ABSTRACT

This study is being conducted to determine the health service utilization of people in Socson district, Vietnam. This study tries to find out the health service utilization as well as its related factors: predisposing factors, the need for health care, and enabling factors.

A quantitative approach using structured questionnaires was undertaken among 810 households with 1,669 respondents aged from 15 to 60 years, who had become sick within three-month recall period.

The results indicated that the utilization of health services was low 46.1%. Factors that were found to be related to the use of the health service were education, income, severity of sickness and health care expenditure. Lower utilization of health service was found among patients who had higher education, lower income, and mild condition of sickness. Regarding the pattern of health service utilization, self-medication (28.6%) was the most common practice compared with other health care seeking actions. Twenty-four per cent reported no treatment at all while only 24.2% attended the commune health centers, 12.8% attended private practitioners and 9.2% attended hospitals/polyclinics when suffering from a health problem. Most of the patients considered private practitioners were more convenient, more availability and had better human relations between health personnel and patients compared to the commune health centers and hospital/polyclinics.

This study highlighted the important effects of health care expenditure on health care decisions. Out-of-pocket cost for health care was a heavy burden for people, particularly for poor people. This was due to the high costs of health care, low coverage of health insurance, and low coverage of exemption from user fees. The poor were deterred from seeking health care from government health services twice as much as the rich due to financial reasons. Regarded sources of payments, 50.5% of respondents relied on borrowing money or selling their belongings, reduction of other expenditures or they kept their children out of school in order to save money and to work to pay their health care needs. Among those who could afford to pay for health care, only 2.8% of them had health insurance, 1.7% was exempted from user fees.

This study suggests that to increase health service utilization, appropriate risk-sharing schemes (pre-payment, co-payment and insurance) should be developed, and health care services in terms of the availability, convenience, human relations between health personnel and patients should be strengthened in commune health center, polyclinic and hospital.