

# HEALTH SEEKING AND PROVIDER CHOICE: WHAT CAN WE LEARN FROM A NATIONAL REPRESENTATIVE SURVEY DATA IN CAMBODIA

---

## Workshop on Achieving UHC with Equity in Health Financing in Cambodia

Phnom Penh, 06 November 2018

Asso. Prof. Ir Por, MD, MPH, PhD  
Head of technical Bureau  
National Institute of Public Health

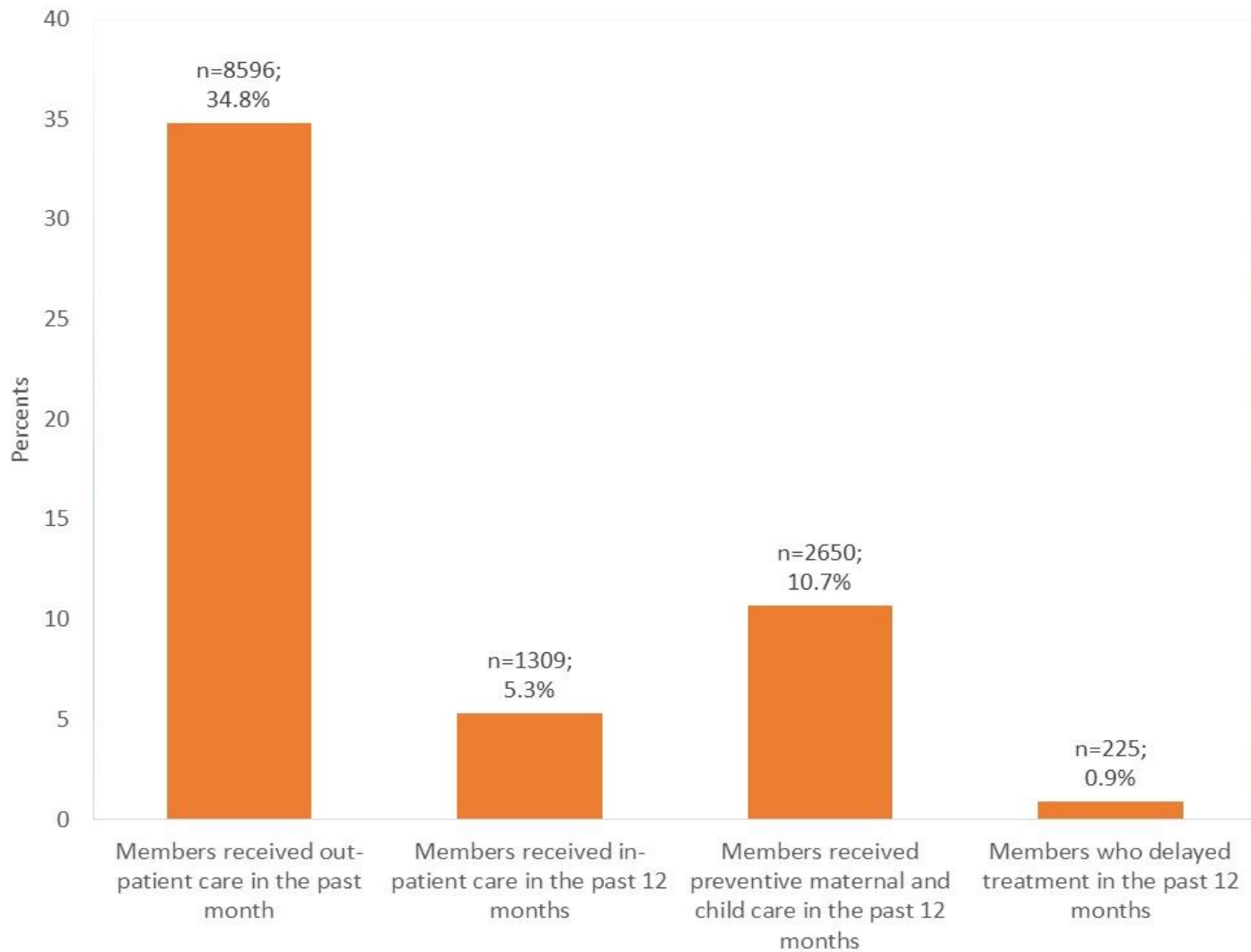


# Introduction

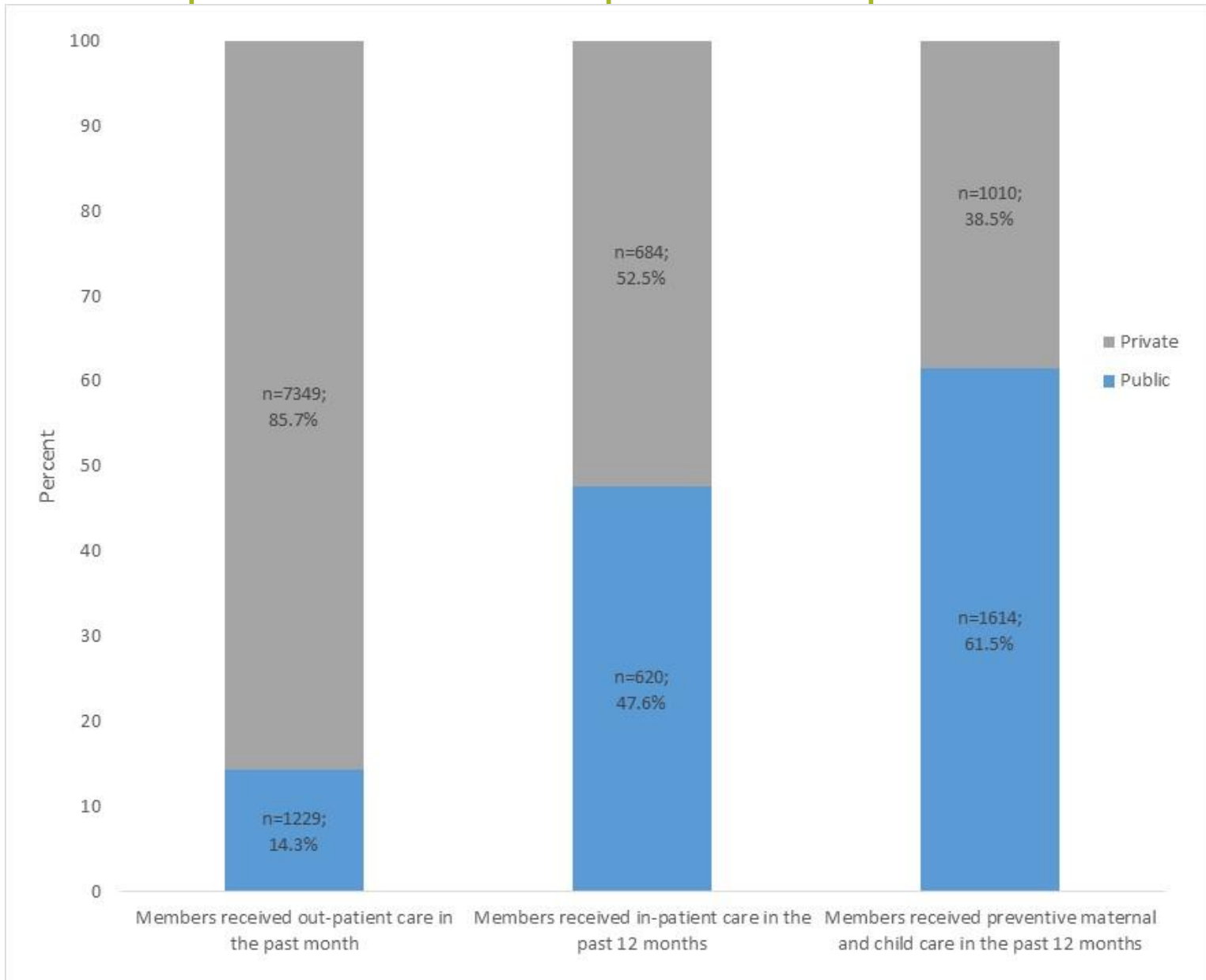
- Health Seeking Behavior (HSB): decision or an action taken by an individual to maintain, attain, or regain good health and to prevent illness, including all available health care options:
  - promotion,
  - prevention,
  - care & treatment (curative) and
  - rehabilitative,
  - even not to seek care
- Increasing literature on HSB, but mainly focusing on curative care;
- Using primary data of a national representative survey, we investigated HSB of Cambodian people and their choice of providers by looking at the pattern of their health care utilization:
  - outpatient care in the past month;
  - inpatient care in the past 12 months;
  - preventive maternal and child care in the past 12 months; and
  - delay seeking care

# Preliminary Results

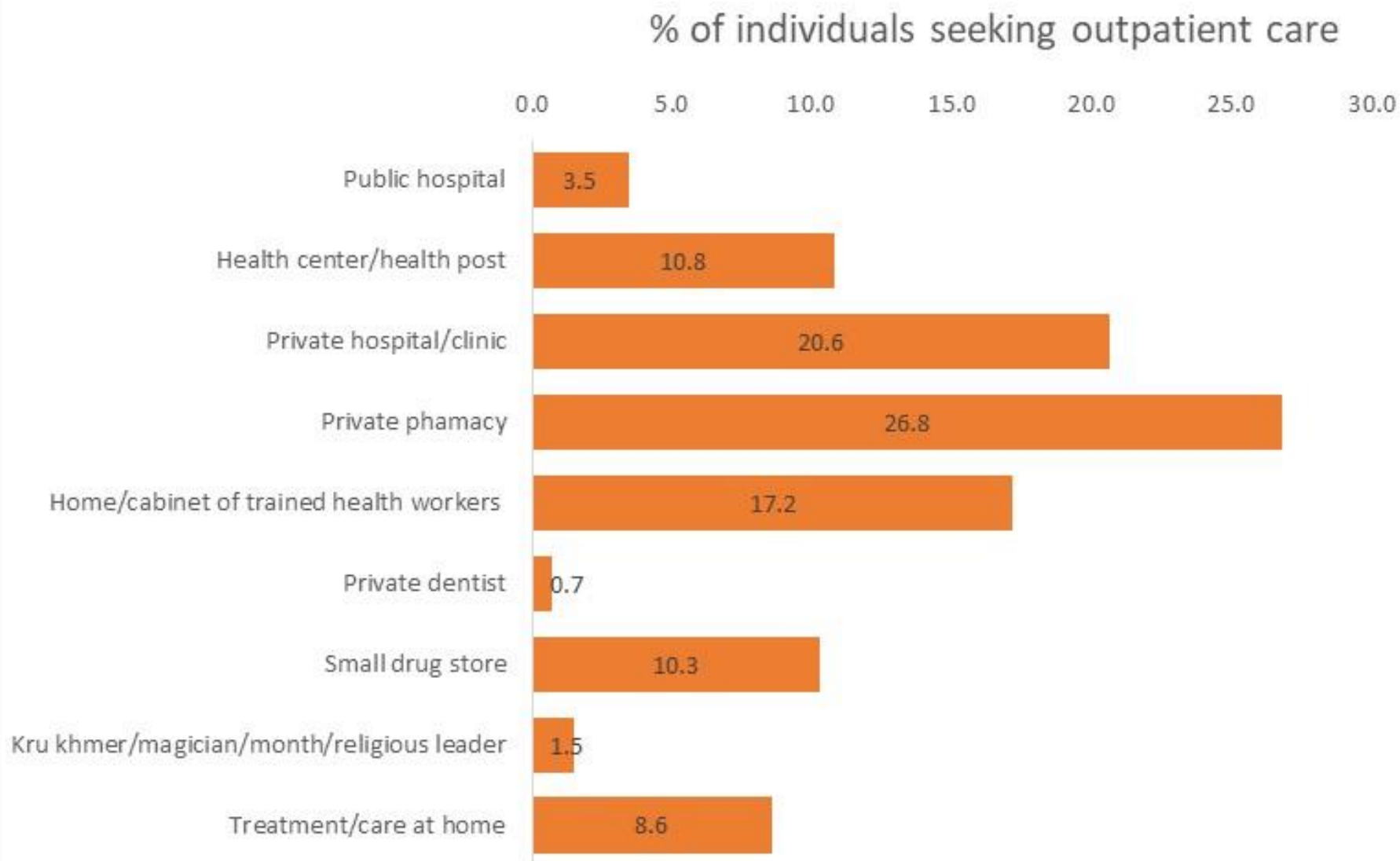
Of the total sample  
5,000 households = 24,739 individuals



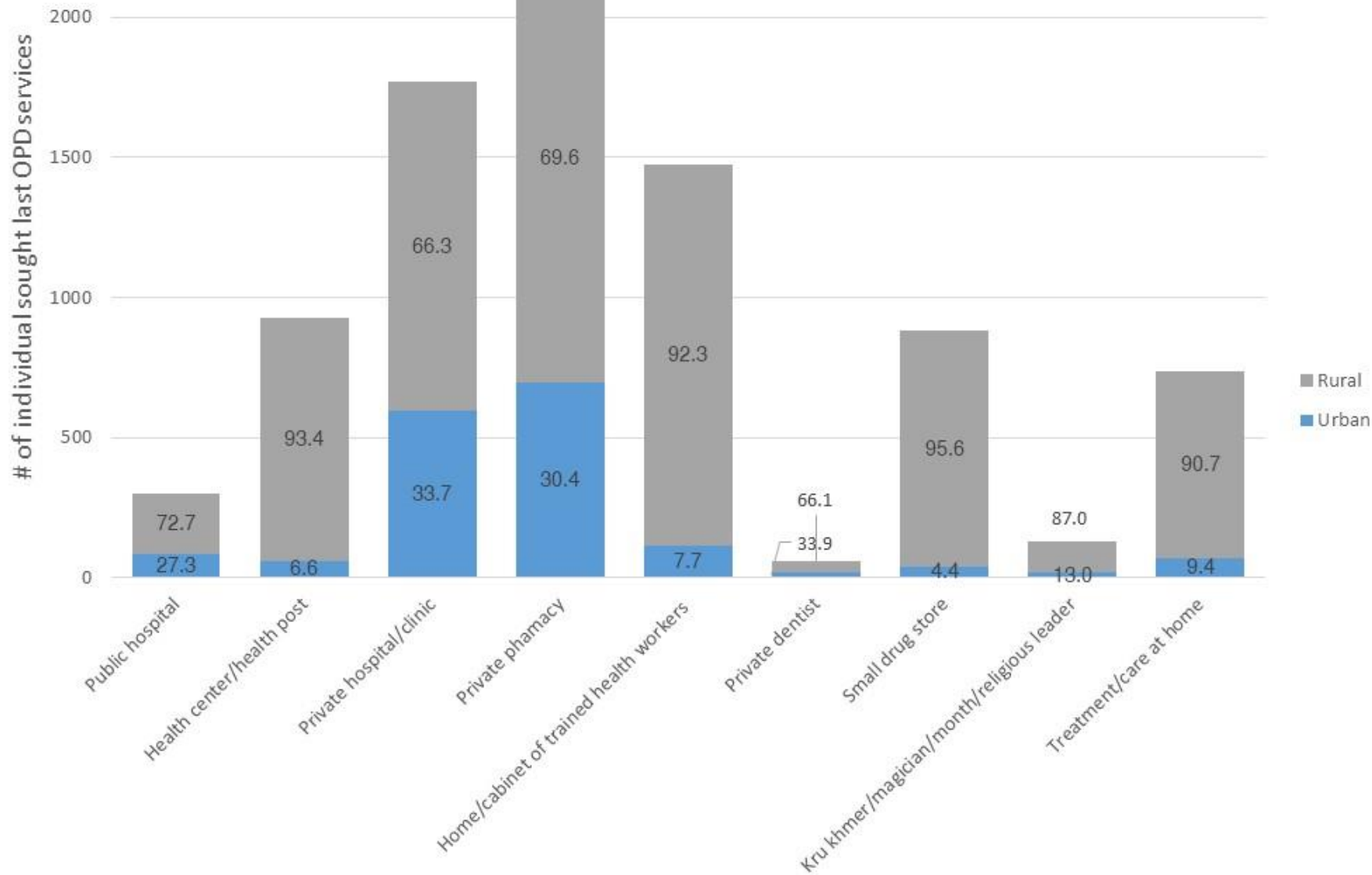
# Comparison between public and private sector



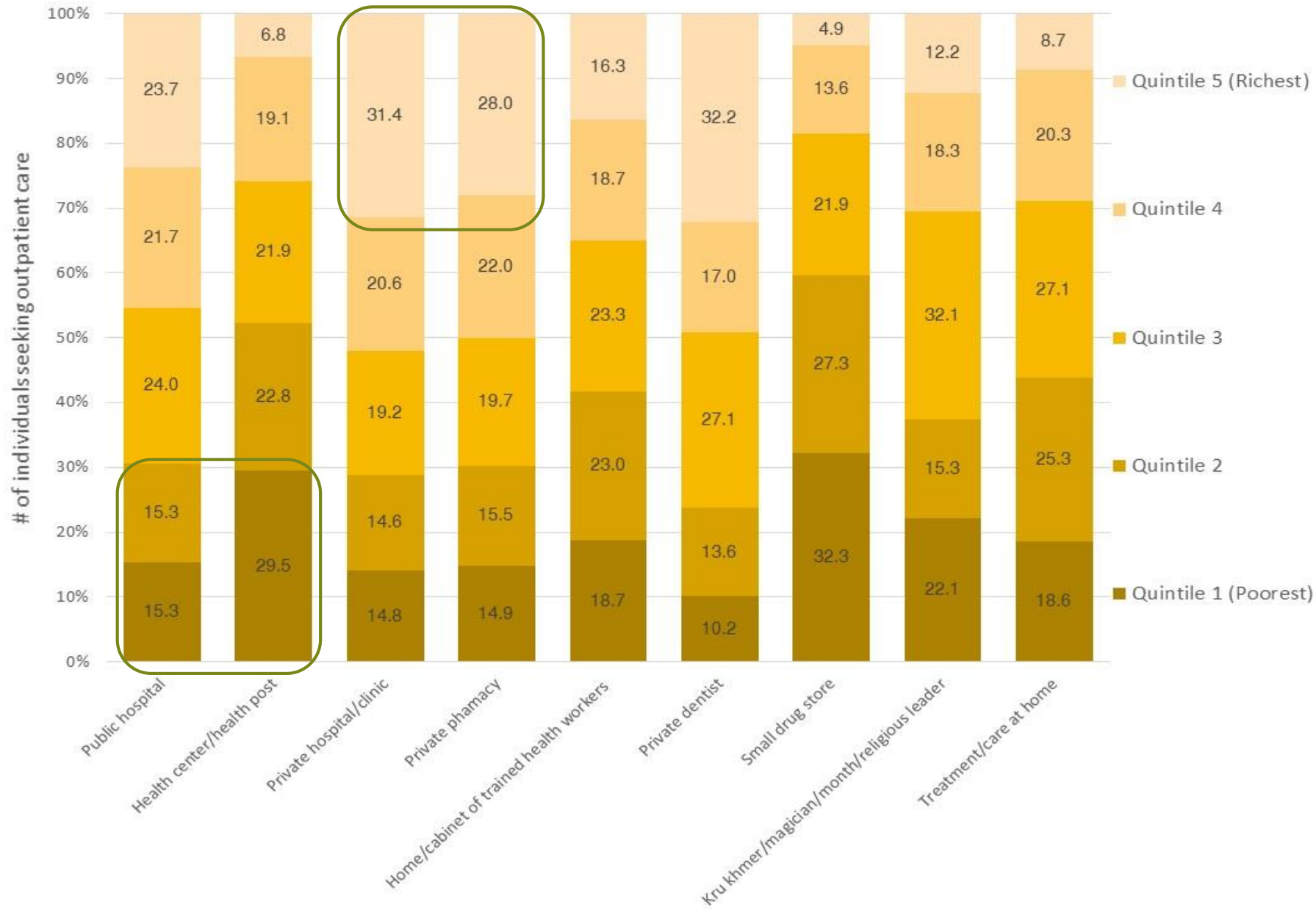
# Outpatient care in the past month



## % of individuals seeking outpatient care

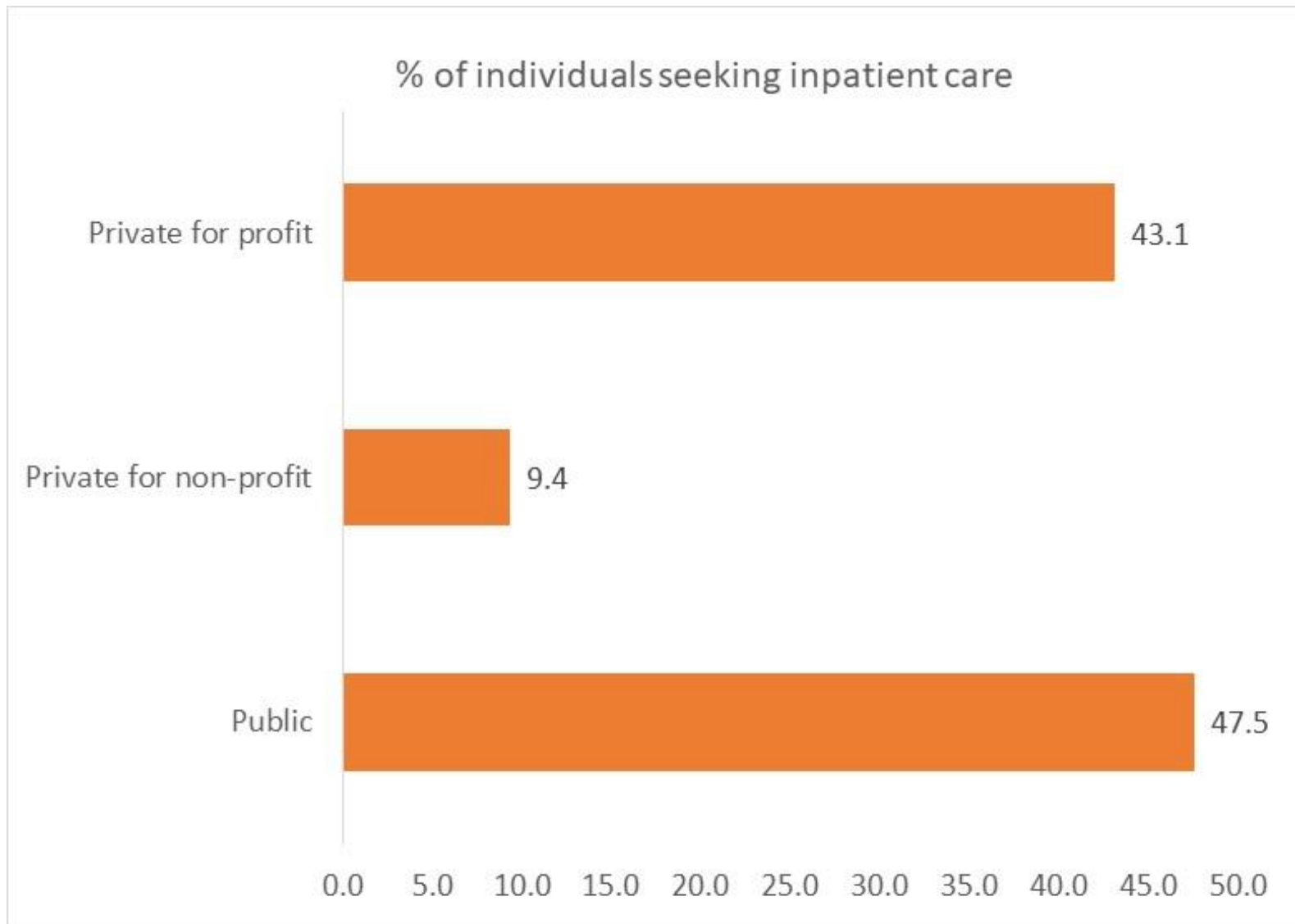


## % of individuals seeking outpatient care

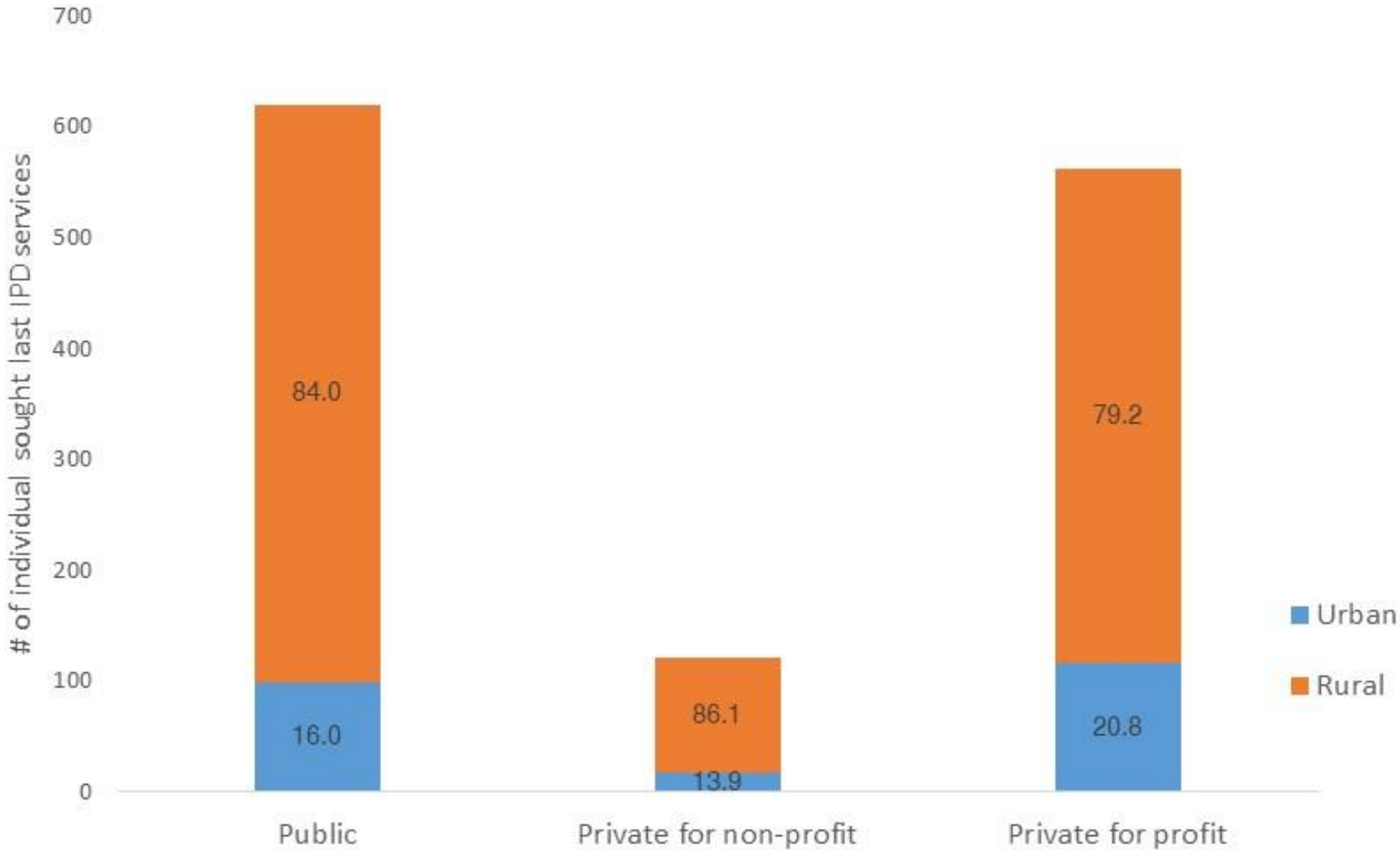




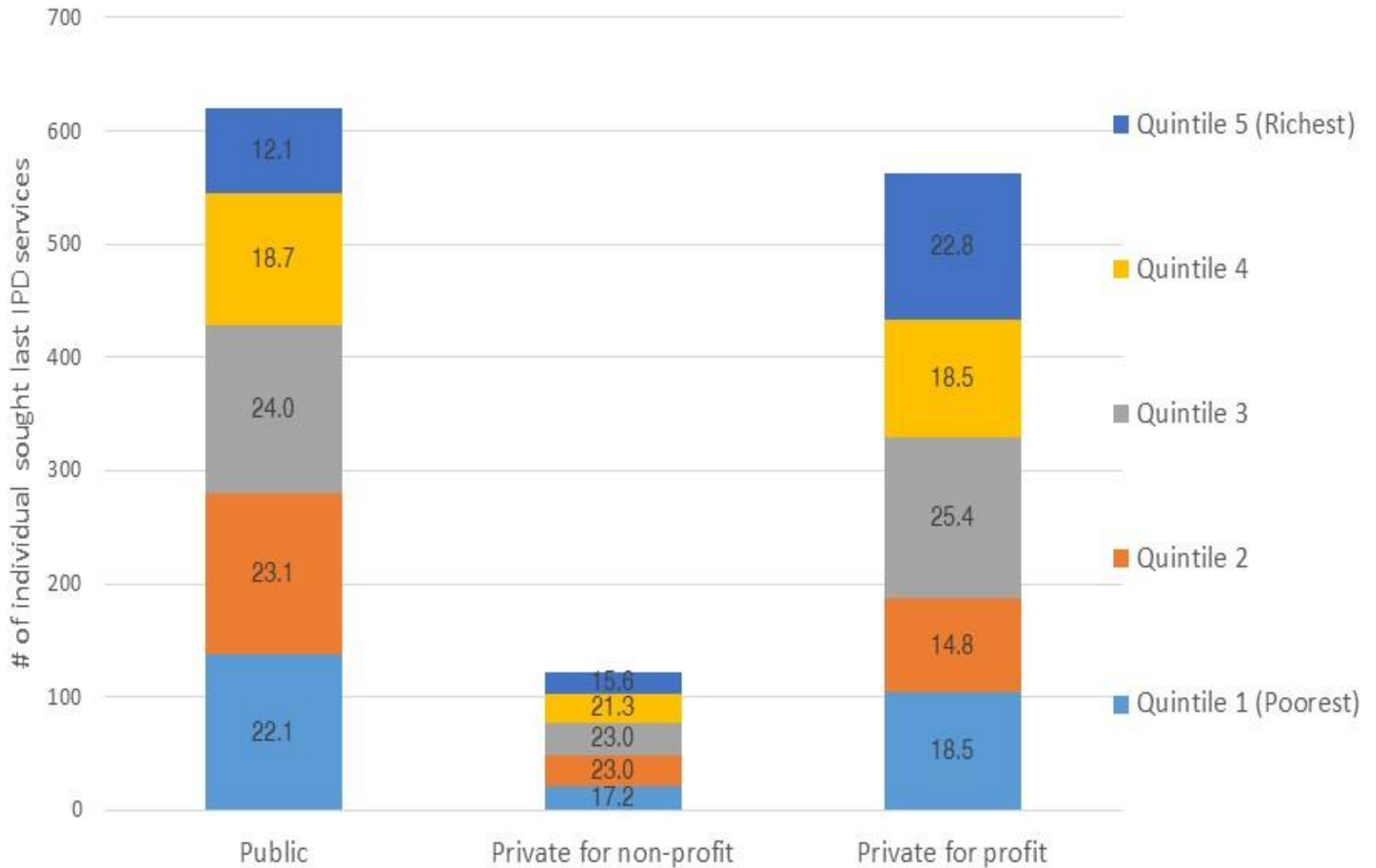
# Inpatient care in the past 12 months



# % of individuals seeking inpatient care

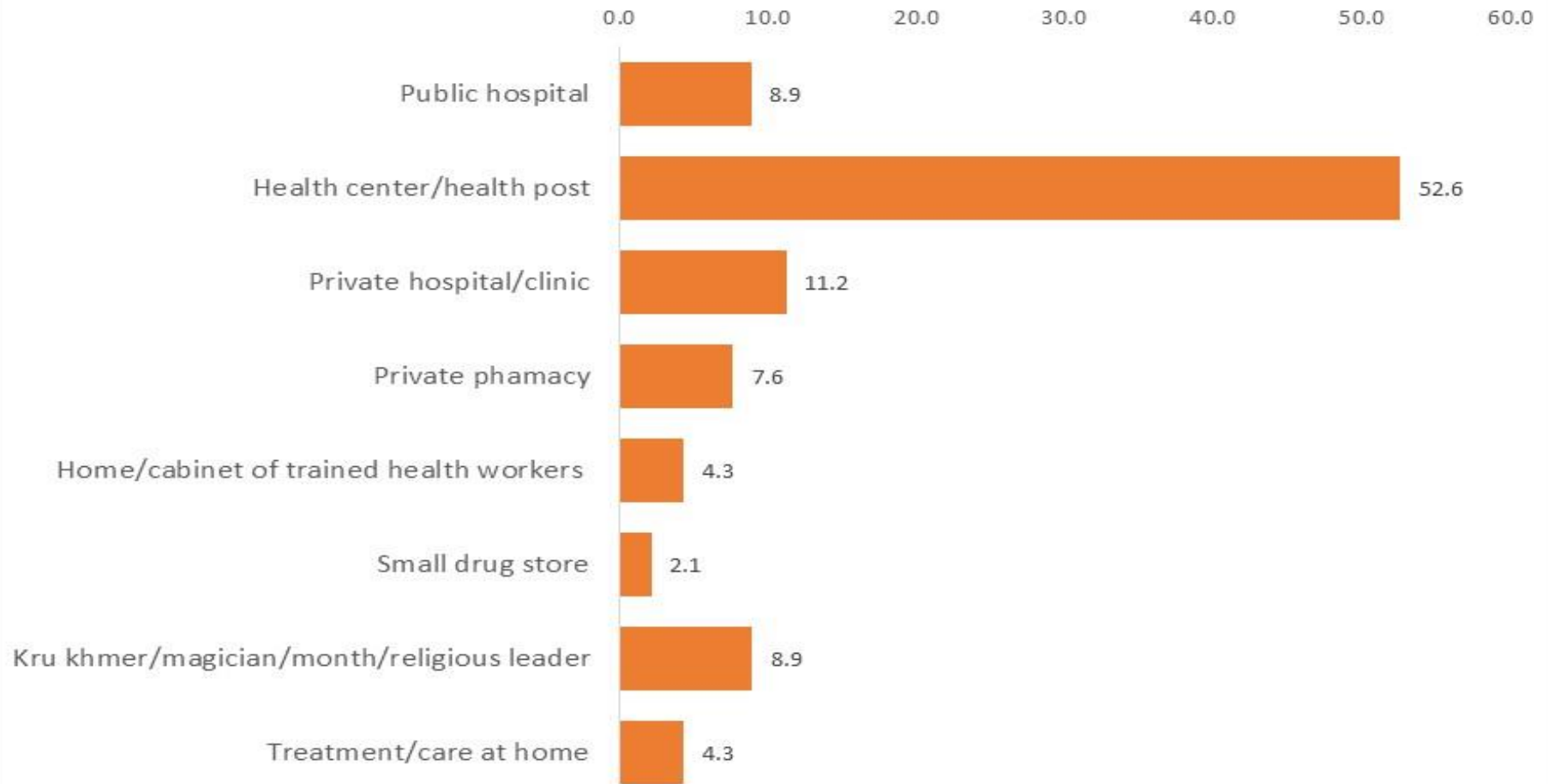


## % of individuals seeking inpatient care

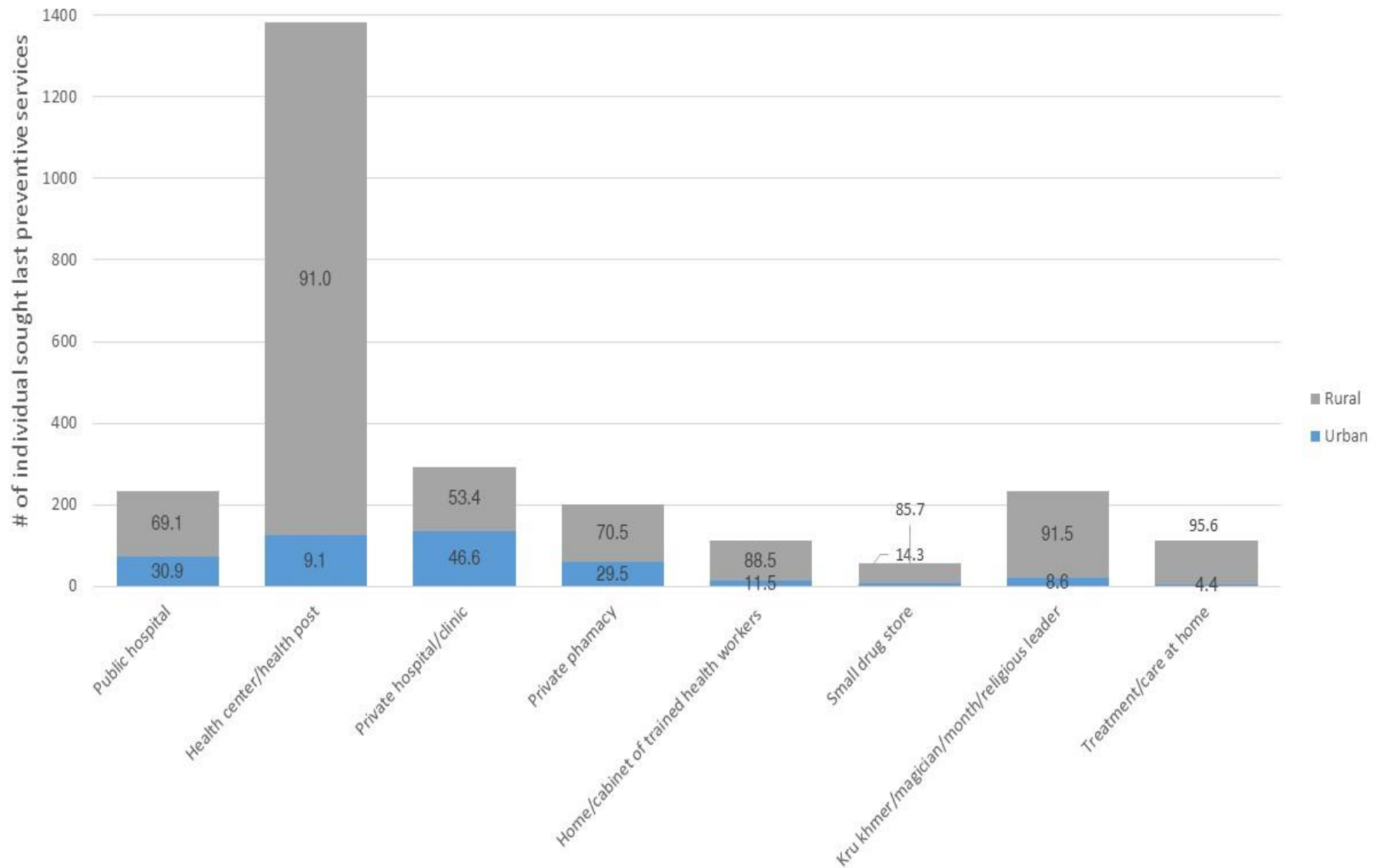


# Preventive maternal and child care in the past 12 months

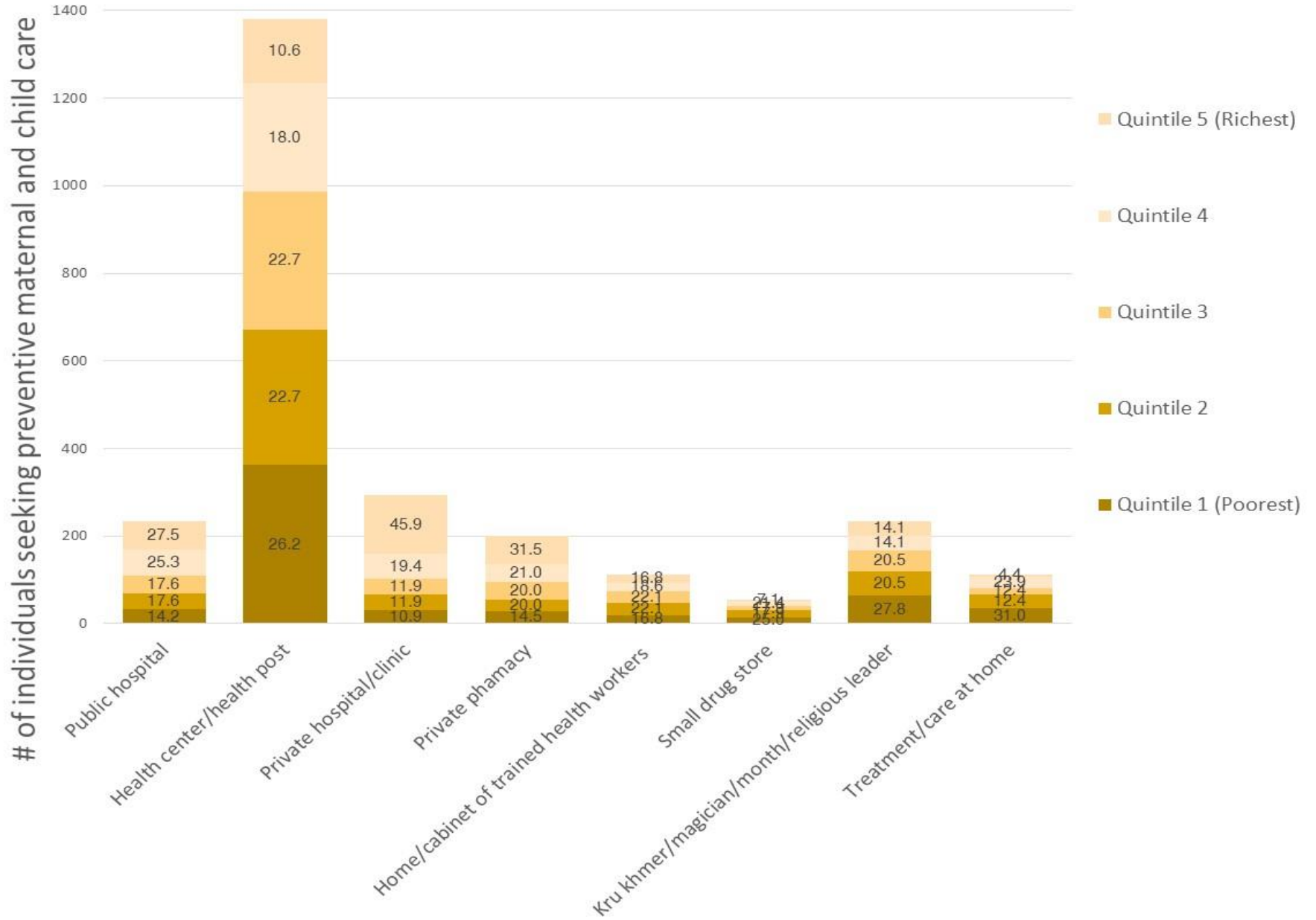
## % of individuals seeking preventive maternal and child care



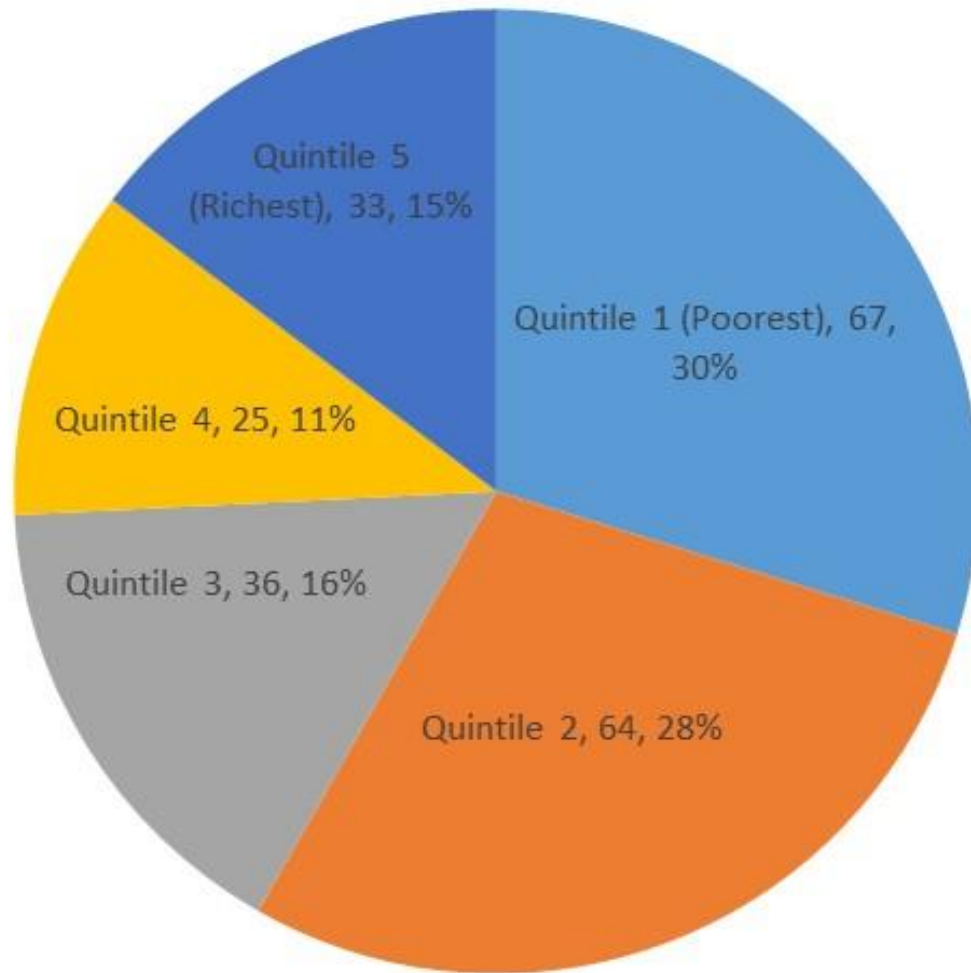
## % of individuals seeking preventive maternal and child care



## % of individuals seeking preventive maternal and child care



# Not seeking care when sic



# Conclusion and recommendations

- For outpatient care in the past month:
  - Overall, private dominant
  - The public sector (mainly HC) is pro-poor, but the large majority of the poor seeking outpatient care from private providers
- For inpatient care in the past 12 months:
  - Almost equal share between the public and private sector.
  - Private not-for-profit takes nearly 10% of the inpatient care
- For preventive maternal and child care:
  - Public dominant, mainly HC,
  - Largely pro rural and poor
- Delivering preventive maternal and child care (incl. promotional and rehabilitative care) which usually has no market requires public (funded) providers
- The dominant role of private sector in delivering curative care, mainly outpatient care by private pharmacies and clinics deserve more policy attention