# Recognition of Hospital Preference of People of India: A Computer Based Review analysis

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## Abstract:

In the midst of ever-developing strategies in all fields, Health Care sector is one area which is massively ignored in India. Delhi, being the capital city is expected to have multi-faceted health facilities and centers to provide immediate and accurate solutions to each and every problem, be it a primary ailment or a serious health disease. But, the unfortunate trend shows that the case is opposite. In order to understand the loop holes and areas of improvements, this paper explains the existing levels of the health model structure of Delhi and the shortcomings at all stages, i.e., Primary, Tertiary and Secondary. The study is an analysis of data, collected by National Health organizations' surveys being used here as the secondary data. Till date, there is no guaranteed health model structure without any shortfalls of facilities or staff that can provide 24x7 multiple services to patients of all level, be it lower strata or upper strata. This study is aimed at finding the urgent needs and cost-effective ways to implement them leading to provision of better health facilities to the citizens.

Keyboard: Health Model, Public, Private, Expenditure, Availability, Services, Improvisations, Statistical analysis.

### I. INTRODUCTION

Health being the core pillar of human life is the field or area that needs to be addressed and assessed the most with the aim of continuous improvements for the betterment of lifestyle. Various health indicators serve as the major deciding factors for Human Development Index (HDI) and Multidimensional Poverty Index (MPI). Even though in the recent past Government has taken certain steps towards improvising the overall healthcare structure of the nation, yet there are many loop holes in the organization and implementation. The recent example of one such effort is the "Mohalla Clinics and Poly Clinics" started by Delhi Government and "Jan Aushadhi Yojna" started by Government of India. But,

due to lack of spread of knowledge and illiteracy the citizens of the nation are not being benefitted to the fullest by such schemes. Considering the current scenario, there are levels in the healthcare sector namely, Primary, Secondary and Tertiary sectors under which the PHCs, CHCs, Government hospitals, Nurseries, Private Clinics, Private hospitals etc. are all included as per the rural and urban healthcare systems. According to the result analysis described by Prasad S. [1], the data is analyzed to study the preference of people to opt for public or private hospitals in case of the health ailments has been depicted below. The figures reflects the population of Delhi that had been surveyed for gathering this result:

Table 1: Percentage of respondents for hospital preference on various parameters [1]

Variable	Residence and hospital								
	Rural			Urban			Total		
	Public	Private	Total	Public	Private	Total	Public	Private	Total
A. Demographic									
Sex									
Male	52.3	51.9	52.0	53.4	51.2	52.0	52.6	51.6	52.0
Female	47.7	48.1	48.0	46.6	48.8	48.0	47.4	48.4	48.0
Marital status									
Never married	29.7	28.5	29.0	31.2	30.4	30.7	30.1	29.1	29.5
Currently married	59.9	61.8	61.0	58.5	58.6	58.5	59.5	60.7	60.2
Widow	9.7	9.1	9.4	9.5	10.4	10.1	9.6	9.5	9.6
Divorced/separated	0.8	0.6	0.7	0.9	0.6	0.7	0.8	0.6	0.7
B. Social									
Caste									
STs	9.0	4.5	6.4	3.4	1.9	2.4	7.4	3.6	5.1
SCs	26.6	15.0	19.9	20.6	12.7	15.7	24.9	14.2	18.5
OBCs	36.7	48.4	43.5	37.6	36.1	36.7	37.0	44.3	41.3
Others	27.7	32.2	30.3	38.4	49.3	45.2	30.8	37.9	35.0
Religion									
Hindu	81.5	80.9	81.2	79.0	76.7	77.5	80.8	79.5	80.0
Muslim	12.3	9.4	10.6	14.3	14.9	14.7	12.9	11.2	11.9
Others	6.2	9.7	8.2	6.7	8.4	7.8	6.4	9.3	8.1
C. Economic									
Education									
Illiterate	48.4	45.2	46.6	32.1	25.9	28.2	43.6	38.8	40.8
Up to primary level	30.0	25.4	27.4	28.3	24.5	26.0	29.5	25.1	26.9
Middle and above	21.6	29.3	26.1	39.6	49.5	45.8	26.9	36.0	32.3
Activity status									
Self-employed	20.6	23.0	22.0	13.4	14.1	13.8	18.5	20.1	19.4
Salaried	4.1	4.4	4.3	14.7	14.0	14.2	7.2	7.6	7.4
Casual	16.7	12.5	14.3	7.5	3.5	5.0	14.0	9.5	11.3
Seeking	1.3	1.2	1.2	1.7	1.2	1.4	1.4	1.2	1.3
Region									
North	11.8	11.4	11.6	12.7	9.8	10.9	12.0	10.9	11.3
Central	15.2	17.8	16.7	16.6	16.2	16.3	15.6	17.2	16.6
East	26.2	11.2	17.5	19.4	8.2	12.4	24.2	10.2	15.9
Northeast	5.1	0.8	2.6	2.2	0.6	1.2	4.3	0.7	2.1
West	10.7	20.0	16.1	18.7	31.0	26.3	13.1	23.6	19.3
South	30.9	38.8	35.5	30.5	34.3	32.8	30.8	37.3	34.7

On the basis of study of above data, the major results for preferring between private and public hospital can be divided into seven categories. These categories can be used effectively to differentiate the people's preferences for the type of hospital based on various social and personal conditions. Also, the lacking/shortfall or any unexpected or unwanted trend can be made to shift to a preferred one.

# II. ANALYSIS OF THE RESULTS ON THE BASIS OF VARIOUS PARAMETERS

The study has been performed to analyse the behaviour of the people to make the preference of a public or the private hospital on the basis of various categories. These categories have been mentioned below and the corresponding analysis for their hospital preference has also been recorded and depicted. The analysis of these categories has been discussed in the following section.

### 1. Demographic Comparison

The choice of hospitals made by the respondents with respect to the gender, residing in both the rural and urban areas are demonstrated above with respect to the figures mentioned in Table 1 shown above.

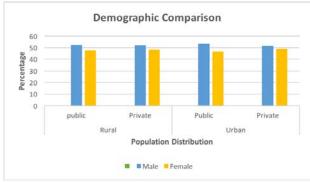


Figure 1: Demographic Comparison of population for the Hospital Preference

On the basis of differentiation among the two genders, male and female, with respect to the rural and urban population we observe that females prefer private hospital services over the public hospitals in both rural and urban areas whereas their male counterparts prefer government hospitals.

# 2. Comparison as per Marital Status

The preference among the private and the public hospital facilities on the basis of the marital status of the respondents are demonstrated in the graph mentioned below. The marital status is divided in four categories that are never married, currently married, widow, divorced or separated. The values of the respondents are with respect to the values depicted in the Table 1.

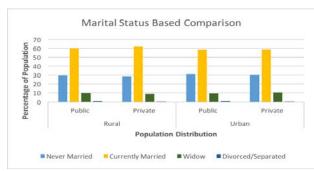


Figure 2: Population Distribution on the basis of Marital Status

This analysis showcased the preference of married couples as Private hospitals in both, rural as well as urban areas of the city. While the unmarried people are seen to be visiting public hospitals more as compared to private hospitals. The widowed or separated people prefer to avail the services of Private health centers as per this study.

### 3. Caste based comparison

The choice of opting for private and the public hospital facilities on the basis of the social caste of the respondents are depicted in the graph mentioned below. The caste considered for the purpose of survey here are generally the reserved category which are underprivileged. There are broadly three castes considered namely STs, SC, OBCs and others. The values of the respondents are with respect to the values depicted in the Table 1.

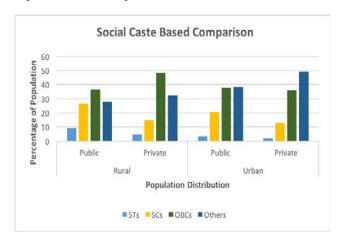


Figure 3: Population Distribution on the basis of Social Caste

In the caste analysis, it is shown that all categories except SCs prefer the private services in rural regions while in the urban areas, all categories' people prefer to avail the public services.

# 4. Religion based comparison

The analysis of the hospital preference on the basis of the religion is represented below, which depicts the choices of the hospital opted for the people belonging to the two major religions namely Hindu and Muslim. The values of the respondents are with respect to the values depicted for the people belonging to the defined religion in the Table 1.

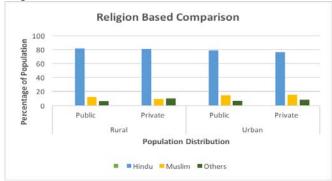


Figure 4: Population Distribution on the basis of Religion

If we categorize on the basis of religion, we will observe that the people of two religions followed majorly, i.e., Hindu and Muslim are relying on the government services and visiting the public hospitals. However, the people in other religions are preferring to take services from the private hospitals.

# 5. Educational comparison

The level of education of an individual plays a vital role for his entire lifestyle and the social wellbeing. This level of education has also impacted the kind of the health services the people are looking forward from themselves and it has been demonstrated below as well. The hospital preference on the basis of the level of education is represented below, with respect to the education attained at three major levels including completely illiterate people, literate up to primary level, educated up to middle and above that. The responses depicted are with respect to the values depicted for the respondents in the Table 1.

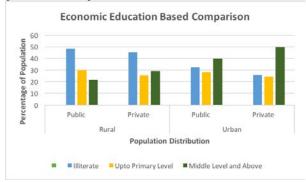


Figure 5: Population Distribution on the basis of Education

On the basis of education parameter, it is observed those who are literate prefer to visit private hospitals while those having less education or are illiterate are going to public health centers in rural areas whereas it's the opposite in urban areas, those who are educated are preferring public services over the private ones.

# 6. Comparison as per employment status

The employment status of an individual plays an important role for his lifestyle including the healthcare facilities which are almost free in the public structure and quite costly in the private structure. This level of employment directly affects the kind of the health services the people are selecting for themselves. The hospital preference on the basis of the level of employment is represented below, with respect to the employment status being defined as Self-employed, salaried class, casual living people and the ones who are the job seekers and trying to get a good employment for themselves. The responses depicted are with respect to the values depicted for the respondents in the Table 1

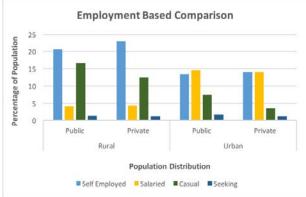


Figure 6: Population Distribution on the basis of Employment Status

In this category, the self-employed people are observed to prefer private hospitals in both, rural and urban areas while the salaried employees are preferring private hospitals in rural areas but public ones in urban parts of the city. The casual workers and those who are still seeking job prefer to avail the government services rather than the private ones.

# 7. Comparison based on region of residence

The area where an individual is residing also drives a different kind of way of living for themselves. As the nearby neighborhood of the community where a person resides also puts a strong impact on the mindset of the people. The area where an individual resides directly affects the kind of the health services they are selecting for themselves. The regions where the respondents resides are divided in six major zones which are North, Central, East, North East, West and South Delhi. The choices of the hospital preference are represented below with respect to the responses recorded for the respondents in the Table 1.

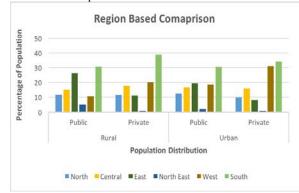


Figure 7: Population Distribution on the basis of Region of Residence

This category result states that both rural and urban groups of people in North, East and Northeast regions prefer public services while those in South and West regions prefer the private services. The trend in the Central parts of city suggests that the rural people prefer private hospitals while the urban people opt n for the public services.

Based on this analysis, an overview can be stated that majority of people do not prefer to avail the government provided healthcare services and are blindly rushing towards expensive private hospitals. There is also lack of knowledge among people regarding the services, schemes and facilities being made available for the citizens by the government health centers.

Further, after analysing the above mentioned results there arise a big question of the public not opting for the public hospitalization services for their health care services. There after the reasons were tried to be identified as to why the government services are being less preferred by the people. The major reasons identified among them were found to be: long waiting times, distant health centers, less satisfaction of the treatment received at the public hospitals, the services not available completely etc. The reasons were analyzed [1] and following results were gathered:

Table 2: Reasons for not availing government facilities [1]

Reason	Percent	
Government doctor/facility to far	16.7	
Not satisfied with medical treatment by government doctor/facilities	48.6	
Long waiting	12.6	
Required specific services not available	5.9	
Others	16.2	
Total	21963	

This analysis highlights the issue of unsatisfactory treatments in government health centers which is the major reason for the shift of choice of people from inexpensive public services to costly private services. Also, there is lack of required number of government centers or hospitals within a certain specified area

which leads to less preference as in case of health issues, no one would want to travel more and then get unsatisfactory treatment. The other reasons such as long waiting time or queues, unavailability of services like testing/x-ray machines and other such issues also contribute towards the lack of faith of people in the services being provided the Government for the betterment of citizens. This clearly implies lack of planning, implementation and awareness in the system of Delhi's health care model.

# III. CONCLUSION

From this review study, we can conclude that different sectors within a city have different preferences regarding healthcare based on the various parameters set. The major conclusions include that females in rural areas prefer visiting public health centres as compared to males, who prefer private services. Also, those who are educated and are aware of the perks of using government schemes show trust there and avail the public-sector services while those who are not educated still blindly go to private hospitals and spend way more than they can actually afford. According to the analysis, it was also observed that the people are not satisfied with the kind of the treatment they get at the government hospitals. Therefore some kinds of the awareness caps should be placed or conducted from time to time to convince the respondents that the treatment at the government structure are very right and there are no loopholes in them which may be there at the private hospitals. With this the government hospitals will once again gain popularity and people will stop spending their hard core earned money on the enlarged medical expenses.

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