

UTILIZATION OF MALARIA DIAGNOSIS AND TREATMENT SERVICES
A CASE STUDY OF MALARIA CONTROL IN
RATCHABURI PROVINCE, THAILAND

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The main aim of this study is to identify the level and patterns of utilization of malaria diagnosis and treatment services in a defined community in Ratchaburi Province, Thailand, and the factors that influence the utilization of those services. The utilization rate was 80.3% in terms of the frequency of use by the respondents. Among them 55.4% of utilization occurred at malaria clinic, 16.1% at village malaria volunteer and 8.8% at the health center levels. The alternative facilities were drug store (self-medication), private service of health assistant, and others (hospital) and the levels of utilization were 17.5%, 0.7% and 1.5% respectively. It has been shown that there were six factors which influenced the utilization of those malaria services. They were gender, perceived quality of care, frequency of malaria attack, costs incurred by patients, household consumption and household income in descending order according to their coefficient values.

Malaria diagnosis and treatment services in Thailand have been provided to all patients by Malaria Division, MOPH free of charge. But some costs are incurred by patients, namely, travel, time and food costs. This study estimated these costs and the average total cost to seek care at those services was 52.6 Bahts. The average time cost was the largest component of it and the amount was 27.15 Bahts. The second largest amount was made by travelling cost and the last one was food cost. The average costs of them were 12.76 Bahts and 4.18 Bahts respectively. The average total cost incurred by patients to seek care at the alternative facilities was 281.4 Bahts which was five times greater than the cost incurred by patients at formal malaria services.

In the future, Malaria Division could encounter a shortage of financial support due to reduced allocation of budgets because of declining morbidity and mortality of malaria and superimposed emergence of high priority diseases such as AIDS. At that time information about willingness to pay (WTP) by the community may become important to access the feasibility for introduction of a user fees system. This study explored WTP by the study population for those services and factors influencing the amount of WTP. The average WTP for malaria diagnosis and treatment services was 55.97 Bahts, a figure which was influenced by 8 variables.

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