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## RESEARCH ARTICLE

## HEALTH SEEKING BEHAVIOR OF ELDERLY: A COMPARATIVE STUDY ON INDIAN CONTEXT.

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#### Abstract

Elderly represent a major and a huge part of the entire Indian population and is likely to be 60% by 2050. Many older adults have various health and medical conditions and their buying behavior for medical facility also varies through various geographic locations. This study was undertaken at the comparative dimension of elderly people between South India and Central India emphasizes on two states. Elderly aged 60 years and above were selected from Karnataka state of Southern India and Chhattisgarh state of Central India and a total of 114 respondents were considered. Primary data were collected by the administration of questionnaire and convenience sampling method was used. It was found that perception of heath seeking behavior varies on different parameters across both the geographic areas, and similarities found in the perception regarding the savings for health expenses. This study demonstrates the importance of consumer style for health—related behavior.

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#### Introduction:-

The health behaviors are a set of actions that the elderly perform to ensure that they eat and keep themselves well, protect, promote and maintain health Marton et al. (2013). Health seeking behavior or tendency is preceded by a decision making process which is also governed by individual or/and household behavior, expectations and community norms. Because of this reason, the nature of care seeking is varied on the basis of both cognitive and non-cognitive parameters that give rise to a contextual analysis of care seeking action. As per Gregoire (2001) the elderly consumers are found to be more prone to repurchasing known brands. Due to the aging baby boomers and the increase in the elderly population, the elderly consumer group will become increasingly important to the businesses, also brand loyalty is considered as one of their significant buying behavior. The older population is very much focused on the extent of satisfaction derived from a service or product obtained. Cognitive decline considers that the older consumer's memory restricts their consideration set for known or earlier owned brands since they are no longer able to evaluate all the complex options available in minute detail. Paulette et al. (2012) demonstrated that research in cognitive psychology revealed how cognitive capacities like working memory decline with age. Whatever the health seeking behavior is, the final goal is for an elder to be in good nutrition and health status. This study deals with the health seeking behavior of the older population in the two geographic regions.

#### Material and Methods:-

A total of 114 elderly aged 60 years and above were selected from the Chhattisgarh state of Central India state of Southern India and. A pilot study by 6 respondents was conducted to know and understand the suitability of the data collection instrument. Primary data had a major role in this study, which was collected through the administration of questionnaires in Durg district of Chhattisgarh state and Udupi district of Karnataka state and, convenience sampling method was used for this study. A questionnaire was prepared which consisted of both open ended and close ended questions. The questionnaire consisted of multiple choice questions in order to know and understand buying behavior broadly and questions on demographic profile. Through direct personal contact responses were collected at the hospitals at their convenience to the prospective respondents.

### Result and Discussion:-

From the demographic profile of the respondents it was found that the proportion of female respondents is 50% and male is 50%. The civil status of the respondents is as such , 91.82% of the respondents lived together were married and maybe their spouses are not alive at the current time. The respondents who never got married were 4.55% and of the total respondents were married and got separated were only 3.64%. 42.11% of the respondents have done their graduation, followed by 33.33% who were Matriculate, 18.42% of respondents have done basic schooling as their qualification and 6.14% of total respondents were post graduate.

It was attempted to identify the types of treatment systems that is followed by elderly patient. Allopathic systems, unsurprisingly, are the most popular in both the regions covered in the study, which can be understood from table 1. Figures in parenthesis indicate percentages.

Table 1:- Treatment followed.

		Treatment followed						
		Allopathic	Ayurvedic	Homeopathic	Others			
Location	South India	55	8	3	5	71		
	Central	35	3	4	1	43		
	India							
Total		90	11	7	6	114		

Source: Primary Survey

The table above demonstrate that allopathic treatment is preferred by (77%), Ayurveda treatment is preferred by (11%) of the respondents and 4% of the respondents prefer homeopathic treatment, (7%) of the respondents take other treatment from southern part of India, whereas (81%) of respondents go for Allopathic, around (7%) prefer Ayurveda and (9%) of respondents prefer homeopathic treatment from central part of India, hence overall preference for the treatment is allopathic treatment in both southern part as well as in central part of India.

An essential attribute of healthcare expenditure is that patients try to reduce out of pocket expenditure/expenses (OOP), by availing various managed care programs and also insurance packages. The study was intended to comprehend the gendered preference of health insurance.

**Table 2:-** Health insurance purchased by respondents.

Have you taken an health insurance			Gei	Total	
			Male	Female	
Yes	Location	South India	8	9	17
		Central India	14	14	28
	Total		22	23	45
No	Location	South India	23	31	54
		Central India	12	3	15
	Total		35	34	69
Total	Location	South India	31	40	71
		Central India	26	17	43
	Total		57	57	114

Source: Primary Survey

Table 2 demonstrates that in the southern region (40%) of the female respondents and (37%) of male respondents have taken health insurance from both the regions. Comparatively, in central India (61%) of female respondents and (63.3%) of male respondents have purchased health insurance, thus as showing concern about their health expenses in future.

An attempt was made to understand to what extent the elderly are adoptive toward the technology when it comes to health expenses, an individual can use total three modes of payment in India that is cash, card, and health insurance undertaken. Out of which payment via card was considered to be related to new technology, it was assessed that for health expenses, elderly people of which region are more adopted to the new technology. Elderly people are less likely to adopt new technology unless and until they see great benefits for themselves.

**Table 3:-** Mode of payment of health expenses in both the region.

Tuble of Flagment of neutral expenses in commune region.								
			Mode of payment					
		Cash	Card	Insurance				
Location	South India	55	7	8	70			
	Central India	24	2	18	44			
Total		79	9	26	114			

Source: Primary Survey

Table 3 shows that in the southern India mode of payment used for health expenditure by respondents is such that (78%) of the respondents use cash mode,(10%) uses the card and (11.4%) respondents use their health insurance schemes as a mode of payment source for their health expenditure. In central India (54%) respondents uses cash mode, (4%) of respondents uses the card and around (41%) uses their health insurance as payment mode for health expenditure. On comparing both the regions it is found that(77%) of the respondents who pays through card are from southern India and only(22%) are from central India, hence the respondents of southern India are more adopted towards the technology when compared to the central regions respondents.

For elderly a significant factor for health seeking behavior is their information seeking behavior at different level of criticality of sickness, the source from which elderly gets information also plays an important role. Different types of major sources are available for getting information about the hospital. Television as a source of information, newspaper, medical camps, and word of mouth as a source of information, are some of these, an attempt was made to understand which source of information plays an important role at which level of criticality in both the geographic regions.

**Table 4:-** The source of information used to prefer hospital &level at which medical facility is taken.

At which level medical facility is taken		The source of information about your hospital					
			Newspaper/Magazine	Television	Medical	Word	
					camps	of	
						Mouth	
Primary	Location	South India	7	4	3	50	64
		Central	5	4	0	21	30
		India					
	Total		12	8	3	71	94
Secondary	Location	South India	1		1	3	5
		Central	5		0	5	10
		India					
	Total		6		1	8	15
Tertiary	Location	South India	0			2	2
		Central	3			0	3
		India					
	Total		3			2	5
Total	Location	South India	8	4	4	55	71
		Central	13	4	0	26	43
		India					
	Total		21	8	4	81	114

Source: Primary Survey

According to tables 4, from southern India, (68%) of respondents visit hospital for primary treatment and from the central India (31%) of respondents. For secondary treatment (33%) respondents visit hospital form southern part and from the central part of India(66%) respondents .(40%) of respondents visit hospital for tertiary care from southern India and (60%) respondents from Central India. In south India, (67%) of respondents gets information about their hospital from word of mouth, from southern India and for (32%) of respondents from central India. Word of mouth plays an important role as the source of information about hospital preferred by the respondents. Newspaper/magazine acts as major source of information in southern India is for (38%) of respondents and for (61%) of respondents from central India, television as a source of information from both southern and central India is (50%), medical camps is not considered as a source of information for the hospital preferred in central India

It was found that the response related to cognition part of the respondents was similar in both the regions, in the southern region more adopting responses found with respect to component related to affect that is respondents from southern India adopted technology to a greater extent as compared to respondents from central India.

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