



## TO STUDY THE HEALTH SEEKING BEHAVIOUR OF ELDERLY ATTENDING THE URBAN TRAINING HEALTH CENTRE OF NALANDA MEDICAL COLLEGE, PATNA

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### ABSTRACT

**BACKGROUND:** Ageing in human refers to multi-dimensional process of physical, psychological and social change in a person over time. It is inevitable, irreversible and progressive. There is decline in immunity as well as related physiological changes lead to an increase burden of diseases in elderly population. The objective of the study was to assess the health seeking behaviour of elderly and the various factors associated with it.

**METHODS:** 383 elderly people attending the Urban Training Health Centre were included in the study. A pre tested semi structured questionnaire was used to collect the data. Appropriate statistical tests were applied wherever applicable.

**RESULT:** Most of them 58.75% sought there treatment from government health facility. 94.51% received allopathic treatment. Financial issues was the most common reason for not seeking treatment.

**CONCLUSION:** Unique preventive health care strategies specific to the elderly need to be clearly formulated

**KEYWORDS :** Elderly, Health Seeking Behaviour, Healthcare

### INTRODUCTION

Ageing in human refers to multi-dimensional process of physical, psychological and social change in a person over time. It is inevitable, irreversible and progressive. According to United Nation, the people of 60 years and above are referred to as elderly population.<sup>[1]</sup> Worldwide 10% of the population is elderly & it is expected to increase to 21% in the year 2051. It is likely to increase from current 600 million to 1.97 billion in 2051.<sup>[2],[3]</sup> In India, although the percentage of aged person to the total population is low in comparison to the developed countries, the absolute size of the aged population is considerable. According to the absolute size of elderly population, India is the second largest country in the world.

According to **Population Census 2011** data, 8.6% of total population is elderly. Increasing age often brings increasing disability & frailty. The elderly frequently have multiple problems & multiple causes for each problem. Illness often presents atypically in older patients, frequently as a change in function. In the population over 70 years of age, more than 50% suffer from one or more chronic conditions.<sup>[4],[5]</sup>

Hence the care of the elderly is drawing more and more attention of the Government and public. We have observed that elder people fail to seek health care as they think that the ailments are a part of ageing process , which leads to the worsening of the existing problem. So this study was done to assess the health seeking behaviour of elderly and the various factors associated with it.

### MATERIAL AND METHODS

A hospital based cross-sectional study was conducted among 383 elderly people attending the Urban Training Health Centre attached to the Department of Community Medicine, Nalanda Medical College, situated at Rajendranagar, Patna.

### INCLUSION CRITERIA:

- Geriatric populations aged 60 years & above of both sexes were included in this study. Age was completed in completed years.

### EXCLUSION CRITERIA:

- Geriatric population who are seriously ill.
- Those who were not willing to participate in the interview

### DATA COLLECTION:

The data collection tool used for the study was an interview schedule that was developed at the Institute with the assistance from the faculty members and other experts. A Pre-designed pre-tested semi structured questionnaire was used . 20 to 25 minutes were taken to Interview each person. Accordingly 3 to 4 patients were interviewed per day by systematic consecutive sampling. Every 2nd patient was interviewed. Statistical analysis was done by SPSS version 16.

### RESULT

**Table-1: Health care seeking behaviour according to first place of contact**

PLACE OF HEALTH CARE	NO OF PARTICIPANTS
GOVT. HEALTH FACIITY	225(58.75%)
PRIVATE PRACTITIONER	88(22.97%)
QUACK	19(4.96%)
AYUSH	12(3.14%)
SELF MEDICATION	39(10.18%)
TOTAL	383(100%)

The above table shows that a very high percentage visited public health care as first place of contact for their various ailments. This was 58.75% of total study population. Only 22.97% of population went to private physician. Quack, AYUSH, self-medication were other places of contact for health care.

**Table -2: Type of treatment received**

Type of treatment	Number(%)
Traditional	5(1.31%)
Ayurvedic	5(1.31%)
Homeopathic	11(2.87%)
Allopathic	362(94.51%)
Total	383(100%)

**Table – 3: Average time gap between illness & care seeking**

Time interval	No(%)
Same day	92(24.02%)
1-3 days	272(71.01%)
>4 days	19(4.96%)
Total	383(100%)

Table 2 shows that 94.51% elderly believe on allopathic treat

ment and table-3 shows that majority of the study population received health care in the days 1-3 which were 71.01%.

**Table-4: Source of motivation for seeking health care**

Source of motivation	No(%)
Self	302(78.85%)
Family Member	72(18.79%)
Peer group	9(2.34%)
Others	0(0%)
Total	383(100%)

Table -4 shows that majority of the study population themselves sought health care at 78.85%. Family members were motivators in 18.79% of study population.

**Table -5 : Reason for not seeking treatment**

Reasons	Number	%
Financial issues	241	62.92
Far away	99	25.84
No one to accompany	33	8.61
Unsuitable timings	10	2.61

The most important reason being financial issue for 62.92% of study population. the next important reason . Other causes were unsuitable timings & no accompany persons.

## DISCUSSION

The present study showed that Government health facility was the most frequent first place of contact for health care among elderly. This was 58.75% of total study population. Only 22.97% of population went to private physician. 3.14% visited AYUSH, 4.96% Quacks & 10.18% used self-medication. In the present study majority of study population contacted health care in days 1-3; this was 71.01% of total study population. 24.02% of geriatric population consulted on the same day of ailment.

In a study conducted by Rajaratnam J<sup>[6]</sup> et al. in 1996 observed services rendered by private practitioners was utilized by 59% of the household & 79% of them had used allopathic treatment. Study conducted by Sudha G<sup>[7]</sup> et al in 2003 stated that Private health care facilities were the preferred place of contact for 48% of rural study subject, the reason being proximity to residence & perception of availability of better care. Symptomatic who did not avail health care attributed their inaction due to insufficient severity of symptoms (51%), unaffordability (46%) & lack of time due to work pressure (25%). Study conducted by Goel P K<sup>[8]</sup> et al showed that 46.3% of the elderly were unaware of any geriatric welfare services & 96% had never utilized any geriatric welfare services. It also showed that 59% of the subjects had to travel more than 3 kilometres for Government health facilities. Study conducted by Aldana J M<sup>[9]</sup> et al. in 2001 emphasized that the most powerful predictor for client satisfaction with Government services was provider behavior especially respect & politeness. Reduction of long waiting time was more important to the clients than prolongation of short consultation time.

## CONCLUSION

The younger generation should be encouraged to respect the elders and take responsibility for the welfare of elderly. Initiatives should also be taken by the Government; the tradition of joint family should be encouraged. . Capacity building of Health Care professionals is needed to address the Geriatric health problems.

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