Health Care Seeking Behaviours among Students of University of Sri Jayewardenepura

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Abstract – Identifying common health care services used by the students and factors affecting health care seeking behaviours will be of benefit to improve the university health care system.

This study focused on describing the health care seeking behaviours among students of University of Sri Jayewardenepura and identifying the factors affecting their health care seeking behaviours.

This was a descriptive cross sectional study conducted among 384 student's undergraduates of University of Sri Jayewardenepura, Sri Lanka. Pre tested, self-administered questionnaire which included types of common health care seeking behaviours were used for data collection. Data was analysed using descriptive statistics including percentages.

The majority of participants were female (61.5%). The sample prevalence of health conditions for which treatment was obtained included - Physical condition (66.2%), Psychological conditions (16.4%), Social & relational conditions (15.4%). Majority (over 63%) of students of each faculty had used western medicine for their health conditions while second largest proportion (55.5%) of students seek treatment by self-medication (over the counter medication).The main factors considered by the students when obtaining treatment were about availability of facilities (52.4%), quality of medicines (57.8%), availability of expert doctors (59.5%), protection of their privacy (58.1%), how much disease may affect to studies (53.2%). Only some students had considered about cost of treatment (28.2%), and availability of transport facilities (25.3%). Beliefs, religious or cultural factors had affected their health care seeking behaviours minimally (about 3.0%).

Findings show that there are several kinds of health care seeking behaviours among university students. They are different from each other by treatment methods and places where treatment was obtained or how they are obtained help or treatment. Health care seeking behaviours of students are dependent on several factors related to their studies, economic background, cultural factors and their privacy.

Keywords: Health care seeking behaviours, University students, Sri Lanka.

I. INTRODUCTION

There are several kinds of health care providing systems in Sri Lanka. While Western medicine plays major role Ayurveda (both formally trained and informal - Sinhala medicine'), alternative therapies and religious healing rituals also plays an important role (Silva et al., 1994;).

Health care seeking behaviours are dependent on socio-economic background, educational level, type of disease, accessibility to health care, cultural and religious factors, gender, previous personal experiences and experiences of others about health care. Time and cost of treatment are also considerations. In brief it differs from person to person. But also decision or implementation of decision of seeking health care is not isolated. It is complex and dynamic. People do not seek one source of care, and differ in their behaviours according to who is affected and what diseases are experienced. Behaviour is also affected by beliefs and myths of causation behind certain diseases (Unicef-2009).

University students are a young population with lower rates of mortality, morbidity and use of medical treatments. Some of the major barriers to

accessing health services include concerns about confidentiality, embarrassment in health issues, absence of medical insurance or limited financial accessibility, lack of knowledge of existing services and lack of trust in health professionals. Young population trend to have risky behaviours such as drug and alcohol abuse, trauma, unsafe sexual behaviours, smoking, and mental health issues such as depression and suicidal thoughts and attempts (L. *La santé et al, 2006*)

When students are ill they have several kind of options to seek health care. University Medical center is the main health care provider of university students and provides only western medical treatments. When medical center is closed, student should have to take their health care from outside.

There are about 11000 undergraduate students at the University of Sri Jayewardenepura, and within that population their health care seeking behaviours can vary. There are students from different socio-economic backgrounds, different cultures, and different religious and from rural or urban areas.

Identifying common health care services used by the students and factors affecting health care seeking behaviours will be of benefit to improve the university health care system.

This study focused on describing the health care seeking behaviours among students of University of Sri Jayewardenepura and identifying the factors affecting their health care seeking behaviours.

II. METHODS

A descriptive cross sectional study was conducted among students of university of Sri Jayewardenepura. The study population were undergraduate students of the four Faculties of Humanities and Social Sciences, Applied Sciences, Management Studies and Commerce and Medical Sciences. The total sample size of 384 was obtained by using simple random sampling method.

Data was collected by using a pretested self-administered questionnaire. There were three parts in questionnaire -

Socio-demographic data, Common Health Care Seeking Behaviours (illness category and type of treatment method and where it was) and factors affecting Health Care Seeking Behaviors. These factors included - Health system factors (Availability of facilities, Quality of medicines, Availability of staff, and availability of expert doctors) Health status factors (Severity of the disease, Possibility to disclose the health problem to the healthcare provider, how much the disease or treatment methods will influence studies) economic and other factors.

Permission to conduct the research study was obtained from the Vice Chancellor of the University of Sri Jayewardenepura and Deans of the four Faculties after the ethical approval was obtained from the ethical review committee of the Faculty of Medical Sciences.

Written Informed consent was taken after explaining study by using information sheet and consent form. The questionnaire was administered to those who consented to participate, without any disturbance to the academic activities at a convenient time and venue in the faculties.

Privacy and the confidentiality of the participants were ensured during all stages of the study.

Data was analysed using descriptive statistics including percentages and SPSS software was used for the analysis.

III. RESULTS

A. Socio-demographic data.

Table -01: Distribution of Gender and income groups

		Percentage	Frequency
Gender	male	38.5%	148
	female	61.5%	236
Income	<10000	28.4%	109
Level	10000-	22.20/	00
	20000	23.2%	89
	>20000	48.4%	186

The majority of participants were female (61.5%). More than 48.4% of students were more than 20000rupees of monthly income of family.

B. Common Health Care Seeking Behaviours

Table -02: Frequencies of health conditions for which help or treatment was obtained

Health Condition	Percentage	Frequency
Physical condition	66.2%	258
Psychological condition	16.4%	63
Social & relational condition	15.4%	59
Sexual condition	0.5%	2
Drugs, alcohol and smoking issue	1.5%	4

Table -03: Frequency of treatment methods (as a percentage of sample population)

Treatment	Percentage %	Frequency
Method		
Western	75.6%	244
Ayurvedhic/ Local	19.7%	37
Homeopathy	4.1%	6
Self-	55.5%	132
medication(over the		
counter)		
Home preparation	44.2%	96
Spiritual method(Ex;	17.7%	31
Thovil, Bodhi pooja,		
eta)		
Other methods	5.9%	8

66.2% of undergraduates had reported that they had sought treatment for physical conditions, 0.5% for sexual conditions and 1.5% for drugs alcohol and smoking issues. When considering Prevalence of common treatment methods, 75.6% of students had use Western/Allopathic medicine, 55.5%Selfmedications, 44.2% of home preparation/home remedies and 19.7% of them had use Ayurvedi/local medicine.

Table-04: Frequency of where treatment is obtained (as a percentage of sample population)

Where treatment is obtained	Percentage %	Frequency
University medical center	71.9%	179
Government hospital	47.3%	95
Private dispensary	62.3%	157
МОН	6.8%	11
Government Ayurvedhic hospital or center	7.7%	12

Private Ayurvedhic	5.7%	9
hospital or center		
Government	1.3%	2
homeopathy center		
Private homeopathy	4.5%	7
center		
Ask help from	35.0%	62
friends, parents		
teachers or trusted		
person		
Take help from	13.9%	22
internet or books		
Others	6.0%	1

While 71.9 %of students of sample using university medical center, 62.3 % of them had obtained treatment from private dispensaries, 47.3 % of sample obtained treatment from government hospitals and 35.0 % of students had asked help from friends, parents teachers or trusted person.

C. Factors affecting Health Care Seeking Behaviours

Table -5: Health system factors.

Factors	Frequency
Availability of facilities	52.4
Quality of medicines	57.8
Availability of staff	32.9
Availability of expert doctors	59.5
Good personal experience in the	43.9
past about that health care	
system or provider	
Bad personal experience in the	38.2
past about another health care	
system or provider	
I heard good/ bad stories about	39.5
that health care system or	
provider	
I had doubts whether will they	58.1
protect my privacy	
Other reasons – please specify	42.5

Table -6: Health status factors

Factors	Frequency
Severity of the disease	76.9
Possibility to disclose the health	40.0
problem to the healthcare provider	
How much the disease will	53.2
influence my studies	
How much treatment methods will	42.7
influence my studies	
Others – please specify	6.6

Table -7: Economic and other physical factors.

Factors	Frequency
Cost	28.2
Transport facilities	25.3
Distance to the health setting	27.8
Day and the time	0.4
Others –Please specify	41.4

The main factors considered by the students who obtaining treatment were (more than 54.2%) about availability of facilities (52.4%), quality of medicines (57.8%), availability of expert doctors (59.5%), protection of their privacy (58.1%), how much disease may affect to studies (53.2%). Only some students had considered about cost of treatment (28.2%), and availability of transport facilities (25.3%). Beliefs, religious or cultural factors had affected their health care seeking behaviours minimally (about 3.0%).

IV .DISCUSSION

When considering the prevalence of health conditions of the students for which they had obtained treatment, 66.2% (n=258) were physical conditions, 16.4% (n=63) were psychological conditions, 15.4% (n=59) were Social and relational conditions, 0.5% (n=2) of them were sexual conditions and 1.5% (n=4) were drugs, alcohol and other issues. When compared with a study conducted in rural china similar findings were obtained with a majority of adolescent (more than 61%) had physical conditions and 1.5% of adolescent had psychological conditions. (Therese, et-al, 2003)

When compared with other studies done in Sri Lanka prevalence of treatment methods among students were different from other populations. When compared with findings of research study assessing the pattern of health care use in an elderly population in Sri Lanka (Fernando, et al, 1997) prevalence of treatment methods are high among university students. Majority of students (75.6 %,) obtained treatment from western allopathic medicine when compared to the use of western medicine in elderly population which was 37%.

When compared with the findings of research study on health and health care seeking behaviour of flat dwellers in Soysapura in Moratuwa (Ranasinghe, 2004), university students use of over the counter medications was less than the elderly population. 55.5% of students in the present study used self-medications/ over the counter medications but use of over the counter medication in elderly population was about 60%. 44.2% of students sought treatment through home preparations (home remedies), 19.7% were obtained treatment from ayurvedhic/ local medicine.

When comparing with a study on health seeking behaviour pattern in a rural population in Sri Lanka (Weerasinghe, 2005) majority of people in rural population (65.5%) had obtained treatment from government hospitals compared to 47.3% in the university population. Treatment obtained through private dispensary is higher in university population (62.3 %.) compared to usage of private western treatment in rural population of about 29.5%.

When considering of the place from where treatment was obtained for their health conditions, majority of students in the present study obtained treatment from university medical center (71.9%), Private dispensary 63.2%, government hospital (47.3%,). About 35% of students used informal health care seeking methods such as asked help from friends, parents, teachers or a trusted person. When informal health care seeking methods was compared with a study conducted among university students in Lebanon (El Kahi,et-al-2012), usage of informal methods was higher in the present study (13.9%) compared to the Usage of informal methods among university students in Lebanon of about 6.0%. When usage of formal health care seeking methods (Western allopathic treatments) was compared between the two studies, the percentage was higher in the present study (75.6%) when compared to the study of students in Lebanon (35.7%)

There are variations of health care seeking behaviour of students with their health condition, monthly income of family, faculty of their study and their myths & beliefs. Majority (53.7%) of physical, psychological and social & relational conditions were treated with western allopathic medicine, self-medication/over the counter medication and home remedies. When considering health care seeking behaviours with their income level, of the students with income level less than

10,000 rupees per month about 69% of had obtained treatment through University medical center, 44.9% through government hospitals and 43.6% had obtained treatment through private dispensaries. When considering students with income level more than 20,000 rupees per month, only 38% of them had obtained treatment through government hospitals while 76% of them obtained treatment through university medical center and 69.2% of students sought treatment by private medical centers.

Majority (more than 64.3%) of students from each of the four faculties had obtained treatment from University Medical Center. While 47.8% of students of faculty of humanities and social sciences obtained treatment from private dispensaries more than 60.8% of students of other three faculties (management, medical sciences, applied sciences) obtained treatment from private dispensaries.

Less than 1.5% of all the students in the study had reported that they had sexual problems and drugs, alcohol & smoking issues and of these students more than 50% had obtained some type of treatment such as Ayurvedic treatment (10%).

When considering factors affecting health care seeking behaviours, majority of students considered about availability of expert doctors (59.5%), protection of their privacy (58.1%), quality of medicines (57.8%), availability of facilities (52.4%), how much disease may affect to studies (53.2%). Only some students had considered about cost of treatment (28.2%), and availability of transport facilities (25.3%). Beliefs, religious or cultural factors had affected their health care seeking behaviours minimally (about 3.0%).

V. CONCLUSIONS

There are several kind of health care seeking behaviours among university students. They are different from each other by treatment methods and places where treatment was obtained or how they are obtained help or treatment. While majority of students obtained treatment by western allopathic medicine (75.6%), treatment by self-medication/ over the counter medication (55.5%) and treatment with home preparation/home remedies (44.2%) A lesser percentage of students sought ayurvedhic/ local

medicine treatment (19.7%) and treatment by spiritual methods. (17.7%).

Most of students sought treatment from university medical center (71.9%) and from private dispensaries (62.3%). A lesser percentage (13.9%) of students obtained help through informal methods such as information through books & Internet and also by asking friends, teachers & other relatives.

Before obtaining treatment for their health conditions majority of students (more than 52.4%) had considered about availability of facilities, quality of medicines, availability of expert doctors, protection of their privacy and how much disease may affect to studies. Some(less than 14.7%) students had considered about cost of treatment, availability of transport facilities. Beliefs, religious or cultural factors also been considered minimally (3.0%).

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