

CHAPTER V

CONCLUTION AND RECOMMENDATION

5.1 Conclusion:

1. From past experience Sri Lanka had showed good performance providing good health care service. It shows increased life expectancy, reduced infant mortality rate and reduced maternal mortality rate. But from the past in Sri Lanka provide health service free of charge to the patients at the point of the delivery.

Present time Sri Lanka faces new problem that epidemiological transition and replacement of common communicable disease pattern to noncommunical disease pattern. Nonommunicable diseases like Bronchial asthma, Ischemic heart disease, Diabetes, need life long treatment once they diagnosed. Therefore day by day more patients accumulate to the clinics that treat for noncommunicable diseases. Those increased number of patients gives more burden to the government to provide free health care. Increasing in health care cost create new problems in Sri Lanka. Because of budget constraint results, drug shortage, difficulty in maintaining exciting facilities and difficulty in updating exciting system.

As a solution for these problem Sri Lankan government need to come out with new policy to reduce budget constraint. In Sri Lanka, health insurance system is practiced by very few people. Most of people rely on government health facilities. Therefor as a solution Sri Lankan government need to come up with new paying system for health care.

As mentioned before Sri Lankan health care is given to patient free of charge. But this study is tried to identify that patients need to bare some portion of medical cost that they received even they received it free of charge.

Monaragala District is selected for this study, because their main health care provider is public health institutions, private facility intervention is very low, all patients can access to selected health care facilities as their choice and the parameters of the population are same as other districts. Total amount of 408 patients were interviewed to get information about how their utilization of health care services depends on age, gender, medical expenditure spent by patient, distance from home to health facility, patients perception about health facility, monthly household income, household size, number of dependents in family and religion.

2. From this study reveal that patients with different socio-economic characteristics utilize health care facilities. Utilization of health care services increases with patient's age and they more prone to get health problems with increase age. Patient's medical expenditure is the other main component which is effect to their utilization of health care facility. According to this study results, patients reduce to utilize their health facility with increase cost. To bare with this cost study results found that patients with higher monthly household income more frequently utilize health care facilities than poor patients. Why this poor people reduce their utilization are just they didn't have any way to finance for their medical needs.

3. Patient's utilization of health care services also depends on distance from patients home to health care facility. As study results shows that when the distance increases utilization of health care service is to be reduce. Patients perception about healthcare facility is other factor affect for their utilization of health services. When patient's perception about health care facility is higher they more utilize health facility than patients with lower perception.

4. Number of members in family has negative effect on utilization of health care facility; in other word when number households increase they reduce utilization of healthcare services. Number of dependents in the family also has negative effect on utilization of health care services. Families with dependents are reducing their utilization of health care services as number of dependents increases.

5. Religion also proved to be effect on patient's health care utilization, that Buddhist and Sinhala patients are more likely to utilize health care facilities than patients with other religion and ethnicity. 6. Patients come to the D.G.H.monaragala, their expenditure and portion from income that spent for health care is more than patients come to B.H.Siyambalanduwa and D.H.Dambagalla. I.H.D. patients spend higher amount and higher portion from their household income than patients with B.A. and V.F.

7. From patients expenditure for their health care larger portion they spend to take drugs from outside for specific disease, travel and investigation done outside for specific disease. This is evidence for lack of drugs at public hospital pharmacy and lack of services at hospital laboratory services. May be because of these reasons many patients had got treatment from else where before they attend to public hospital. The main two methods they got treatment were taken drugs from drug store and got treatment from private practitioner.

8. As mentioned above patients perception depends on their utilization of health care services. Patients with higher perception about health care facility their main concern about doctor's attention, environment of the hospital and time spend to get treatment. Patients' perception is lower for pharmacy section and services done by staff other than doctor. Patient's perception about healthcare facility varies with income level. Patients with higher level of income has higher level of perception and it decline with reduction of income. Most patients choose their health care facility because of several reasons. Some of them are, large hospital, they provide better services than others, availability of services more then other facilities, facilities close to their home and can't afford to other hospitals because of cost.

9. Patients are mainly financing their medical cost from monthly income and from household saving. But some patients, mainly poor patients finance their medical cost by selling assets and borrowing money.

5.2 Recommendations:

5.2.1 Recommendation For Supply Side Mechanism:

5.2.1.1 For Short Run:

1. Accessibility of outpatients of the public facility is a crucial factor for health facility utilization. In practice the distance and transportation is main concern. It is crucial for government to make arrangement for proper transportation or make health care facility available close to patients home.

2. Affordability of outpatients of the public facility also main concern for health care facility utilization. In practice, it is indeed not free of charge and patients have to bare some amount of cost for their medical care. It has indicated that government has to make precautionary measures to bring down cost that spend by patients, at least to the lover income groups of the society to ascertain that they receive at least the essential clinical care from the public health facilities.

3. High level health care facilities are over crowded by patients who by passing other institutions. Main reason for that is unavailability of some of health services. Adequate facilities available in lower level health care facilities could correct this problem. Then it can be further supported by establishing an appropriate referral system. This survey shows that public hospital need to improve their pharmacy section and laboratory section. To establish it need to take measure at least essential drugs available in pharmacy section for OPD patients. To improve laboratory services need to upgrade laboratories to function for at least basic investigations for OPD patients especially at lower levels of health care services.

5.2.1.2 For Long Run:

1. Quality of service is main factor for utilization of health care services. There for need to make standard guideline to maintain quality of services at health care facilities and need to maintain that quality service. To maintain quality of service need to develop proper monitoring system for all health care service providers.

2. From the perception about health care facility had lower perception about services received from hospital staff other than doctor. To correct this point need to arrange special training programs for health workers. The training program should be focused on development of correct attitudes to respect the dignity of the patient.

5.2.2 Recommendation For Demand Side Mechanism:

5.2.2.1 For Short Run:

1. To face existing problems like budget constraints government need to come up with new paying method for patient's medical care. But government policy makers need to consider that patients pay for their medical care in existing system as this survey shows. There for it is better not to introduce user fee and better off with health insurance scheme.

5.2.2.2 For Long Run:

1. Improvement of services only not enough to make patients to attend public health facilities. Other measures need to conduct to change patients behavior when they ill. It will help to reduce the crowd that bypassing other government health facilities. This can be achieving conducting health educational programs at village levels. The administration levels of lower level of public hospitals can arrange these propaganda campaigns, first need to target patients in OPD and then households. Place like OPD clinics are important place to conduct these campaigns and need to explain about

health care and what the facilities available are. This can motivate patients to seek health care at nearest public health facility.

5.3 Limitations of this Study:

1. This study is done to evaluate utilization pattern of patients who come to the public health care facility for OPD treatments. This study not concerned about utilization pattern of people before they sick. Also selected study locations are public health care facility which is medical care given free of charge, not involving private sector.

The factors identified to affect for patients utilization of health care facility for this study is limited. There are more factors need to identify to affect utilization of health care facilities.

3. Limited time and budget constrain is a main reason to limit this study. Because of those limitations this studies done at the level of OPD. But it can be used to get more result if study done the level of household level instead of OPD level.

5.4 Suggestions For Further Study

1. Need to increase sample size for diseases in each facility to get optimum results from study.

2. This study focused only to pubic health care facilities. In future need to study patient's choice of health care provider including private providers too.