EFFECT OF SOCIOECONOMIC FACTORS IN THE UTILIZATION OF HEALTH SERVICES IN URBAN AREA MEDINA TOWN FAISALABAD

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ABSTRACT: The current study has conducted with the aim to identify the socioeconomic factors contributing to utilization of health services in urban area. Descriptive cross section design has used for this study. Convenient sample of 378 people has selected from medina town Susan road Faisalabad.

Data has collected by distributing self administered questionair.questionair was consisted on 18 declarative statements.varibles of this study effect of socio-economic factors in the utilization of health services are education and income that mainly effect the utilization of health services.

99.7% people says that people know about health services available in their area.98.4%

People says that private health services are too costly for the utilization of health

services .87.3% people visit government sector because government sector provides cost effective care .70.4% people says that their education is helpful in the utilization of health services but 59% people says that their income is not sufficient to meet their health needs.

Key words: health services, utilization, socioeconomic education income

Introduction:

A nation's growth depends on the health status of its people and health is a basic Human right of everybody everywhere.

Accessibility to health Care has a large socio- economic benefit whereas ill health has a grave effect on Productivity¹

Socio-economic differences in health and in use of health care are well known. Most data

on socioeconomic differences in health care utilization are based on retrospective self-report in community surveys, but the evidence on the strength of self-reported utilization of health care across socioeconomic groups is limited.²

In addition, the bad effects of ill health may hit poor people the hardest way mainly because they are ill more often and partly

because they have insufficient economic and human resources to lessen their risks of illnesses and tolerate high costs of treatment.³ Research evidence suggests that difficult access to health facilities is critical in keeping the utilization of services low.³ Poor families with their financial and social constraints in accessing health care services tend to resort to traditional healers and Hakeem's in nearby locations in villages, and a substantial proportion of population (46 percent) report as not using any health facility at all [National Institute of Population Studies (1998)]. Because of long distance and difficult access to services, especially in rural areas, a large part of expenditure on health goes to travel or transport costs [World Bank (1995)]. With the recent evidence of rising proportion of poor people in the country, it is likely that the detrimental effects of poor health and illness on individuals and households may aggravate if specific plans and actions are

not executed to increase access to health care services at much lower costs for the poor sections of population³

Research shows that the healthcare needs of individuals living in rural areas are different from those in urban areas, and rural areas often suffer from a lack of access to healthcare.⁴ These differences are the result of geographic, demographic, socioeconomic, workplace, and personal health factors. For example, many rural communities have a large proportion of elderly people and children. With relatively few people of working age (20–50 years of age), such communities have a high dependency ratio. People living in rural areas also tend to have poorer socioeconomic conditions, less education, higher rates of tobacco and alcohol use, and higher mortality rates when compared to their urban counterparts.⁴

Some socioeconomic factors are education, income that has more impact on in the utilization of health services. Individuals

with higher education may also be more likely to be socialized to health-promoting behavior persons with higher education may have developed better information processing and critical thinking skills in navigating bureaucracies and institutions, and abilities required to interact effectively with healthcare providers.⁵ Education level and income are components of socioeconomic determinants of health that influence on health and utilization of health services.. High mortality and morbidity ratio depend upon social economic level towards health services especially in urban areas. Individuals of

than individuals of higher status. It is indeed, an important responsibility of health care professionals to identify the factors .in Pakistan number of studies have highlighted the issues related to utilization of health

lower socioeconomic status, however,

generally have faced higher mortality rates

services have the means to pay for healthcare and to afford better nutrition.⁵ Income is also part to determination of health services utilization. Population in state of poverty or low income suffers with poor health status and they only visit to GP not specialist. Persons with higher incomes are more likely to visit private clinics. Socio-economic factors are lifestyle components and measurements of both financial viability and social standing. They directly influence social privilege and levels of financial independence. Socioeconomic factor related to utilization of health services is public health problem.

Research problem and significance Of study:

Firstly, to identify socioeconomic factors related to utilization of health services.

Secondly, the nature of study to analyze the cause of association between poor social economic status and poor health services

utilization. Thirdly, Finding from this study may help the health

Authorities to make the different polices to improve socio economic factors in utilization of health services finely, they can also serve as the foundation for further studies in the same field.

Research question:

Research question is direct rewordings of statement of purpose, phrase interrogatively rather than declaratively. Research questions invite an answer and help to focus attention on the kind of data that would have to be collect to provide that answer .research question of this study was what are the socio-economic factors contributing in the utilization of health services.

Literature review:

The study conducted by (Chakra borty, 2003) shows the importance of mother's

education on the utilization of health care services. Independent of other background characteristics, household's socioeconomic status and access to health care services education of a female had a net effect on maternal health service use, mother's education has strong influence on the use of health care services is consistent with the findings from other studies (Abbas and Walkers, 1986; Elo, 1992; Becker et al., 1993; Fosu, 1994). Moreover, women are more likely to use both modern and traditional health care services whose husbands are involved in business/services. The base of this study is on current information collected during antenatal follow-ups, which requires less memory recall. The limitations also need to be noted. According to specific disease condition the sample size did not permit separate examination of utilization of health care services conducted.⁷

This study by (Prosser, 2007) investigates the characteristics that may affect health care seeking behavior; these are education and regular income. In This study some factors influencing the actions and choices of people as they seek health care and aims to determine if respondents believe their health needs are being met. It is difficult to measure and access to the quality of health care services in the developing world [as] health care is often understood to be responsible for improvements not accounted for by other factors...(Bahr and Wehrhahn, 1993, cited in Moore et al., 2003, p. 281)8.

A numbers of empirical studies by (Cisse, 2011) of the determinants of health care demand in Africa in general and particularly in Côte d'Ivoire are available. In general, they make a difference between economic determinants (Dor and Van der Gaag, 1998) and social determinants of health care demand. Economic determinants are related to considerations of income and prices. In

this respect, Alderman and Gertler (1989) differentiate that individuals from households with a relatively high income stand a higher chance of seeking medical care than those from poor households. In addition economic factors, the distance to a health care provider plays an important role in health care demand. On the basis of studies carried out in Eastern Africa, Bryant (1972) reports a close relationship between the immediacy of health facilities and their use. According to Saeed, 2016 Analysis of education indicated that people with some level of education previously or currently employed give importance to the private health facilities; most likely because they could afford the cost of health care. The public sector in Ghana is overwhelmed with poor infrastructure, misdistribution of facilities and limited skilled personnel. Therefore older persons who can afford to pay for service and would not have to join long queues go to the private sector where

they may be seen early and receive proper attention. Access to public and private health facilities is especially worse in the rural parts as compared to urban parts of the country. It is therefore not surprising to see that relatively higher proportion of urban residents used the public facilities compared to rural residents-primarily as a result of barriers to access. A national health policy that requires urgent attention. Especially in deprived areas of the country. There is also initialization of National efforts at improving geographical access to public sector health services. ¹⁰

Methodology:

Study design:

The aim of this study was to explore the different socio-economic factors that effect in the utilization of health services that's why descriptive cross –sectional design used for this study. Because descriptive cross – sectional design explores and describes the

phenomenon in real life situations, it provides actual characteristics of particular individuals, situations and groups.

Descriptive design determines the frequency with which something occurs and categorize information and it also help in development of hypothesis that provides basis for future quantitative research. In this study, data was collected by sample survey, which is quick, easy.

Sampling:

Population is entire group in which researcher is interested while a sub set of population is known as sample and the process of selecting a portion of the population to represent the entire population is known as sampling .A convenient sample of 378 people has selected for this study. Convenient samples are inexpensive, accessible and usually less time consuming. This method commonly used in health care settings and cheep method.

Site and setting:

Site is overall location for the research; it can be entire community or entire setup, while more specific places where data collection occurs known as setting. Medina town Susan road Faisalabad was a site and y block of Susan road was setting for this study. Data collection is a precise, systematic method used for gathering of information relevant to research purpose or the specific objective, question or hypotheses of study.

Data collection:

There are different types of data collection method. In this study self-administer questionnaire form was used for data collection. It is a printed self repot form designed to elicit the information through written and verbal response. Questionnaire form used for this research study was consisting of 18 declarative statements with

two responses on nominal and statistical scale.

A nominal scale, as the name implies, is simply some placing of data into categories, without any order or structure. In research activities a YES/NO scale is nominal. It has no order and there is no distance between YES and NO and statistics Interval scale data would use parametric statistical techniques: Mean and standard deviation.

. Based on this conclusion, there is the need for establishment of more job opportunities to tackle the being without a job crisis in Ghana. This will get better people's social condition and there get better their health care utilization. The system was designed for community health development and services to improve entrance to health care to link the unfairness space in accessing quality health care services and to remove the non-financial check to health care delivery. The current study has conducted with the aim to identify the socioeconomic

factors contributing to utilization of health services in urban area. Descriptive cross section design has used for this study.

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Results:

In this study 99.7% people know about health services available in their area .87.3% people utilize government health services due to cost effective care of government sector and their low income that can't meet their health needs.98.4% people says that private health services are too costly to meet their health needs because government sector provide them cost

effective care not quality of care. Due to quality and emergency services available in private sector people satisfied from private health services but these services are too costly for them .that's why people with less income can't use too costly services of private sector. 70.4% people say that their education is helpful in the utilization of health services.78.1% people only earning hand and pay their house hold bills.3.2% children that paying their house hold bills. in this society widows who depend on their children. And divorced women who depend on their fathers and jobless and also creating a economic burden on their families.inspite of higher education level people are jobless and cause socio- economic burden. That's why people with higher socio economic status utilize better health care services than people with low socio economic status.

Informed consent was consisting of following:

- The purpose of study so, that individual can understand the nature of study.
- Right to participate voluntarily right to withdraw any time.
- Permission to use this information for research purpose.

Duration:

Study was carried out for the period of 18 months.

Discussion:

After conducting this study I concluded that people with high socio –economic status utilize better health service than people with low socio –economic status .education and income are most important components that effect socio- economic status .government should take steps in improving emergency services available in government sector so people can receive quality of care in government sector than private health sectors that quality of care will reduce

burden of disease upon the population.

..government should reduce socio-economic burden by giving opportunities for job to the educated persons who are staying jobless in their homes without any work.

This study has limitation because it is based

on the survey and restrict to the population of medina town .the fact that there is not enough data regarding the health care services utilization. People who are under the burden of low socio –economic status are also under the burden of disease.

Government should take steps to reduce this burden of disease and also causing factors low socio-economic status. These steps can leads to society with less burden of disease.

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