

CHOICE OF HEALTH CARE SERVICES OF WOMEN CONSTRUCTION WORKERS IN COIMBATORE CITY

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Abstract

People constitute the valuable human resources needed for the development of any country. It is needless to say that the development of the national economy results on the health ability and well being of the people. The promotion and protection of health of the people is essential for sustained economic and social development. In assessing a country's resources for economic development the health of the people should be reckoned with. Basically, the health of the women in India as anywhere else dependent in their social status, capacity to meet their basic needs, their working and living conditions and the health of their family and community.

Introduction

With this background, the present study attempts to focus on choice of health care services by social and economic background. The specific objectives of the study are:

- 1) To understand the choices and preferences of the sample workers.
- 2) To analyses the reasons for choices of hospital of the sample workers.
- 3) To know the quality of treatment in the private and public hospital.

Methodology

The present study is based on primary data. The data was colleted 525 women construction workers from Coimbatore city using a well -structured interview schedule. The data was collected during the period of March 2009-May 2009.The samples of the study were selected by adopting purposive sampling.

Finding of the Study

Choice of hospital by age, social group and type of family

In the event of illness, a majority of the individuals try to take some kind of treatment. In the context of availability of different systems of medicine and agencies delivering health services, the choice of provider of health care depends upon access to the service provider, economic status of the individuals, and house hold among others.

Table 1 Choice of Hospital by Age, Social Group, Type of Family

Classification		Number of Person Choosing			Total
		Govt.	Pvt.	Self Treatment	
Age	Below 15	2 (33.3)	4 (66.7)	-	6 (100)
	16 - 25	53 (34.9)	97 (63.8)	2 (1.3)	152(100)
	26 - 35	87 (45.8)	99 (52.1)	4 (2.1)	190 (100)
	36 - 45	32 (37.2)	48 (55.8)	6 (6.9)	86 (100)
	Above 45	1 (100)	-	-	1 (100)
Social Group	BC	10 (43.5)	13 (56.5)	-	23 (100)
	MBC	13 (8.8)	132 (89.2)	3 (2.0)	148 (100)
	SC/ST	152 (57.6)	103 (39)	9 (3.4)	264 (100)
Type of Family	Nuclear	149 (43.2)	192 (55.7)	4 (1.1)	345 (100)
	Joint	26 (28.9)	56 (62.2)	8 (8.9)	90 (100)
Total		175 (40.2)	248 (57)	12 (2.8)	435 (100)

Figures in parentheses indicate percentage to total

The analysis reveals that majority of all age groups have chosen private hospital than government hospitals. It is found that majority of Backward Community and Most Backward Community had chosen private hospitals and majority SC/ST had chosen government hospitals for health care services. With regard to type of family majority of (55.7 per cent) of nuclear family and majority (62.2 per cent) of joint families had chosen private hospitals for health care services.

Choice of Hospitals by Education, Income

Table 2 Choice of Hospitals by Education, Income of the Respondents

Classification		Number of Person Choosing			Total
		Govt.	Pvt.	Self Treatment	
Education	Illiterate	165 (44.3)	198 (53.5)	7 (1.8)	370 (100)
	Primary	8 (16.6)	38 (79.2)	2 (4.1)	48 (100)
	Secondary	2 (11.8)	12 (70.5)	3 (17.6)	17 (100)
Income	Low Income	160 (88.8)	15 (8.3)	5 (2.7)	180 (100)
	Middle Income	15 (6.7)	200 (90.1)	7 (3.1)	222 (100)
	High Income	-	33 (100)	-	33 (100)
Total		175 (40.2)	248 (57)	12 (2.8)	435 (100)

Figures in parentheses indicate percentage to total

The analysis shows that no consistent relationship between education and choice of health care services. In general, as education level increases, use of private care also

increases. Among the income group, majority of low income groups had chosen government hospitals, majority of middle income group and entire high income groups preferred private hospitals for health care services. Another notable feature is that none of them from high income group had chosen government hospitals for health care services.

To test whether there is relationship between income and choice of health care services, chi-square test has been applied. Since the estimated value was statistically significant, it would be concluded that there is a strong relationship between income and choice of health care services.

Reasons for Choice of Hospital

Table 3 Reasons for Choosing the Hospitals

Reasons	Respondents	Percentage
Affordability	141	26.9
Distance	201	38.3
Timely attention	43	8.1
Quality	117	22.3
System of medicine	9	1.7
Facility is well known	8	1.5
Elders decision	4	0.8
Others (specify)	2	0.4
Total	525	100

It is found that distance, affordability and quality are major reasons (38.3 per cent, 26.9 per cent and 23.3 per cent) for choosing the hospitals for health care services.

Quality of Treatment In Private Hospital

Table 4 Quality of Treatment in Private Hospitals

Treatment in private hospital	Respondents	Percentage
Excellent	125	23.8
Good	306	58.3
Average	49	9.3
Poor	25	4.8
Very Poor	15	2.8
No idea	5	1.0
Total	525	100

It is found that more than half per cent i.e. (58.3 per cent) had reported that quality of treatment in private hospitals was good.

Quality of Treatment in Public Hospital

Table 5 Quality of Treatment in Public Hospitals

Treatment in Public hospital	Respondents	Percentage
Excellent	24	4.6
Good	30	5.7
Average	110	20.9
Poor	286	54.5
Very Poor	43	8.2
No idea	32	6.1
Total	525	100

It is found that majority (54.5 per cent) of the workers had stated that the quality of treatment in public hospitals was poor.

Conclusion

In a country like India, the problem of health is an enormous one where the majority of poor is outside the effective medical network. The government hospitals have failed to equip poor to become customers in basic medical services nor have they provided them free effective medical services. In the Indian environment, where majority of the government hospitals are found in a deplorable condition, it is need of the hour that charitable trusts, voluntary agencies, private hospitals and corporate sector come ahead and carry forward the task of making available to the society the best possible health services.

Suggestion And Recommendation

- Only less percentage of workers (29.5 per cent) stated health status is good, remaining majority 42 percentage of the workers stated that their health status was poor. So Government may appoint a separate cell to look after execute and safeguard the provision of better health facilities.
- Nearly 40.2 per cent had chosen public hospitals and about 67 per cent of the workers had stated that the quality of treatment in public hospitals was poor. So Government hospitals should ensure the quality of treatment and develop confidence about the health care services among the people.

References

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