A DETERMINANT FACTOR OF DEMAND HEALTH CARE IN PUBLIC HEALTH CENTER

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ABSTRACT

This study aims to measure and analyze how much influence factor Sosio-Demography such as the income, age, education, the distance of public health center to the demand for health care . The sample of 200 respondents is selected by purposive random sampling technique. The data used are the primary data obtained through questionnaires and analyzed by multiple linear regression methods with the help of Eviews. The results showed that income, age, the distance significantly influence the demand for health care while education has no significant effect on the demand for health care at public health center in Bone District, South Sulawesi Province.

Keywords: Demand health care, Factor Socio-Demography, Public Health Center.

INTRODUCTION

Health level is an important indicator to describe the quality of human development in a country. The healthier the condition of the community will further support the process and dynamics of economic development in the country, especially in increasing productivity. One of the efforts undertaken to improve the health status of the community is through health services.

Grossman (1972) reveals that every individual has a health stock that will be guarded by consuming or investing health care. However, given the heterogeneous characteristics of health services, individuals must determine what health care options will be needed. Individual choice for a health service does not stand alone but the choice is influenced by the determinants. By knowing the determinants can also be known how the consumer process chooses health services needed.

In the implementation of the National Health System implemented four pillars promotive, preventive, curative and rehabilitative which is focused on First Level Health Services (FKTP) such as Puskesmas. As one of the institutions that have the authority to provide health services

for the community, Puskesmas technically become the spearhead of health services for the community to achieve the highest level of health. Therefore, the quality of these primary health care facilities should be improved to increase the number of people's demand for access to health services.

The success of health programs and socio-economic development programs in general can be seen from indicators of health status of a country. One of them is the increase of health care through Puskesmas. From the data Susenas (Census data) Bone District shows morbidity reached 12.28 percent up from the previous year. Mortality rates show health complaints that result in disruption of daily activities both in doing the work, schooling, taking care of households and other activities. More and more people who experience health complaints illustrate the lower health status in the region. Health is a vital need for every human being because if human health is guaranteed to be able to perform daily activities well, and vice versa.

Currently, health service facilities in Bone District are 4 hospital units, 38 units of Puskesmas, 70 units of auxiliary Puskesmas, 942 units of integrated health post. Health services are expected to be better with the presence of health facilities that are closer to the community, so as to directly or indirectly lead to changes in the mindset about healthy lifestyles and all walks of life have equal access to health services that are relatively easy, cheap and evenly distributed.

Based on Bone County Health Profile, the average number of visitors to Puskesmas in Bone District in 2016 was 63.65%. Of the 38 existing Puskesmas in Bone District there are still some Puskesmas that have low number of community visits compared to other Puskesmas located in Bone District. Some of the reasons for the low utilization of health services are due to inadequate health facilities, health service disparities between villages and towns, time spent on health services, insufficient costs to use health care facilities.

Several factors that influence the utilization of health services at Puskesmas level are income, age, education, livelihood, knowledge and perception of patient. There is a relationship between the high income and the high demand for health care, especially in the case of modern health services. Basic education affects the demand for public health services. Investment in education indicates that a person with a high education tends to consult medical care when ill. Inaccessible health service facilities will lower public demand to Puskesmas (Dewar, 2010).

Treatment measures occur when an individual decides to become a healthcare user such as a Puskesmas after thinking about the possibilities that will occur such as the expensive cost, the health services that are not maximized and the economic benefits that he gets from the treatment. the individual will choose a decision if it is considered that the decision provides many benefits

from the loss. Therefore, the purpose of this study was to identify factors affecting demand for public health care at Puskemas, Bone District, South Sulawesi.

LITERATURE REVIEWS

Health issues, health service needs and demand for health services are three different concepts in the health economy. From a demand point of view, people want to improve their health status so that they need health services to achieve higher health status. From the point of view of the offerings of health services is health and at the same time produce other outputs. Health itself can not be traded, in the sense that health can not be directly bought or sold in the market. Health only has value in use rather than value in exchange (Tjiptoherijanto, 1990).

Feldstein (1979) says that the existence of demand for health services is considered an investment (investment commodity) means that if the situation is healthy, then all the available time can be used productively so that indirectly an investment. Utilization of health care at Puskesmas has several factors that influence, consumer factors such as income, education, employment, knowledge and perception of patients; organizational factors such as resource availability, affordability of service locations, and social access and service provider factors such as healthcare behavior (Dever, 1984).

The microeconomic theory of demand for health care states that prices are inversely proportional to the amount of demand for health services. This theory says that if the health service is a normal good, the higher the family's income the greater the demand for health services. If these types of health services are inferior good, increased family income will decrease demand for these types of health services (Folland et al 2001). To achieve a certain welfare the individual will consume a number of goods and services in which case the consumption of services is emphasized in the form of health services. Therefore, higher-income individuals use services greater than low-income individuals (Nunez, 2002). Age is a factor that is very influential on the utilization of health services. Fabbri (2003) says age patterns affect demand for health care facilities. Health needs are mostly related to age. The age structure of a population is a more vital picture of the population structure to consider in health planning. The older population almost always has a higher level of demand for health care services. A person's level of education can have an impact on thinking ability, capability and knowledge possessed by a person. The level of education and knowledge affect the importance of health. Higher educated people consider important health values. The higher the level of education, the more people consider important health factors (Santerre and Neun, 2000). Access to health services is one of the factors that determines the level of community participation to health services. The distance between the residence and the place of health services negatively affects the number of health services. This can be understood as the more distance the residence and the place of health services will be

more expensive. This is in accordance with demand theory proposed by Nicholson (2003) that if the requested goods more expensive, then the amount of goods purchased will be less. Health care system is an important part in the process of improving health status. With this health service system the goal of health development can be achieved effectively, efficiently and on target.

METHODOLOGY

1. Research sites

This research will be conducted in Bone District, South Sulawesi Province which has 38 health service units of Puskesmas consisting of 27 types of non-inpatient Puskesmas and 11 types of inpatient health centers. Grouping of Puskesmas using Cluster Method based on the number of population density in each work area of Puskesmas in each sub-district in Bone District, so selected Puskesmas which become the research location is Puskesmas Dua Boccoe, Puskesmas Mare, Puskesmas Watampone, Puskesmas Biru, Puskesmas Bajoe.

2. Method of collecting data

The method used in collecting primary data is the method of interview by using questionnaire is a data collection through oral question and answer between the questioner and the respondent in accordance with the questions that have been prepared.

3. Analysis Method

The method of analysis used in this study is multiple regression analysis model through the aid of computer program Eviews. The independent variables used are income, education, distance of Puskesmas and gender to the total demand of health services at Puskesmas level expressed in the form of function as follows:

$Y = f(X1, X2, X3, X4)$

Which is described in the form of a linear equation as follows:

$Yi = \beta 0 + \beta 1 X1 + \beta 2 X2 + \beta 3 X3 + \beta 4 X4 + \mu i$

Where :

Y : Demand for health services

$\beta 0$: Constants / intercept

$\beta 1, \beta 2, \beta 3, \beta 4$: Parameters to be estimated

X1 : Family income

X2   : Age of respondent

X3   : Duration of education

X4   : Distance of Puskesmas

µi   : Error term

DATA DESCRIPTION

1. Respondent Characteristics

Table 1: Frequency Distribution of Respondent's Socio-Demographic Characteristics (n=200)

Characteristics	Frequency
Gender	
Male	80
Female	120
Total	200
Age	
Less than 20 years	2
20 – 39 years	84
40 – 59 years	93
More than 60 years	21
Total	200
Eduacation	
Primary School	27
Junior High School	69
Senior High School	82
Bachelor's Degree	22
Total	200

Table 1 shows the distribution of frequency and cross-tabulation of the relationship between the characteristics of the community and the demand for health services at the Puskesmas. Distribution of respondents based on the characteristics of gender shows that the highest number of female respondents using health centers is 120 people. On the characteristics of respondents by age shows that most respondents with age 40-59 years who utilize health centers is 93 people. Distribution of respondents by education level shows that the highest respondent with high school education level utilizing Puskesmas is 82 people.

Table 2: Descriptive statistic of the main variable (n=200)

Variables	Koefisien regresi	*t-statistic*	*Probability*
Income	2,17E-07	4,347	0,0000**
Age	0,050	15,386	0,0000**
Education	0,002	0,1711	0,8643
Distance	-0,054	-4,0280	0,0001**

**significant level at 0,05

Table 2 shows that the result of regression test of independent variable consisting of income, age, education, distance to dependent variable that is health service demand is income variable (t = 4,347, P < 0,05), age (t = 15,386, P < 0,05) and distance (t = -4.0280, P < 0,05) which means that there is a significant relationship to the demand for health services, while the educational variables get the value (t = 0.1711, P > 0,05) a non-significant relationship to the demand for health services for Puskesmas.

This study found that income in general has a positive and significant effect on demand for health services means the higher the respondent's income the greater the demand for health services at the level of Puskesmas. Income affects in terms of financing that is at the time of consultation about the illness suffered and at the time of drug redemption after the examination. The public knows that to get quality health care is by paying so that the high income of the community increases the demand for health care especially in the case of modern health services. The results of this study are consistent with the theories contained in the research results that there is an association between the high income and the large demand for health care, especially in the case of modern health services Saeed (2013). Age has a positive and significant impact on the demand of health services means the older the age of a person more and more health problems encountered so that will increase the demand for health services. Age factor plays a role in determining the continuity of utilization of health services. With increasing age, the vitality of the body will decrease resulting in increased demand for health services and make the demand for health services will increase as well. The results of this study are in line with research conducted by Fabbri (2003) which states that age patterns affect health care demand. distance of Puskesmas to health service has negative and significant effect means increasingly Puskesmas location by community in Puskesmas working area, decreasing frequency of public visit to Puskesmas. In this study, the Puskesmas which is the location of the research is strategically located for the community. To reach or visit to the health center Puskesmas can be reached by using public transportation or private vehicle. The results of this research in

accordance with research that said the distance has a great influence in choosing a health service and is instrumental in the utilization of health services.

CONCLUSION

Based on the results of research that want to achieve and the discussion that has been done then it can be drawn a conclusion that is: income, age, distance Puskesmas have influence on demand health service level Puskesmas in Bone District while education has no influence on demand health service Puskesmas Bone. In order to increase the public demand for health services, it is hoped that Puskesmas will improve service facility, optimize human resource input, plan, function in health, health process implementation, proper and good process implementation can produce output which is qualified and useful.

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