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Research Article

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Missed-Opportunities of Health Care Services in Persons Accompanying the Patients

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Abstract: Utilization of health services depends on its social legitimization in the household – in other words, its affirmation and endorsement of health seeking behavior. The Objectives were to study the reasons of missed opportunities of persons accompanying the patients regarding health care services and to assess the knowledge of persons accompanying patients about availability of health care services in hospital. The present cross-sectional study was carried out during October 2012 to December 2012 at Shri Guru Govind Singh Memorial Hospital, Nanded. The purposive sampling was used to enrol the individuals from who were accompanying the patients for various hospital services during study period. The predesigned questionnaire was used to collect the relevant information regarding the objectives. Data was entered in Microsoft Excel and analyzed by using statistical software open epi 2.3 version for chisquare tests. 400 persons were included in our study. Out of 400, 56% were females, 50% belongs to age group between 20-40 years, 43.75% illiterate, 82% belongs to rural area, 84.38% belongs socioeconomic status class V. 64% persons had the knowledge of health services provided in the hospital about drugs, food and investigation. 51.25% knew that surgeries are also being conducted in hospital. 80% persons were not utilizing the health care services available in the hospital. Most common reasons for non utilization of health services were preoccupied worries, lack of time, unknown place were most common reasons for missed opportunities of persons accompanying the patients regarding health care services.

Keywords: Missed Opportunities, Health Care Services, Knowledge, Cross-Sectional Study

INTRODUCTION

Health care utilisation is the use of health care services by people. The health care utilisation of a population is related to the availability, quality and cost of services, as well as to social-economic structure, and personal characteristics of the users. The underutilisation of the health services in public sector has been almost a universal phenomenon in developing countries [1]. Mere existence of Health care does not ensure appropriateness of processes and their outcome. Patient Satisfaction is the actual measure of clinical services that are being offered [2].

Differences in health status based on income, gender, educational status, geographic distribution and

occupation have been documented in India which show association of poor educational status and rural residence [3].

In 1977 the world health assembly decided that the main social target of governments and of WHO should be the attainment by all the people of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life, popularly known as "health for all by the year 2000" [4]. Still various countries are lagging behind the targets which were made during this declaration.

India is also among those countries. Regarding health issue government is making various policies and

programmes for the benefit of people. Still country is unable to attain the target of health for all. One of the reasons behind it is there are ample of people who though being ill do not avail the services provided to them. People who accompany patient sometimes themselves have various health complaints, but when they come along with the patient to hospital, irrespective of all the services available in the hospital, they do not utilise them or we can say though many health services are available in their hand reachable distance people are not able to utilise it to a complete extent which could be due to many reasons like preoccupied worries, lack of time, new atmosphere, unawareness etc.

Thus this study aimed for looking at the different factors, which play a role in missed opportunities for health care services, through the perspective of family members of patients admitted in the hospital as most of the people who accompany patient if at all are suffering from any disease do not undergo for their management due to various factors mentioned above.

Objectives

- To study the reasons of missed opportunities of persons accompanying the patients regarding health care services
- To study the knowledge of persons accompanying the patient about availability of health care services in hospital

MATERIALS AND METHODOLOGY

The study was cross-sectional study. Sampling was purposive with sample size of 400.Data was collected from all the persons accompanying the patients admitted in Shri Guru Govind Singh Memorial Hospital during the period of Oct 2012 to December 2012.Total 400 persons accompanying the patients had participated in the study. Data was collected by interviewing these persons accompanying the patients by predesigned, pretested, semistructured questionnaire in local language.

Questionnaire contained the details regarding their age, literacy, income, their knowledge of health services available in the hospital, their complaints and their reasons for non utilization of health services provided in the hospitals.

Data was collected, entered in Microsoft excel and then analysed using statistical software Open Epi 2.3 version for chi square test, mean and percentage.

RESULTS

Among the 400 persons who had participated in the study most of them 169(42.25%), were under the age group of 31-45 while 130(32.5%) and 105(26.25%) belong to the age group 0-30 and more than 45 respectively. Among them 243(60.75%) were female and 179(44.75%) were illiterate while 78(19.50%) had primary education, 123(30.00%) had secondary education 19(4.75%) were graduate and only 1(0.25%) had completed the post graduation. 280(70%) of the people belonged to rural area. 383(95%) of them belonged to class 4 while 2(0.50%) and 1(0.25%) belonged to class 3 and 2 respectively while none of them belonged to class 1.

Among all the study subjects 358(89.50%) of the subjects were aware about the one or other health services available in the hospital. Most of them 358(89.5%) were aware about the availability of the drugs and food in the hospital. 320(80%) subjects knew that investigations are done in the hospital. 205(51.25%) subjects knew that various kinds of surgeries are being done in the hospital. Only 4(1%) had the knowledge about the blood bank in the hospital, (Table 1).

Services	No. of Subjects (%) (n=400)		
Drugs	358(89.50)		
Food	358(89.50)		
Investigations	320(80.00)		
Nursing	203(50.75)		
Regular monitoring	265(66.25)		
Active supervision	324(80.10)		
Blood bank	4(1.00)		
Low cost radiological investigations	69(17.25)		
Sanitation	91(22.75)		
Post operative care	154(38.50)		
Dressing	177(44.25)		
surgeries	205((51.25)		
Not aware	42(10.50)		

Relation between the awareness and the socio demographic profile had been analysed in which it had been found that there is significant association between the awareness and sex of person as males had more knowledge about the health services with p-value 0.0039. Significant association had been found between the age and awareness where p-value came out to be 0.00016 and likewise between the literacy and awareness more literate people were more aware. Relation had also been established between the previous visits in hospital and awareness of hospital services in which significant association had been found between the two having p-value of 0.00001. Association had also been established between the sociodemographic profile and other conditions with that of utilisation of health services in the hospital. Significant association had been found between the literacy and utilisation of health services as illiterate subjects was found to less utilise the health services compared to literate. Significant association was also found between the previous visits and utilisation of health services. Those who did not have previous visit in the hospital did not utilised the health services (Table 2).

	Socio demographic profile	Yes (%)	No (%)	χ2	df	p-value
Sex	Male	2(8.69)	21(91.30)	.0791	1	.826
Sex	Female	9(10.22)	79(89.77)			
Age	0-30	2(6.45)	29(93.55)	.346	1	.8411
	31-45	4(9.52)	38(80.48)			
	>45	5(10.20)	44(89.80)			
I itomoor	Illiterate	2(3.18)	6196.82)	7.183	1	.00731
Literacy	literate	9(18.37)	40(81.63)			
Area	Urban	3(7.69)	36(92.30)	.1225	1	.7263
Area	Rural	8(9.64)	75(90.36)			
Previous visit	Yes	9(16.07)	47(83.93)	4.806	1	.02886
Previous visit	No	2(3.64)	53(96.36)			
	0-10	2(13.33)	13(86.67)	.2277	1	.6333
Duration of stay	>10	9(9.38)	87(90.62)			

Table 2: Relation of socio demographic profile in relation to the utilisation of services

Among the 100 persons who had complaints but were not utilising the health services most common reason was preoccupied worries 64(64%) for the patient admitted in the hospital. Other reasons were unknown place 22(22%), No time 49(49%), Already under treatment 9(9%), no faith in services 4(4%), and lack of guidance 11(11%). More than one reason was given by the persons (Table 3).

Reasons	No. of person (%)	
Preoccupied worries	64(64.00)	
Place not known	22(22.00)	
No time	49(49.00)	
Under treatment in private hospital	9(9.00)	
Patient serious	25(25.00)	
No faith in services	4(4.00)	
Nobody to guide	11(11.00)	

Table 3: Various reasons for missed opportunities of health care services

DISCUSSION

In this study an attempt was made for establishing the relation between awareness and reasons for missed opportunities of health care services by the persons accompanying the patients.

It has been found that the 94.83 % of the male were aware of the health services provided in the hospital. It can be due to more exposure of men to outer world. Among the persons belonging to the age group of 30-45, 94.64% were aware. Awareness was also related to the literacy as 96.36 % among literates were aware of health services. Literacy directly affects the knowledge of persons attending the hospital as they can easily understand the facilities provided in the hospital and they can avail those facilities. Along with these factors those who had previous visits in the hospital 63.3 % of them were aware.

Regarding the under utilization of health services 96.82% among illiterates were not utilizing the services however 81.63% of literates were not utilizing it. Among those who had previous visits 83.93% were not utilizing the services and those who had not visited previously 96.36% were not utilizing the services. Some of the common reasons for non utilization of

services are preoccupied worries (64%), lack of time (49%), no faith in services (4%), and under treatment in some other hospital (9%).

CONCLUSION

It has been found that people who are accompanying the patients because of various reasons could not avail the health services for their own illness. Hence there is a need to increase the utilization of health services by imparting Health Education, providing services of Medico Social Workers at the OPDs, Improvement of services, active treatment, Low cost management and easy to reach facilities which in long term will help to achieve the goal of health for all.

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