

A Study On The Health Seeking Behavior Among Caregivers Of Under-Five Children In A Rural Area Of West Bengal

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Abstract

Background- Children are most vulnerable and dependent groups on others in the society other than geriatric person. So appropriate healthcare seeking behavior of their caregivers are very much important to reduce morbidity & mortality and improve healthy life.

Materials & Methods- This was a cross-sectional study was conducted at rural area of West Bengal among 180 caregivers of under 5 yr children with the help of predesigned pretested semistructured schedule. Study subject selected by systematic random sampling and data compilation were done MS Office Excel-2010 and data analysis were done by chi sq test in IBM SPSS version 2019

Results: Among 180 caregivers majority were 20-30yrs age gr(65%), joint family(64.4%), OBC(39.4%), Hindu(86.1%), Literate(71.1%), Homemaker(82.8%), having health insurance(76.1%), lower middle socio economic class(45%). Among children majority were 3-5yrs age gr(47.8%), female(50.6%), vaccinated not at par age (60.6%), second or more order child(59.4%). 20.6% caregivers had in appropriate healthcare seeking behavior for their children. Appropriate health seeking behavior among caregivers significantly associated with ≤ 30 yrs ($\chi^2=20.33, df=1, p=.000007$), nuclear family ($\chi^2=4.74, df=1, p=.029$), literate ($\chi^2=71.72, df=1, p<.000001$), homemaker ($\chi^2=28.19, df=1, p=.0000012$), upper middle & upper lower SES ($\chi^2=4.44, df=1, p=.035$), having insurance ($\chi^2=34.91, df=1, p<.000001$) but not significantly associate with religion ($\chi^2=1.58, df=1, p=.2$) & gender of children ($\chi^2=.0058, df=1, p=.939$). The majority of caregivers for children (71.7%) were depending generally on Govt health facility and a sizeable portion of caregivers(42.2%) collected medicine over the counter without consultation of medical professional and 35% caregivers generally approached AYUSH system of medicine.

Conclusion- From this study it was concluded that appropriate health care seeking behavior among caregivers are significantly influenced by with ≤ 30 yrs age gr, joint family, occupation, education, socio economic scale, health insurance. In rural bengal primarily dependent on Govt health facility and a sizeable population still collected medicine over the counter with consultation of medical supervision.

Keywords: Health care seeking behavior, Caregivers, Under 5 children, Rural area,

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I. Introduction-

Healthcare seeking behaviour is defined as, "any action or inaction undertaken by individuals who perceive themselves to have a health problem or to be ill for the purpose of finding an appropriate remedy" [1][2]. **Children are most vulnerable and dependent groups on others in the society other than geriatric person. Proper and timely intervention are required to reduce morbidity and mortality of children. So health care** seeking behavior is an important factor of health outcome and impacts the mortality and morbidity pattern of a community.[3] Health care seeking behavior is influenced by a number determinants such as age, gender, ease of access to health care services, socio-economic status etc.[4]. As per WHO, appropriate healthcare seeking behavior could reduce child mortality and morbidity by 20 per cent.[5,6] In rural areas people have poor health-seeking behavior due to their illiteracy, lower socioeconomic status, prevailing malnutrition, poor immunization status, poor sanitation, personal and cultural practices, beliefs, and attitude

toward healthcare providers. In these context , in the present study try to assess the health care seeking behaviors among caregivers of under five children during their illness and factors associated with their health seeking behavior.

II. Materials & Methods-

The present study was observational descriptive study cross sectional design conducted at Madhyakhalia village under Jagadishpur (Bally –Jagacha)Block , Rural Field Practice Area of , Community Medicine department , Calcutta National Medical College , Kolkata from June2024 to August 2024 among caregivers who were predominantly mothers , of under five children. The sample size was calculated on the basis of 71% of children with childhood illness were taken to a health facility according to a previous study at Pune of India[7]. The sample size was 180(taking $4pq/d^2$ where $p=.71, q=1-p=.29, d=10\%$ relative precision=.071 and 10% taking nonresponse). Systemic random sampling technique was used to identify the study participants. A line listing of 800 families with under-five children was done from Family folders of Rural Field Practice Area of Community Medicine Department ,CNMC . One family was selected randomly from first 4 families who were satisfying inclusion & exclusion criteria. Then every 4th family was selected from the list who satisfying inclusion & exclusion criteria until the desired sample size achieved. Next family was taken when any selected family did not satisfy the criteria. If in a family there were more than one under-five children, the caregiver of the younger child was interviewed.Caregivers were excluded who did not participate in the study and whose child severely ill at that time or absent during data collection process. After getting permission from appropriate authority ie Institutional Ethics Committee , Community Medicine Departments and informed consent from study subjects the data were collected by predesigned pretested semi-structured schedule with two parts. The first part had details of the socio-demographic variables; the second part had questions related to the child's immunization status and the health seeking behaviour during acute childhood illness considering a recall period of 6 months. The choice of healthcare professionals of the caregivers' during any acute childhood illness, was assessed. The data were compiled in MS Office excel and data analysis were done in IBM SPSS 2019.Distribution part of data presented with frequency &% and analytical part were done by chi sq test ,p value taking consideration with 95%significant level.

Appropriate healthseeking behavior as when a primary caregiver approached either Private and Government healthcare centres within 24 hours of the onset of their children's illnesses[8] and for assessing socio economical scale Modified BG Prasad Scale 2024 was used[9].

III. Results

1.Socio Demographic Characteristic of the caregivers (n=180)

| Socio Demographic Profile | | Frequency(%) |
|------------------------------------|-------------------|--------------|
| Age(yrs) | <20 | 12(6.7) |
| | 20-30 | 117(65) |
| | >30 | 51(28.3) |
| Family type | Nuclear | 64(35.6) |
| | Joint | 116(64.4) |
| Caste | ST | 23(12.8) |
| | SC | 47(26.1) |
| | OBC | 71(39.4) |
| | General | 39(21.7) |
| Religion | Hinduism | 155(86.1) |
| | Muslim | 25(13.9) |
| Education | Illiterate | 52(28.9) |
| | Primary | 64(35.6) |
| | Middle School | 51(28.3) |
| | Secondary & Above | 13(7.2) |
| Occupation | Homemaker | 131(82.8) |
| | Unskilled | 49(27.2) |
| SES (Modified BG Prasad Scale2024) | Upper Middle | 14(7.8) |
| | Upper Lower | 49(27.2) |
| | Lower Middle | 81(45) |
| | Lower | 36(20) |

From Table 1 it was found that majority of care givers' age were between 20-30yrs(65%),majority of care givers belonged to joint family(64.4%),majority were Hindu(86.1%) & were OBC(39.4%). 28.9% care givers were illiterate and 82.8% were home maker and 45% were belonged to lower middle class as per Modified BG Prasad scale 2024.

Table2: Distribution of children according to different characters (n=180)

| Variables | Frequency(%) |
|-----------|--------------|
|-----------|--------------|

| | | |
|----------------------------------------|-------------------------|-----------|
| Age gr of children | ≤1 | 23(12.8) |
| | >1-3 | 71(39.4) |
| | 3-5 | 86(47.8) |
| Gender of Child | Female | 91(50.6) |
| | Male | 89(49.4) |
| Birth order of Child | 1 st baby | 73(40.6) |
| | 2 nd or more | 107(59.4) |
| Vaccination status of child | At par age | 71(39.4) |
| | Not at par age | 109(60.6) |
| Health insurance | Present | 137(76.1) |
| | Absent | 43(23.9) |
| Generally approached health facility | Govt | 129(71.7) |
| | Private | 41(22.8) |
| Over the counter drugs | Yes | 76(42.2) |
| | No | 104(57.8) |
| Seeking Medical Help | ≤4hrs | 47(26.1) |
| | 5-24hrs | 96(53.3) |
| | >24 hrs | 37(20.6) |
| Generally seeking type of medical help | Modern Medicine | 117(65) |
| | AYUSH | 63(35) |

Table 2 shown majority children were from 3to 5yrs of age, 50.6% were female, 59.4% were 2nd order more child and 60.6% children having vaccination status not at par their age.76.1% family has health insurance coverage mainly under govt health insurance. 71.7% caregivers generally approached to govt health facilities for their children’s medical care and 42.2% caregivers collected medicine over the counter with out medical consultation.18.3% caregivers were seeking medical help for their children after 24 hrsie their health seeking behavior not appropriate. Around 35% caregivers were preferred AYUSH for their children’s treatment.

Table3 Association of Study subjects health care seeking behavior with different factors(n-180)

| Different factors | | Appropriate Health care seeking behavior | Inappropriate Health care seeking behavior | Chi sq df p value |
|-----------------------|------------------------------|------------------------------------------|--------------------------------------------|-------------------------------------------------------|
| Age of study subjects | ≤30yrs | 114(88.4) | 15(11.6) | 2=20.33 df=1 p=.000007 |
| | >30yrs | 29(56.9) | 22(43.1) | |
| Family Type | Joint | 86(74.1) | 30(25.9) | 2=4.74 df=1 p=.029 |
| | Nuclear | 57(89) | 7(11) | |
| Caste | General | 36(92.3) | 3(7.7) | 2=4.08 df=1 p=.043 |
| | Other than general | 107(75.9) | 34(24.1) | |
| Education | Illiterate | 20(38.5) | 32(61.5) | 2=71.72 df=1 p=<.000001 |
| | literate | 123(96.1) | 5(3.9) | |
| Religion | Hinduism | 126(81.3) | 29(28.7) | 2=1.58 df=1 p=.2 |
| | Muslim | 17(68) | 8(32) | |
| Occupation | Homemaker | 115(87.8) | 16(12.2) | 2=28.19 df=1 p=.000012 |
| | unskilled | 18(46.2) | 21(53.8) | |
| SES | Lower and lower middle | 87(87.2) | 30(12.8) | 2=4.44 df=1 p=.035 |
| | Upper lower and upper middle | 56(65.1) | 7(34.9) | |
| Gender of Child | Female | 73(80.2) | 18(19.8) | 2=.0058 df=1 p=.939 |
| | Male | 70(78.7) | 19(21.3) | |
| Birth order | 1 st order | 68(93.2) | 5(6.8) | 2=12.75 df=1 p=.00035 |
| | 2 nd or more | 75(70.1) | 32(29.9) | |
| Health insurance | present | 123(89.8) | 14(10.2) | 2=34.91 df=1 p=<.00001 |
| | Absent | 20(46.5) | 23(53.5) | |

Table 3 shown health care seeking behavior were significantly associated with age of caregivers, caste,education ,occupation, birth order of child,socio-economic scale of the family and health insurance but not with religion& gender of child. Caregivers of above 30yrs have more inappropriate health seeking behavior for their children than ≤ 30yrs age group(2=20.33 ,df=1,p=.000007)and it is statistically significant. General category caregivers have more appropriate health care seeking behavior than other caste(2=4.08

,df=1,p=.043).Literate caregivers have more appropriate healthcare seeking behavior than illiterate one ($\chi^2=71.72,df=1,p<.000001$) and this is statistically significant. Caregivers who are Homemakers have more appropriate health care seeking behavior than unskilled one ($\chi^2=28.19,df=1,p=.0000012$) and this is statistically significant. Caregivers having single baby have more appropriate health care seeking behavior than who have more than one child ($\chi^2=12.75,df=1,p=.00035$) and this is statistically significant. caregivers whose family have health insurance coverage have better appropriate health care seeking behavior than who have not the same ie health insurance($\chi^2=34.91,df=1,p<.00001$). Caregivers who are from Upper lower and upper middleclass group have more appropriate health care seeking behavior for their children than lower class ($\chi^2=4.44,df=1,p=.035$) and this difference is statistically significant.

IV. Discussions-

The present study about health care seeking behavior of caregivers for their under 5yr children was conducted at rural area of west Bengal. From this study it was seen majority of care givers were belonged to age group of 20-30 yrs of age(65%) .These may be due to the study was conducted at rural area where early age of marriage is predominant and also for joint family. From this study it was also found that Health care seeking behavior was more inappropriate among above 30yrs of age caregivers regarding their children than ≤ 30 yrs caregivers and this is statistically significant($\chi^2=20.33,df=1, p=.000007$). It might be due more reluctant behavior or more responsibilities in other works in the family.

From this study it was seen majority of study subjects (64.4%) were from joint family and this finding was similar to another study(76.4%) done at Gujarat by Yerpude PN etal[8] . In this study it was seen appropriate health care seeking behavior were significantly more associated with caregivers from nuclear family($\chi^2=4.74,df=1,p=.029$) but it was not seen in the study of Yerpude et al at Gujarat.[10]

The present study found majority of study subjects were hindu(86.1%) and the similar finding(88.02%) was seen in a study at Odisha by Mishra K, Mohapatra I, Kumar A.[9] But there was no significant difference in health care seeking behavior among different religious groups was found in the present study though significant difference was seen from above said study among religious groups.[11]

In this study it was seen that a sizeable number of caregivers were illiterate(28.9%) and it was also found that inappropriate heal care seeking behavior are more associated with illiterate one than literate and this difference is statically significant. Similar findings were seen in a study done by Ghosh,N et al at Darjeeling, , by Borah, H et al at Dibrugarh ,Assam , by Kalita ,D at Sonapur,Assam and by Yerpude PN et al at Gujarat(($\chi^2=33.62,df=1,p<.0001$) [12,13,14,11]

From this study it was seen majority of study subjects were homemaker(87.8%) and their health care seeking behavior more appropriate than who working outside home and this difference is statistically significant .That may be due to lack of time for their children or unavailability of leave or relaxation from work area .

In the present study , majority of study subjects (65%)were belonged to lower-middle& lower and their health care seeking behavior were inappropriate than their counterpart ie upper & upper middle socio-economical class and this difference was statistically significant($\chi^2=4.44,df=1,p=.035$) and similar finding was observed in a study done by Kalita D, Borah M, Kakati R, Borah H at Assam.[14]

In this study , regarding gender of the under 5 yrs ,female were just overcome male number(female-50.6% & male49.4%) and there was no biasness was seen among caregivers to their health care seeking behavior with respect gender and similar type finding was seen in the study done by Sudharsanam MB et al in Puduchery, by Kalita D at Assam but Ghosh Net al &YerpudePn et al at Gujarat reported a significant gender bias in health seeking behavior .[15,14,12,11]

From the present study it was observed majority study subjects have more than one child(59.4%) but appropriate health care seeking behavior more associated with having single baby and this association is statistically significant($\chi^2=12.75,df=1,p=.00035$). This may be caregivers are more concerned about their only baby

In the present study it was seen majority of study subjects are under cover of health insurance along with their family(76.1%) and this may be due to govt provided health insurance and it was found that appropriate health care seeking behavior among caregivers are more associated who have health insurance and it is statistically significant and similar finding was seen in the study done by Agarwalla R et al at Kamrup ,Assam.[16].

In the present study it was found majority of caregivers(71.7%) of under 5 children approached to Govt medical facilities during their children illness . This might be due to free of cost service in Govt facility and inadequate service of private sector.

A sizeable number of caregivers (42.2%) of under five children collected medicine over the counter during their children illness without consulting of medical professional . This study also found 65% caregivers generally approached Modern Medicine system and 35% in AYUSH.

V. Conclusion-

From this study it was concluded that appropriate health care seeking behavior among caregivers are significantly influenced by with ≤ 30 yrs age gr , nuclear family ,general caste,order of children ,occupation ,literacy , upper middle & upper lower socio economic scale, health insurance. There was no gender biasness or religious influence in health care seeking behavior among caregivers. In rural bengal primarily dependent on Govt health facility and a sizeable population still collected medicine over the counter with consultation of medical supervision. AYUSH is also a preferable health system among number of caregivers of under five children for their children illness.

Conflict of Interest – No conflict of interest

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References

- [1] Olenja J. Health Seeking Behaviour In Context. East Afr Med J. 2003;80(2):61–2.
- [2] Latunji Oo, Akinyemi Oo. Factors Influencing Health Seeking Behaviour Among Civil Servants In Ibadan, Nigeria. Ann Ib Postgrad Med 2018;16:5260.
- [3] Social Capital And Household Health-Seeking Behaviour For Children In The Context Of Urban Neighbourhoods: The Case Of Khayelitsha In Westerncape, South Africa. Available At: <https://Open.Uct.Ac.Za/Handle/11427/13806>. Accessed On 11 March 2024.
- [4] Pillai Rk, Williams Sv, Glick Ha, Polsky D, Berlin Ja, Lowe Ra. Factors Affecting Decisions To Seek Treatment For Sick Children In Kerala, India. Soc Sci Med. 2003;57(5):783–90.
- [5] Wardlaw T, You D, Hug L, Amouzou A, Newby H. Unicef Report: Enormous Progress In Child Survival But Greater Focus On Newborns Urgently Needed. Reprod Health 2014;11:82.
- [6] Weldesamuel Gt, Alemayoh Tt, Atalay Ht, Zemichael Tm. Modern Health Seeking Behaviour And Associated Factors Among Mothers Having Under 5 Years Old Children In Shire Town, Tigray, Ethiopia: A Cross Sectional Study 2018. Afr J Prim Health Care Fam Med 2019;11:E16. Doi: 10.4102/Phcfm.V11i1.1913.)
- [7] Marsh, Andrew & Hirve, Siddhivinayak & Lele, Pallavi & Chavan, Uddhavi & Bhattacharjee, Tathagata & Nair, Harish & Juvekar, Sanjay & Campbell, Harry. (2020). Determinants And Patterns Of Care-Seeking For Childhood Illness In Rural Pune District, India. Journal Of Global Health. 10. 10.7189/Jogh.10.010601.
- [8] Ganeshkumar P, Kamaraj P, Mageswari S, Gayathri K, Gajendran S, Karthigai Selvi S, Et Al. Health Seeking Behaviour And Its Determinants Of Health Of Under-5 Children Living In Urban Slums Of Chennai, India 2018. J Family Med Prim Care 2023;12:2934-41.
- [9] Javalkar, Sandhya Rani & Naveen H, Shalini & Davalgi, Shubha & G S, Vidya. (2024). Socio Economic Status Assessment In India: History And Updates For 2024. International Journal Of Community Medicine And Public Health. 11. 1369-1377. 10.18203/2394-6040.Ijcmph20240648.
- [10] Yerpude ,Pn. Jogdand , Ks. Shah, Jh. Thacker, Kb. A Study Of Factors Which Determine Health Seeking Behaviors Of Mothers For Their Under Five Children In Rural Area Of Gujarat. Int J Community Med Public Health 2017;4:4169-73
- [11] Mishra K, Mohapatra I, Kumar A. A Study On The Health Seeking Behavior Among Caregivers Of Under-Five Children In An Urban Slum Of Bhubaneswar, Odisha. J Family Med Prim Care 2019;8:498-503
- [12] Ghosh N, Chakrabarti I, Chakraborty M, Biswas R. Factors Affecting The Healthcare-Seeking Behaviour Of Mothers Regarding Their Children In A Rural Community Of Darjeeling District, West Bengal. Int J Med Public Health. 2013; 3:12-6 .
- [13] Borah H, Gogoi G, Saikia H. Health Seeking Behaviour Of The Mothers For Illness Of Their Under Five Children In Slums Of Dibrugarh Town. Int J Community Med Public Health. 2016; 3:145-8.
- [14] Kalita D, Borah M, Kakati R, Borah H. (2016). Primary Caregivers Health Seeking Behaviour For Under-Five Children: A Study In A Rural Block Of Assam, India. National Journal Of Community Medicine. 7. 868-872 .
- [15] Sudharsanam Mb, Rotti Sb. Factors Determining Health Seeking Behaviour For Sick Children In A Fishermen Community In Pondicherry. Indian Journal Of Community Medicine. 2007;32(1):71-72
- [16] Agarwalla R, Krishna S, Chakraborty S, Zaman Fa, Bhattacharyya H, Jamir L. Assessment Of Health Care Seeking Behaviour And Its Associated Factors Amongst The Residents Of A Rural Community Of Kamrup District In Assam: A Mixed Method Study. Int J Community Med Public Health 2024;11:2805-11.