

PUBLIC'S ATTITUDE TOWARDS SEEKING HEALTHCARE AND THEIR SATISFACTION WITH HEALTH SERVICES

Dr. Atif Mahmood*, Dr. Mukkaram Ali, Dr. Asima Faisal, Dr. Bheesham Kumar

* MBBS, M. Phil (Physiology), MBA, PhD Scholar, Assistant Professor, Department of Physiology, Bhitai Dental and Medical College, Mirpur Khas, Sindh

Institute of Business Management

Email: atif_mahmood20@yahoo.com

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Abstract

Background: Health is an imperative feature of an individual's life, by and large health status is considered as reduce in illness, low burden of disease and morbidity in general population. It is generally accepted that improved health is not simply controlled level of fertility or reduce in the mortality and morbidity but improvement in the overall productivity of an individual

Objectives: To determine the determinant of public attitude towards seeking health service, and identify the level of their satisfaction with healthcare services.

Methodology: This is a descriptive cross sectional study which was carried out in private and public hospitals of Karachi and Hyderabad. Questionnaire based survey was conducted to measure the health seeking behavior; as no standardize tool was available on this subject a self-designed questionnaire with the help of relevant studies, that was reviewed by subject experts and the corrections were made based on the experts suggestion. Data was collected through self-administration of questionnaire among the research subjects. Statistical and analytical software such as Statistical Package for the Social Sciences (SPSS) and MS excel software is used for data analysis and representation. Frequencies and percentage are used; Chi-square test of significance at (p-value= 0.005) was used to determine the association of variables. Cron-bach's alpha test was used to further determine the reliability of questionnaire.

Results: The determinant identified which have significant effect on health seeking behavior were, gender, occupation, monthly income, cost of care, lack of sufficient information, accessibility to healthcare facility. The result showed significant association between level of satisfaction with healthcare service and attitude towards seeking healthcare services.

Conclusion: As the planning and delivering of healthcare services is directly impact by populations' attitude towards health care utilization; the findings of this study would help in providing a better understanding of population attitude and in designing a precise healthcare system to satisfy it

Introduction

Health seeking behavior has been defined as any activity that an individual take part in who consider themselves to be ill or have a health issue, in order to search for an appropriate therapy to alleviate it.(1) Individuals' health seeking behaviors can be displayed by studying certain cultural features, a descriptive model states that a specific illness have signs and symptoms through which an illness is identified, and supposed cause of illness and it prognosis is established.(2) Individual or their immediate care givers interpret these signs and symptoms and classifying the problem, recommending the appropriate therapies to alleviate the problem.(3)

Decision making processes is followed by initializing health seeking behavior, similarly this process is also ruled by individuals and household behaviors, their community's value and norms, and their expectation as well as health

provider related factors and behavior.(4) That is why the subject of health seeking is not a very consistent one and depends upon cognitive and non-cognitive factors which require a thorough situational health care seeking behavior analysis. The situation can be reasoning or perception, socio-culture or economic factor or a combination of all.(5) There are a number of other factors present in the macro-environment that can greatly impact the health seeking patterns including financial situation, family and political system, availability of social support, cultural factors etc.(6)

Various researches have highlighted the trends in healthcare services utilization for both public and private health care systems as well as informal avenues health facilities.(4, 6) these predispositions are greatly depend on and affected by factors such as age, gender, level of female autonomy, urban or rural habitat, economic status, seriousness of illness, availability and accessibility to health care facilities, quality of healthcare provided and so on. (7)

Individual choice as which health service avenue is dependent on their perception about its affectivity and benefits, in areas of Pakistan where populous are not very literate seek help from faith healer or “Peer -Faker” rather than properly investigating the illness by a medical doctor. On the other hand those with high socio-economic status tend to seek medical help for the inconsequential health problem.(8)

As the planning and delivering of healthcare services is directly impact by populations’ attitude towards health care utilization; the findings of this study may help in providing a better understanding of population attitude and how to design a precise healthcare system to satisfy it. The objective of the current study was to determine the determinants of public attitude towards seeking health service, and identify the level of their satisfaction with healthcare services

Methodology

This is a descriptive cross sectional study which was carried out in private and public hospitals of Karachi and Hyderabad. Duration of the study was from April to July 2014. Study sample included patients seeking treatment at private and public hospitals of Karachi and Hyderabad and included patients that were present at the time of data collection and were willing to participate in the study. The sample size was calculated as 95.5 by using Epi-open sample size calculator with 80% power of the test and 95% confidence level taking 46% as the population health seeking proportion with physicians(9) and margin of error taken as 0.1. Although the sample size was calculated as 96 but to make the calculations easy the sample size was inflated by 4% to 100. Non-Probability subjective sampling was used.

Questionnaire based survey was conducted to measure the health seeking behavior; as no standardize tool was available on this subject a self-designed questionnaire with the help of relevant studies was designed.(2) The questionnaire was reviewed by subject experts and the corrections were made based on the expert’s suggestion. Data was collected through self-administration of questionnaire among the research subjects. Questionnaire was translated in to Urdu Language for easy grasp for those who cannot understand English Language. Apart from demographic information the respondents were asked to fill the questionnaire by indicating their agreement on a five point Likert Scale containing, Every Time, Very Often, Often, Rarely, and Never, (with scores of 1, 2, 3, 4 and 5 respectively).

Cron-bach’s alpha test was used to determine the reliability of questionnaire. The measured value of Cron-bach’s alpha was found to be 0.791 which is accepted as a good reliability index by international standard for a low stake test.

Table 1: Cron-bach’s Alpha

Reliability Statistics		
Cron-bach’s Alpha	Cron-bach’s Alpha Based on Standardized Items	N of Items
.791	.812	30

In order to identify the preferred source of health care, respondents were asked to specify the frequency of services used, perceived barrier hindering in seeking health, most frequently used service at a healthcare facility as well as

their service experience. Study variables included; age, gender, income, education, occupation, health service frequency, health status, barriers, service experience.

Statistical Package for the Social Sciences (SPSS) and MS excel software was used for data analysis and representation. Frequencies and percentage were calculated; Chi-square test of significance at (p-value= 0.005) was used to determine the association of variables.

Participation in the study was voluntary and the objective of the study was explained to the participant verbally as well as in written form; a written informed consent was obtained from every participant. Confidentiality and anonymity of organizations and participants was ensured.

Results

Table 1: Demographics of the respondents

Demographics		Frequency (N=100)	Percentage (%)
Gender	Male	29	29
	Female	71	71
Marital status	Single	25	25
	Married	73	73
	Widowed	2	2
Employment Status	Student	20	20
	Employed	25	25
	Unemployed	48	48
	Self employed	7	7
Educational Status	Illiterate	8	8
	Matric	6	6
	Intermediate	5	5
	Graduate	81	81
Religious beliefs	Muslim	84	84
	Hindu	7	7
	Christian	8	8
	Others	1	1
Monthly Income	<12000	69	69
	12000 – 24000	14	14
	25000 – 50000	8	8
	50000 – 100,000	8	8
	>100,000	1	1

*CHK = Civil Hospital Karachi, JPMC= Jinnah Post Graduate Medical Center

Respondents age we between 17 to 76 years, the majority number of subjects fall between the ages of 32 to 43; with 13 subjects of age 32, 10 subjects of 34 and with 11 subjects of 43. Sample genders distribution was, majority of subjects were female with a frequency of 71. 84 respondents religious belief was Islam, 8 were Hindu and 8 were Christian. Majority of the study subjects had university education with a percentage of 86, while only one individual was illiterate. Regarding subjects' occupational background it was found that a major chunk of subjects did not held any employment and was dependent on their spouses or parents for support. In terms of income and financial security majority of the subjects fall in the lower group with income less than Rupees 12000 per month that because

of the same reason as the subjects were dependent financially on other members of household. Majority of the subjects (73) were married while 25 were single. (Table 1)

Health Seeking Variables

Table 2 Response to health seeking variables

		Frequency (N=100)	Percentage (%)
How would you rate your Health Status	Very Good	3	3
	Good	21	21
	Fair	34	34
	Poor	42	42
Which Healthcare Services Do You Use	Doctors clinic	56	56
	Pharmacy shop	19	19
	Traditional healers	5	5
	Spiritual care	20	20
Do you seek professional help for health issues?	Very often	40	40
	Often	38	38
	Rarely	22	22
Does service experience meet your expectation?	Very Often	18	18
	Often	24	24
	Rarely	58	58
Trust in each Service Use	Doctors Clinic	35	35
	Pharmacy Shop	33	33
	Traditional Healers	10	10
	Spiritual	22	22

Table 2 showed that not a great deal of patients feel great about their health status. A good (42%) feel poor about their health which is note-worthy. Majority of the patients (56%) visit doctor's clinic in order to seek healthcare. Around 78% patients prefer to seek professional help for their health related issues. Surprisingly majority of the patients (58%) are not satisfied with their experience as it doesn't meet their expectation. People have shown equal trust in doctor's clinic and pharmacy stores. (Table 2)

Service Barriers

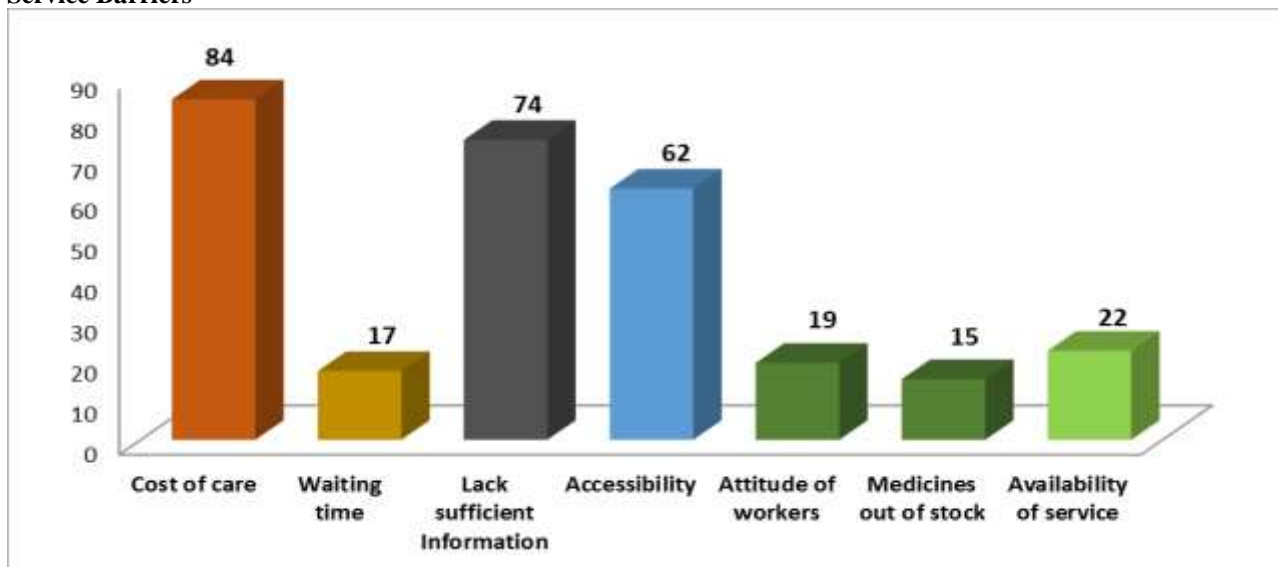


Figure 1: Response to questions related to Service barriers

Figure 1 show that according to people, the major reason for not getting the expected health care services is the cost of care (84%) followed by lack of sufficient information or awareness regarding the disease process (74%). Accessibility to health services is also one of the important barriers in seeking healthcare satisfaction (62%).

Services Experience and Satisfaction

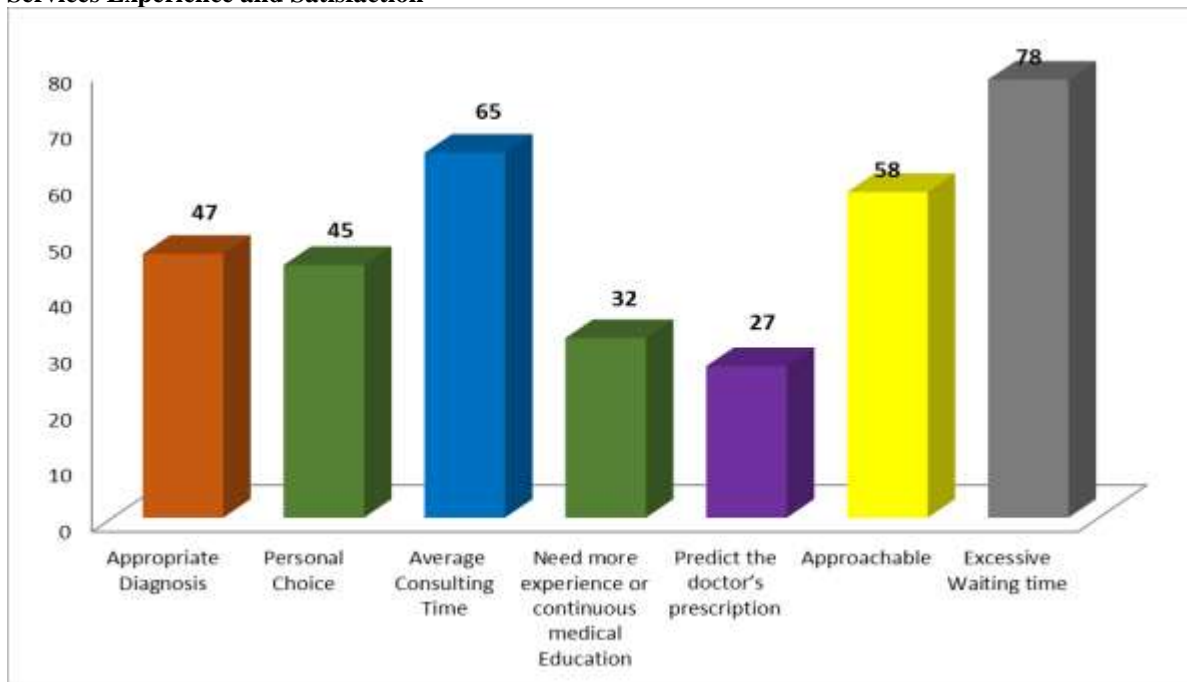


Figure 2: Response to questions related to Service experience and satisfaction

Figure 2 shows the people’s reaction towards healthcare service experience and satisfaction associated with it. Only 47% people think that their doctors make appropriate diagnosis, greater than 50% of the people think that they visit

doctors on other's advice rather than their own choice. Majority of the patients (65%) were satisfied with the average consulting time that the doctor has to offer. An important finding is the 32% patients think their doctors are inexperienced or should update their knowledge through CMEs whereas 27% think that they can even predict their doctors' prescription. Approximately 58% were satisfied with their doctor's approach towards their illnesses and 78% were furious with the excessive wasting of time during the long waiting process at consultant's/doctor's clinic.

Table3: Gender Association

Do you seek professional help for health issues? -----Subject Gender					
		Do you seek professional help for health issues?			Total
		Very often	Often	Rarely	
Subject Gender	Male	9	7	13	29
	Female	31	31	9	71
Total		40	38	22	100
p-value 0.002 (<0.005)					

Result showed a significant association of gender to health seeking behavior with a p-value of 0.002, as females were found to be more inclined to seek help for their health issues as compared to male (Table 3).

Table 4: Association with Barrier

Do you seek professional help for health issues? ----- Cost of care					
		Do you seek professional help for health issues?			Total
		Very often	Often	Rarely	
Cost of care	Very Often	25	7	3	35
	Often	13	25	11	49
	Rarely	2	6	8	16
Total		40	38	22	100
p-value 0.0001 (<0.005)					

Result showed a significant association of cost of care being a barrier to health seeking behavior with a p-value of 0.0001 means the financial burden of utilizing health care services hinder the respondent from seeking medical help for their health problems (Table 4)

Table 5 Association with Barrier

Do you seek professional help for health issues? ----- Accessibility/distance					
		Do you seek professional help for health issues?			Total
		Very often	Often	Rarely	
Accessibility/distance	Very often	19	5	3	27
	Often	8	17	10	35
	Rarely	13	16	9	38
Total		40	38	22	100
p-value 0.004 (<0.005)					

Result showed a significant association of accessibility being a barrier to health seeking behavior with a p-value of 0.004 means that the healthcare service facilities are not easily accessible to the participant and hinder the respondent from seeking medical help for their health problems (Table 5)

Table 6 Association with Satisfaction

Does service experience meet your expectation? -----Do you seek professional help for health issues?					
		Does service experience meet your expectation?			Total
		Very Often	Often	Rarely	
Do you seek professional help for health issues?	Very often	11	7	22	40
	Often	6	16	16	38
	Rarely	1	1	20	22
Total		18	24	58	100
p-value 0.001 (<0.005)					

Result showed a significant association of participant health seeking behavior with satisfaction from healthcare service with a p-value of 0.001, which mean those who are satisfied from their previous experiences with healthcare services tend to be more inclined to seek help for their health problem in future (Table 6)

Discussion

The basic purpose of this study was to understand the socio-economic determinants of public's attitude towards seeking healthcare services residing in Karachi and Hyderabad further to identify the level of patient satisfaction with these services.

The study outcome indicated that majority of the people seeking healthcare are between 17 to 76 years, the majority number of subjects fall between the ages of 32 to 43; with 13 subjects of age 32, and 10 subjects of 34 and with 11 subjects of 43. Sample genders distribution was, majority of subjects were female with a frequency of 71 and males were only 29 in the sample selected, and gender have showed strong association with health seeking behavior (p-value, 0.002). This finding might be because of utilization of convenience sampling technique. In comparison to another similar study the findings are similar in term that there female dominated the study sample although the highest frequency of ages in that study was between 20-29 years however in this study it was between 32-43 years.(10) As majority of the study subjects had university education with a percentage of 86, while only one individual was illiterate it can be assumed that the well-educated tend to seek healthcare service more as compared to ill-informed people.

Major chunk of subjects did not hold any employment and were dependent on their spouses or parents for support, 48% respondents were housewives, and 20% were students. In terms of income and financial security majority of the subjects fall in the lower group with income less than Rupees 12000 per month that because of the same reason as the subjects were dependent financially on other members of household. This indicate that those who are staying at home and have more time at their disposal and frequently tend to seek healthcare services and showed strong association with health seeking behavior with for occupation and income this result is support by a previous.(10) Professional healthcare services most often used (56%) was hospital or doctors clinics, while only 19 use pharmaceutical shop however, another study showed that community pharmacy is the most commonly frequented professional services that is used.(2) Most of the respondent rated their health status as poor or having a fair health status. Regarding health seeking attitude, subjects responded 78% seek healthcare services, while 22 % responded that they rarely do seek healthcare services. When questioned did the service experience meet their expectation majority reply that it rarely does, while 42% said if often meet their expectation.

The barrier or social determinant that are affecting the patrons health seeking behavior was identified as, 84% considered cost of care to be a major barrier, 74% considered lack of sufficient information and 62% consider accessibility to a major barrier in seeking healthcare, these result are supported by the finding of another study with cost of care remaining top most barrier (25.5%) and lack of information being second (19.9%).(2, 11) These barriers have showed significant association with participants' health seeking behavior cost of care (p-value, 0.0001), lack of significant information (p-value, 0.003) and accessibility and distance from facility (p-value, 0.004)

Association analysis of level of satisfaction with health seeking which is the primary objective of this study, result indicated that a significant association of participant health seeking behavior with satisfaction from healthcare

service with (p-value of 0.001), which mean those who are satisfied from their previous experiences with healthcare services tend to be more inclined to seek help for their health problem in future. Trust and satisfaction with the services provided by the health care providers, 47% of participants were satisfied that appropriate diagnosis was done of their illness 32% of participants were of the opinion that the health provider need continuous education, 27% of participants were of the opinion that the health provider need more experience, 58% were satisfied with their physicians' judgment, 78% were of the opinion that the waiting time to see doctors is; similar results were presented in a previous.(2, 12)

Conclusion

As the planning and delivering of healthcare services is directly impact by populations' attitude towards health care utilization; the findings of this study would help in providing a better understanding of population attitude and in designing a precise healthcare system to satisfy it. The current study has helped identify the socio-economic determinants affecting the health seeking behavior of public residing in Karachi and Hyderabad. The study would also help in improving healthcare services to satisfy the need of population in a more holistic way.

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