



Review Article

Pattern of Health Seeking Behavior in Elderly Population

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ABSTRACT:

Individuals have different opinion regarding willingness to seek help from health care services. Some go readily for treatment, others only when in great pain and in advance state of ill health. Elderly people are more vulnerable group and have different factors influencing the health seeking behavior. The elderly people also have strong faith on the traditional healing systems. The review study yield information about health care seeking behavior of elderly people majority towards Modern medicine /Allopathy but still there are studies which found health care seeking behaviour elderly population significantly on traditional healing system. Apart from financial reasons the trend towards home remedies might be because of the traditional uses, cultural attachments and unavailability of nearest health centre. So there is definitely a need for establishment of provision of health care services of different systems for elderly population.

KEY WORDS: Health seeking behavior, Elderly Population, Traditional Medicine.

INTRODUCTION

Globally the proportion of older persons is growing at faster rate than the general population. It has increased from 7% in 1950 to 11% in 2007, by 2030 there would be about 70 million elderly; they would represent 20% of the total population¹. WHO, defined old as a person, above 60 years of age. It has been observed that globally approximately 12.3 percent of the total world population consists of the individuals of age 65 years and above.² Elderly people are at more risk of health problems. The health problems lead to significant increase in seeking health care since older persons usually require more health care in

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general and demand for more specialized services to deal with their more complex pathologies³. The severity of the disease among elderly is influenced by many factors and one important factor is health seeking behavior. Health seeking behavior refers to a decision or an action taken by an individual to maintain, attain, or regain good health and to prevent illness. This usually influences them choosing a public or private facility for health service. Few may go for allopathic medicines and others for traditional medicines, self-medication or home remedies⁴. Individuals have different opinion regarding willingness to seek help from health care services. Some go readily for treatment, others only when in great pain and in advance state of ill health. Thus this review was done with the objectives to find the factors affecting health seeking behavior in elderly Population. Related literature was reviewed thoroughly to gain in depth knowledge for the study.

MATERIALS & METHODS

Related literature was reviewed thoroughly to gain in depth knowledge for the study. Many electronic and non-electronic sources were used for searching relevant information for this study. Electronic search included PubMed, Google Scholar, Hinari, Google, visited different websites of journals like NepJol, NHRC, Journal of Community Med Public Health by using key words like elderly people, health Seeking behavior, and Boolean Operators (AND, OR, NOT or AND NOT) were used to combine the search items. Non-electronic sources like books, journals, dissertations, research report were used. Analysis of the finding and conclusion was drawn.

REVIEW OF LITERATURE

Several studies have described Healthcare seeking behavior within the context of various diseases and health systems. Health seeking behaviors were influenced by a variety of factors among elderly like socioeconomic conditions, age, social status of the person, gender, authority of the elderly within the family. A cross-sectional study was carried out in rural areas of Uttarakhand to assess the chronic morbidity amongst elderly population showed that 50.4% of geriatric age group people had history of at least one or the other chronic illness. Majority

of the chronic illnesses were related to musculoskeletal & cardiovascular system. Other Chronic illnesses included asthma, hypertension, diabetes; tuberculosis etc. 13.1% of morbidity cases had osteoarthritis with a comparatively higher percent in females that is 23.4% of females and 7.6% of males. Among these morbidities low back ache was the commonest complain which was present in 19.9% cases. It also concluded that 75.9% of the males reported at the Government hospital as compared to the females 32.9% .More number of females 52.2% undertook home management and other remedial measures as compared to males 7%. Home management and other remedial measures included the use of herbal decoctions and preparations¹. In another cross-sectional analytical study was conducted among 104 elderly aged people in Krishnapur-7, Bharatpur, Chitwan, Nepal to assess the health status and pattern of health seeking behavior. Assessment of the health status of elderly people revealed that, majority of the participant's 86.5% were suffering from chronic health problem, among them 37.8% suffered from hypertension 11.1% suffered from diabetic mellitus. Whereas, assessment of the practice of health seeking behavior among elderly stated that all the participant's 100% were seeking help for health problem in which 83.7% seek help from modern medication and still 16.3% seek help from alternative medication. Also, the health seeking behavior was found to be statistically significant with health problem, ethnicity and religion respectively. It also concluded that the elderly are aware of seeking help from the health care center, but still significant number of elderly believe in alternative medication⁵.

A cross-sectional study conducted at Varanasi district, Uttar Pradesh, India, among 402 elderly people showed that 85% were experiencing at least one health problem. The most frequent health problem was musculoskeletal problem 56%, followed by hypertension in 34.1%. Prevalence of cataract and diminished vision was 25.4% and 23.1%, respectively. Diabetes was prevalent in 6.7% of the population, while hearing problem was present in 6.5% of the study subjects. Of the 85% study subjects who were experiencing at least one health problem, majority of them preferred allopathic medicine 57.6%, followed by Ayurveda

medicines 10.2% and Homeopathic medicine 6.1% for their health problems, while 26% were not taking any medical help for their health problem. Most of the geriatric persons preferred going to a PHC /government hospital 61.9% for treatment of their illness, followed by use of drug from consulting drug stores 20.9% and private practitioners⁶. A cross-sectional descriptive study design employed to identify the determinants of health services utilization among the elderly in Calabar Municipality, Nigeria showed that a number of factors such as poverty 50.3% followed by nature of illness 25.2%, quality of service provided 10.8%, attitude of health caregivers 3.6%, waiting time 3%, availability of service 2.8%, distance 2.3% and level of education 2% influence healthcare seeking behavior among the elderly⁷.

A descriptive cross-sectional study conducted among 400 senior citizens resident of Dharan, Nepal shows that faith healers were the first treatment choice 97.2% irrespective of age, gender or ethnicity. After that they visited BPKIHS 36.3%, private practitioner 26.3%, self-treatment 11.3% and self-drug-use 6.8%. This study also reveals that only half of the respondents utilized formal health institutions only in major chronic conditions. Factors like poverty was as a major determinant of health seeking behavior and treatment was considered waste of money indirect effect 64% and lack of money 35.5% followed by poor attitude of health worker 41% are other factors related to the study⁸. Another study conducted among elderly in a rural area of eastern Uttar Pradesh of India found that only one-fourth 21.3% of elderly people preferred allopathic treatment, while those preferring self-medication, traditional methods, paraprofessionals were found to be 7.2%, 16.9% & 24.8% respectively⁹.

A study conducted in Fikkal and Pashupatinagar VDCs among 300 elderly people reveals that 18.7% of the populations were found to seek traditional healers and 81.3% among modern treatment system were relying on private treatment facility for treating sickness. People who had lived more than 20 years in that place and who felt modern health services were costly were likely to use service from traditional healers. The study also report-

ed that despite of modern health facilities available within walking distance, still some segment of people prefer to go to the traditional healers for almost all the health problems at first hand with firm belief that they cure it¹⁰. A community based cross-sectional study conducted in Kamrup Rural (Assam, India) in 2015 among 390 elderly showed that 72% elderly sought treatment for their chronic illness and 28.6% did not seek treatment for their chronic morbidity. Majority 51.5% sought treatment from government hospital, followed by private hospital 25.7%, pharmacy 22.1%. Also, 98.5% received allopathic treatment, 0.7% took traditional medicine, while 0.4% received Ayurveda and Homeopathic treatment. The most common factor found for not seeking treatment for their chronic illness was financial reasons 63.2%. Other factors like education, socio economic status and living status play an important role in health seeking behaviour¹¹. A community-based cross-sectional study was conducted in the urban slum areas of Jorhat district of Assam from August 2015 to January 2016 among 125 elderly people for assessing the morbidity pattern and health-seeking behavior of elderly in urban slums. The findings of the study showed that 78.4% had chronic morbidities during the study period. Arthritis 70.4% was found to be the most common morbidity followed by visual impairment 58% and acid peptic diseases 56%. More women 64% were suffering from arthritis than men. Among 98 elderly having some chronic morbidity, 83.7% sought health advice and treatment outside home. 51.8% preferred allopathic medicine for their illness, 37.8% used both allopathic and AYUSH medication for their problems, while 4.8% used medications bought from traditional healers. Health facilities used by elderly was found that 48.7% went to government health facility, 29.5% elderly practiced self-medication and 21.8% elderly went to private practitioners for treatment. The study also found that total 16 individuals out of 98 elderly who had any morbidity during the study period did not seek any health advice and treatment outside home due to lack of money was 81.2% and not feeling necessary to go to doctor as the conditions was 62.5%, the two most common reasons for not seeking outside help for their morbidity¹². Another community-based cross-sectional study

was conducted in the urban field of Maharashtra, India on assessing the health-seeking behavior of elderly individuals; cataract was the most common morbidity among both men and women. The next was musculoskeletal disorders (fibrositis, myositis, neuritis, gout, rheumatoid arthritis, osteoarthritis, spondylitis, etc.) among women and hypertension among men. Women had multiple illnesses more frequently than men .48% received allopathic treatment. This was followed by treatment from para-professionals 19.2%, self-medication 14%, traditional treatment 9.6% and no treatment 9.2%. This study found that about half the elderly people preferred allopathic treatment, while one-fifth chose self-medication. Thus, the average expenditure on health was more among those in the age group of 60–75 years, employed, educated and above the poverty line, irrespective of gender. Thus it concludes that the health seeking behaviour of the elderly was influenced by age, level of education and poverty¹³.

A cross sectional study was done in the month of March 2019 among 71 geriatric patients who attended the Health camp in Kirtipur Municipality, Nepal. The findings revealed that almost 92% of participants were aged 70 years and 85.9% were illiterate. Main source of income of the participants at present was old age allowance and children support (66.2%). All the participants were aware about the available health facilities nearby in their locality. Among all participants, two third reported they seek health consultation whenever they perceive its necessity while one third of them does not visit health facility for early consultation. The main challenges to visit health facility were reported as distance (15.5%), long waiting time (25.3%), and lack of escort (16.9%), lack of money (11.3 %) and consider disease as normal phenomenon of aging (22.5%)¹⁴. In a quantitative descriptive-cross sectional study conducted among 212 elderly people residing in Butwal sub-metropolitan city, Nepal from March to October 2015 reveals that majority (57.5%) of study population has belief on traditional healing system¹⁵. More than 4/5th (84.9%) of older adults rated “satisfactory” to their health condition. It also depicts that family income, chronic disease, elderly on medication and self-rated health status are found to be statistically signifi-

cant with seeking health behavior. In Nepal old age dependency ratio has been gradually increasing over the year, 11.2 to 14.3 % from 1991 to 2011¹⁶. With the increase in elderly population, the burden of chronic morbidity, disability, and mortality is also on the rise. When elderly people take care of their problems at appropriate time and approach the health system, the problems can be managed properly and there are lesser chances of complications or advanced diseases ¹⁷.

Since older people suffer from different chronic health problems, it is necessary to meet the health needs of the elderly. Proper understanding of the factors influencing the health-seeking behaviors of elderly is also very essential so that the emerging situation in our country can be properly addressed with strengthening of elderly health-care services and service delivery according to the needs with mitigation of the existing gap in health seeking behavior and availability of the health care facility.

DISCUSSION

Literature review has shown and made clear that that elderly people are the most vulnerable group in their healthcare-seeking behavior and are also suffering from a chronic illness. There are several factors affecting health seeking behavior among elderly people in various studies in different settings. Such factors are gender, educational status, economic status, family structure, family support, position in decision making, source of information, social security allowances, accessibility of health services, types of health facilities, distance of nearest health facility, ignorance of disease due to old age are found to be significantly associated with health seeking behavior among elderly people in some studies and not found significance in some studies. When elderly people take care of their problems at appropriate time and approach the health system, the problems can be managed properly and there are lesser chances of complications or advanced diseases¹⁷. In order to seek any health service, there must first be a need. An individual's perception of his or her health status is categorized as need factor. This is especially true for people with advance age who have to face many physiological and physical changes, along with other fac-

tors like socio economic status, educational status, family structure and support, living arrangement, dependency on family, position in decision making, travel affordability, knowledge of the services provided, distance of nearest health facility ,negative attitude of health workers towards the care of the elderly , registered under government scheme which act as a barrier to seek health services. The elderly people also have strong faith on the traditional healing systems. Apart from financial reasons the trend towards home remedies might be because of the traditional uses, cultural attachments and unavailability of nearest health centre. So there is definitely a need for establishment of provision of health care services for elderly population. The health care facilities inclusive of the different health systems including Ayurveda and Homeopathy should be established and strengthened to address the health seeking behavior of the people. In addition to this government should take up some program for social security of this population along with creating awareness about the same to use institutional health care including in alternative and traditional medicine sector. Additional, study may provide baseline data to community about factors affecting health seeking behavior of elderly people. The study provides basis for conducting research studies and also organizing awareness programs regarding health seeking behavior among elderly people and aims to improve our understanding of treatment-seeking behavior.

CONCLUSION

The review study yield information about health care seeking behavior of elderly people majority towards Modern medicine /Allopathy but still there are studies which found health care seeking behavior elderly population significantly on traditional healing system. Apart from modern medicine health seeking behavior is towards traditional healing systems, Ayurveda, Homeopathy, home remedies and others. Thus home remedy and traditional health systems should also be taken under health care seeking behavior studies and regulated for better health of the elderly population.

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