, ethical care practices, and informal support mechanisms for vulnerable populations. However, findings also show that CSR implementation is constrained by inadequate funding, bureaucratic limitations, and weak institutional frameworks. The study argues that CSR in public healthcare institutions should be understood as a socially embedded practice shaped by structural conditions, power relations, and community expectations. Strengthening CSR frameworks in public hospitals can enhance service delivery, equity, and public trust in the health system.

Keywords: Corporate Social Responsibility, Public Hospitals, Health Service Provision, Medical Sociology, Gusau Metropolis, Nigeria.

Introduction

Healthcare institutions occupy a central position in society due to their responsibility for safeguarding human life and well-being (Bronn and Vrioni, 2001). Beyond their clinical functions, hospitals are social institutions embedded within broader political, economic, and cultural structures (Tounes et al., 2011). In recent years, the concept of Corporate Social Responsibility (CSR) has gained prominence as a framework for understanding how organizations respond to societal needs, ethical obligations, and community expectations. Although CSR discourse has traditionally focused on private corporations, public healthcare institutions also engage in socially responsible activities that shape health service delivery and social outcomes (Bronn and Vrioni, 2001). In Nigeria, public hospitals serve as the primary source of healthcare for a large proportion of the population, particularly in low-income and semi-urban settings such as Gusau Metropolis in Zamfara State. These institutions operate in contexts characterized by limited resources, high disease burden, and significant social inequalities (Tounes et al., 2011). As a result, public hospitals are often expected to go beyond routine service provision by offering subsidized care, community outreach, and moral support to vulnerable groups. These expectations align closely with CSR principles, even when such practices are not formally labeled as CSR (Islam 2016; Dyck et al., 2015; Emilina 2015; Erdiaw-Kwasie 2015).

From a sociological perspective, CSR in healthcare reflects broader social relations, power dynamics, and institutional responsibilities within society (Tounes et al., 2011). Understanding how CSR is conceptualized and practiced in public hospitals provides insight into the social organization of healthcare, the moral economy of medical work, and the relationship between the state, healthcare providers, and communities. This study therefore examines CSR practices in selected public hospitals in Gusau Metropolis, focusing on how these practices influence public health service provision and community experiences (Islam 2016; Dyck et al., 2015; Emilina 2015; Erdiaw-Kwasie 2015).

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Literature Review

Historical Background of Corporate Social Responsibility (CSR)

For a better understanding it is quite important to begin with the historical origin of Corporate Social Responsibility (CSR) so that to lay a foundation upon which the opinion or ideas of expert, theories and experiences in the field being discussed. Corporate Social Responsibility (CSR) seized an extended and diverse historical origin likely attributed to the evident wrong and unhealthy misconduct and attitude of

business conglomerate. According to Tounes et al., (2011) wrong behaviour and misconduct of business corporations provided an arena for campaigning and repeated call on the business, company, firm and industries owners to demonstrate compassionately and show concern to the host communities of their businesses. Literature indicates a divergent point of view to the origin and evolution of Corporate Social Responsibility (CSR) but on the other hand, formal writings on the subject matter have been most apparent in the United State of America where a bulk literature on CSR has been found.

According to Roy, (2010) the origin of Corporate Social Responsibility (CSR) is traced around 1950s, a period that the advocate of the concept and activist of the time express the need and call for the business owners and corporations to show more empathy, sympathy and understanding of the vulnerable situation of the society in general. Tounes et al., (2011) asserted on the other hand that campaigning in support of CSR become very prominent and popular during the period of 1950s through the writing of American economics Horward Bowen titles 'the social responsibility of the businessmen (Arsad 2016; Abdulrazak & Ahmad 2014; Aaijaz & Ibrahim 2012).

Another historical perspective of CSR comes from Epsteini (1987). Epsteini see the development of CSR from the angle of moral ethics. His opinion is that business ethics and social responsibility is just a part and facet. According to Epsteini (1987) social responsibility is part of the compassionate feature of business owners of the 19th century which term as 'private business is a public trust'. Moreover, Argandona (2010) express the active role play by protestant and catholic Christian group in the emergence and development of CSR. This is because of their belief of public service and stewardship. The catholic camp advocates to their followers especially the business owners and industrialists, the courage to engage into the habit of social service provision and other humanitarian support to the members of the society. The religious philosophy by catholic and protestant to their members motivated them and also encourages the establishment of social responsibility.

Moreover, Mintzberg (1983) stated that CSR is long being present as an act by society to demonstrate their concern and care for the other members of the society especially those that are in need or in difficulty. This act of behaviour described as moral and ethical disposition by responsive members of the society is in existence for a long period of time. Ismail (2009) explain further the CRS origin. He indicated that CSR has been long practice since the early period of 20th century as shown by the writings of Sheldon (1923). Sheldon writings centred on social performance of businesses which shows it connection to market performance in the communities. His writings also emphasized further on the ethical performance and societal justice. These make business to be successful in the society and consequently provide a better standard of living (Jo et al 2016; Ojobo & Abdullahi 2016).

Hart (2012), Natute (2011) explain the contribution of international organisations to the development of CSR. Organisation such as United Nations Organisations (UNO), World Business Council for Sustainable Development (WBCSD), Dow Jones Sustainability Indexes (DJSI) and Organisation for Economic Corporation and Development (OECD) greatly

contributed to the idea of CSR promotion and development. Those organisations initiated so many discussions on the failure of various governments especially in the developing countries to address the basic need of their societies. Those organisations come in also with discussion to help in the governments across the world to implement the social, economic and environmental needs and also provided a policy direction for business corporations and government at global perspective on the corporate social responsibility and sustainable development across the world.

To this end, on the origin and development of CSR Caroll (1999) cited in Tounes et al., (2011) asserted that industrialists, business owners should conduct and administer their business activities with intension to meet the needs of the community members. With this intension, it is established that means of economic production should be engage in the process of production and distribution that bring and add to the socio-economic welfare and respect to the environment. Caroll (1999) in Tounes (2011) express further that social responsibility involved a public bearing toward economic resources of the society and readiness to ensure that those economic and human resources are utilized for a wider social expectation with the sole aim to address and fulfils the need and expectation of the society generally (Islam 2016; Dyck et al., 2015; Emilina, 2015; Erdiaw-Kwasie, 2015).

Corporate Social Responsibility (CSR) Defined

Many scholars, theories contributed greatly to the growth and development of literature of corporate social responsibility. For a meaningful review of literature, it is a paramount important to start with the opinion, view of the expert in the area on the definition of CSR. According to Samuelson (1971) CSR defines as an important responsibility carried out by large business corporations in the contemporary periods in order to take on their services and interests in a long-term bases. Sheldon (1923) sees Corporate Social Responsibility (CSR), as a doctrine of service responsible for the organisation and solving public problems, ranging from poverty, lack of employment and protection of environment with aim of protecting public from various diseases it may cause. Sheldon opinion is centred on the main objective of industry that is service to the community.

Eilbert and Parket (1973) are of the opinion that corporate social responsibility is just being good to your neighbourhood through solving his basic social problem. This is in addition of corporate businesses to carried out a useful function in addressing the basic societal problems like hunger, unemployment and many more. Corporate Social Responsibility is beyond 'a conduit for individual generosity'. It encompasses and includes voluntary expenditure to the societal services with highest sincerity and seriousness (Manne 1972). Scholars like Orlitzky (2003), Cochran and Wood (1984) described CSR as a corporate responsibility that increases the efficiency, status and reputation of business corporations. Those scholars are of the opinion that corporate refutation enhances financial performance of businesses. This may perhaps represent the corporate behaviour that supports the prevailing societal norms and values as well as societal expectation (Orlitzky 2003; Cochran & Wood 1984). To Holmes (1976), Fitch

(1976), Zenisek (1979) and many other researchers, the concept of CSR simply means undertaking business activities with sole aims of making a profit, in line with rules and regulations, serving to resolve the social problems facing the host communities or the general members of the society.

Having, supports CSR gain from several scholars i.e (Orlitzky 2003; Cochran & Wood 1984; Samuelson 1971) some of the scholars on the other hand, oppose the diverse and mixed definitions of the meaning of CSR. According to Ismail, (2009), Friedman in 1962 strongly opposed CSR considering it as a detrimental issue to the underlining origin of capitalist system of economy. The scholar (Friedman) disputes without a doubt that, the only social responsibility of business is to increase and make profit which profit maximisation. In addition, Humber, (2002) hold same opinion and argued that CSR is a privilege of the business corporation not ethical laws forced on business. Therefore, business corporation should be allowed only to decide its social responsibilities without external intervention.

Contemporary scholars and researchers perceive CSR in the light of efforts made by corporations to social, economic and environmental wellness of the community. Their understanding consequently, reveal CSR as the commitments of business corporation to the concerns and services of the society (Bronn and Vrioni, 2001). According to Bronn and Vrioni (2001) CSR "is the continuing commitment by business to behave ethically and contribute to economic development while improving the quality of life of the workforce and their families as well as of the local community and society at large". Furthermore, Kotler and Lee (2005) view CSR as an obligation by business corporations to develop the wellbeing of their host communities set up organisational resources as an unrestricted business practice. However, van Marrewijk (2003) describes CSR as a voluntary commitment of corporations to the "social and environmental concerns" of their stakeholders. Transmitting a significant look at the three definitions provided by Bronn and Vrioni, 2001, Kotler and Lee (2005) the word commitment is common to all definition above. It is therefore a sign that corporate social businesses have a social bond with the society.

According to Husted (2006) European Union set up the framework and concept of CSR in order to encourage the idea of social responsibility to the Business Corporation (BC) and environment. Husted (2003) view corporate social responsibility as the "firm consideration of, and response to, issues beyond the narrow economic, technical and legal requirements of the firm… to accomplish social benefits along with the traditional economic gains which the firms seek." (Husted 2003). Whereas, European Commission (2001) express the opinion that CSR is a situation whereby business corporations include the issue of environment and other social concerns in their business and in their relations with their stakeholders on a voluntary basis. This is due to the idea and belief that sustainable business success relates to responsible behaviour. There are two dimensions at which CSR is managing change in a socially responsible approach at the company level view as internal and external. Internal dimension includes socially responsible issues like human capital investment, management change, employees, health and safety. While the external dimension goes further to company level and

include the local community like customers, public authorities, business partners, stakeholders, suppliers as well as NGOs (Arsad 2016; Abdulrazak & Ahmad 2014; Aaijaz & Ibrahim 2012).

CSR in Healthcare Institutions

CSR in healthcare institutions differs from corporate CSR in the private sector due to the non-profit orientation and public accountability of health organizations. In public hospitals, CSR is often expressed through subsidized treatment, free medical outreaches, health education programs, and support for marginalized populations. These practices are particularly significant in developing countries, where public health systems are under-resourced and social safety nets are weak. Studies have shown that socially responsible healthcare practices enhance patient satisfaction, improve institutional reputation, and strengthen trust between healthcare providers and communities. However, CSR initiatives in public hospitals are frequently informal, inconsistently implemented, and heavily dependent on individual commitment rather than institutional policy.

Medical sociology emphasizes that health service provision is not merely a technical process but a socially structured activity influenced by class, power, culture, and institutional arrangements. Access to healthcare, quality of services, and patient-provider interactions are shaped by broader social inequalities and organizational constraints. CSR practices in public hospitals can therefore be viewed as mechanisms through which institutions attempt to address social disparities and moral obligations within healthcare delivery. In the Nigerian context, public hospitals often operate under severe constraints, including inadequate funding, staff shortages, and infrastructural deficits. These challenges affect the ability of hospitals to institutionalize CSR practices, making it essential to examine how CSR is understood and enacted at the grassroots level.

Methodology

This study adopted a qualitative research design to gain an in-depth understanding of CSR practices and their sociological implications in public healthcare institutions. A qualitative approach was considered appropriate because it allows for the exploration of meanings, experiences, and perceptions of key stakeholders within their social context. The study was conducted in Gusau Metropolis, the capital of Zamfara State, Nigeria. Gusau hosts several public healthcare facilities that serve both urban and surrounding rural populations. Three public hospitals were purposively selected based on their size, patient load, and role in public health service delivery. The Participants of this study included hospital administrators, community health workers, and patients. A total of 15 participants were interviewed, comprising 5 healthcare administrators and 10 patients receiving treatment at the selected hospitals.

Data were collected using in-depth interviews. Interview guides were designed to explore participants understanding of CSR, examples of socially responsible practices, challenges in

implementation, and perceived impacts on health service provision. Data collected during interviews were transcribed verbatim and analyzed thematically. Thematic analysis involved familiarization with the data, coding, categorization, and identification of recurring patterns and themes. A sociological lens was applied to interpret findings in relation to institutional structures, social norms, and power relations.

Findings

This section presents an in-depth account of interview findings from selected public hospitals in Gusau Metropolis. Each quotation is expanded with contextual explanation to demonstrate participants' social positions, lived realities, and the institutional environment shaping Corporate Social Responsibility (CSR) practices in public healthcare service provision.

Social Meanings and Interpretations of Corporate Social Responsibility

Many participants initially struggled with the technical language of CSR but quickly translated it into everyday moral and professional meanings rooted in public service. For example, a senior hospital administrator, who had over 15 years of experience in public health management, explained CSR as inseparable from the mission of public hospitals:

> CSR as a word may sound like something for private companies, but in public hospitals, our responsibility is bigger because we are serving the people on behalf of the government.

This statement reflects how CSR is framed not as a voluntary initiative but as an extension of state responsibility. The administrator's emphasis on serving the people highlights the perception of hospitals as custodians of public welfare rather than autonomous organizations. Similarly, a senior medical doctor described CSR as embedded within professional identity:

> We don't need a policy document to tell us to be socially responsible. Once you are a doctor, you already know your duty to society.

This quote illustrates how CSR is internalized through professional socialization. For this participant, social responsibility is learned during medical training and reinforced through daily clinical encounters, making formal CSR policies appear redundant.

Patients articulated CSR in experiential terms. A middle-aged male patient receiving treatment for hypertension explained:

> When the hospital helps someone who has no money, that is social responsibility to me.

This definition reflects a lived understanding of CSR grounded in tangible acts of support rather than abstract institutional commitments.

CSR through Financial Support and Fee Waivers

One of the most visible manifestations of CSR was financial flexibility in service delivery. A hospital staff explained how discretion is often applied when dealing with indigent patients:

> There are cases where we completely waive payment, especially for emergency and maternity cases.

This statement reveals the informal mechanisms through which CSR operates, often bypassing rigid bureaucratic procedures in favor of moral judgment. The emphasis on emergencies and maternity cases reflects societal values placed on saving life and protecting motherhood.

A nurse working in the maternity ward elaborated further:

> If a woman is in labor, nobody asks for money first. We treat her, and later we see what can be done.

This quote underscores how clinical urgency overrides administrative protocols. It also demonstrates how CSR becomes situational, emerging most strongly during moments of crisis. A female patient who benefited from such flexibility narrated her experience with visible emotion:

> They wrote my drugs and I was worried because I had no money. Later, one of the nurses told me not to worry, that the hospital would help.

Her account reflects how CSR practices reduce anxiety, preserve dignity, and encourage trust in public health institutions.

Community Outreach as an Extension of Institutional Responsibility

Participants described CSR as extending beyond hospital walls into surrounding communities. A midwife involved in outreach programs explained:

> We go to villages to educate pregnant women and encourage them to come for antenatal care.

This quotation highlights how CSR intersects with preventive healthcare. The participant viewed outreach not as extra work but as a continuation of professional responsibility toward reducing maternal mortality.

A community health officer further emphasized the proactive nature of CSR:

> During immunization campaigns, we don't wait for people to come to the hospital; we take healthcare to them.

This statement reflects an understanding of CSR as inclusivity, recognizing structural barriers such as distance, poverty, and cultural norms that limit hospital access.

Informal CSR and Personal Sacrifice of Health Workers

A recurring theme was the reliance on individual health workers to sustain CSR practices. A junior doctor described collective efforts among staff:

> Sometimes we collect money among ourselves to buy drugs for a patient who cannot afford them.

This quote illustrates how CSR becomes privatized within public institutions, shifting responsibility from the state to individual workers. It also reflects strong collegial solidarity among healthcare staff. A nurse added a more personal dimension:

> There are days I use my own transport money to help a patient go home after discharge.

This statement reveals the emotional labor and financial strain placed on healthcare workers, many of whom earn modest salaries themselves.

Another nurse expressed the psychological burden associated with such sacrifices:

> It is painful when you want to help everyone but you don't have enough yourself.

This quote captures the moral tension experienced by health workers navigating between compassion and personal limitations.

CSR and Enhanced Access to Healthcare

Participants consistently linked CSR practices to increased utilization of public health services. A hospital administrator explained:

> If we insist strictly on payment, many people will not come to the hospital at all.

This statement acknowledges the structural poverty within the community and frames CSR as a practical strategy for improving health-seeking behavior.

A senior nurse observed behavioral changes among patients:

> When people know they will not be embarrassed because of money, they come early for treatment.

This quote demonstrates how CSR reduces stigma and delays in care, which are common barriers in low-resource settings.

A male patient with a chronic illness shared:

> Because they helped me before, I always come back here when I'm sick.

His experience shows how CSR fosters long-term trust and loyalty toward public hospitals.

Structural Constraints Shaping CSR Practices

Despite commitment to CSR, participants highlighted systemic barriers. A hospital administrator stated:

> The government allocation is not enough to cover all these social responsibilities.

This reflects the disconnect between societal expectations and institutional capacity. CSR is expected but not adequately funded. A pharmacist added operational insight:

> Sometimes drugs are not available, even when we want to give them for free.

This highlights how material shortages undermine even well-intentioned CSR efforts. A community health worker emphasized staffing challenges:

> We are overwhelmed with work. Outreach programs suffer because there are not enough hands.

This quote illustrates how human resource constraints limit the scope and sustainability of CSR initiatives.

CSR as Moral Economy and Social Solidarity

Participants framed CSR within broader cultural and moral values. A senior nurse reflected:

> In this society, if you help someone today, tomorrow you may be the one needing help.

This statement reflects reciprocal social norms and communal ethics that shape healthcare delivery in Gusau. A female patient interpreted CSR as symbolic of state presence:

When the hospital shows kindness, we believe the government still cares about us.

This quote reveals how CSR practices influence public perceptions of governance and legitimacy.

Discussion

The findings demonstrate that CSR in public healthcare institutions in Gusau Metropolis is largely informal, value-driven, and embedded in professional ethics rather than formal policy frameworks. This supports sociological arguments that organizational behavior is shaped by social norms and moral obligations, especially in resource-constrained settings. CSR practices contributed positively to health service provision by improving access, strengthening patient-provider relationships, and enhancing community trust. However, the reliance on individual commitment highlights structural weaknesses within the public health system. Without institutional support, CSR initiatives remain fragile and unevenly distributed. The study also reveals that CSR serves as a coping mechanism within underfunded health systems, enabling hospitals to partially address social inequalities. This underscores the need to integrate CSR into public health policy and organizational planning rather than treating it as an optional or charitable activity.

Conclusion

This study examined Corporate Social Responsibility and public health service provision in selected public hospitals in Gusau Metropolis from a sociological perspective. The findings show that CSR practices, though largely informal, play a significant role in enhancing healthcare access and social equity. However, structural and institutional constraints limit the sustainability of these practices.

Recommendations and Future Research

The study concludes that CSR should be recognized as an essential component of public healthcare delivery, particularly in low-resource settings. Institutionalizing CSR through policy support, adequate funding, and organizational commitment can strengthen public health systems and promote social justice in healthcare. Further sociological research should explore CSR across different regions and levels of healthcare in Nigeria.

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