



“AN EXPLORATORY STUDY TO IDENTIFY THE FACTORS CONTRIBUTING TOWARDS DELAY IN SEEKING MEDICAL CARE AMONG PEOPLE RESIDING IN SELECTED AREAS OF DISTRICT MOHALI, PUNJAB.”

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Abstract: A study was conducted to identify the reasons for people avoidance of seeking medical care and to classify these reasons into conceptually distinct categories reflecting underlying factors contributing to avoidance. The aim of the study is to identify the factors contributing towards delay in seeking medical care among people residing in selected areas of district Mohali, Punjab. A quantitative research approach with descriptive research design was adopted. By using convenient sampling technique, 250 people were selected. Study showed majority of people's age i.e. 32% were in the age group of 28-37 years. Gender distribution of sample revealed that majority of samples were male i.e. 57%. 30% have educational qualification of graduation and above followed by 29.6% having up to senior secondary. Most of the people i.e. 30.8% were government employee. 55.6% were unmarried. Sample consisted of people who were not diagnosed with any disease by physician and avoided visiting doctor or seeking medical care when they suspect they should. Factors for delay in seeking medical care were identified and were categorized into personal, financial, transportation, psychological, perceptual, medical, traditional and cultural factors. Frequency and percentage distribution of these factors were calculated and they have been presented with help of figures.

Keywords: Identify, factors, delay, seeking medical care, people .

1. INTRODUCTION

Patient 'delay' is defined as the amount of time between first awareness of a symptom to time of presentation for care. Delay means the time span between aware of symptoms and start of appropriate treatment. Delay in seeking medical care is common and constitutes a major unresolved health problem for people.¹

These factors may be mainly personal but can be affected by the person's view of his illness; attitudes about his illness; available health care; cultural and economic factors; and personal reluctance or will to seek medical attention.²

Delay in seeking medical care has many negative effects on the patient's condition and medical cost, and it reduces the potential benefits of early interventions. Thus delay in seeking medical care, is affected by many factors and is a common global problem.³

2. OBJECTIVES

1. To identify the factors contributing towards delay in seeking medical care.
2. To find out the association between the research findings and selected socio-demographic variables.

3. Population and sample

Quantitative research approach and descriptive research design was used with 250 sample selected by Convenient sampling technique (non- probability sampling). Research had done in districts of Mohali, Punjab. Some Variables used in the study i.e extraneous variables: Age, gender, type of family, family monthly income, educational status, occupational status, marital status, diagnosed with any disease by physician and avoid visiting to doctor or seeking medical care. The Tool of study consists two sections: Section I - Socio demographic variables: 9 variables used.

Section II – Checklist to identify the factors contributing towards delay in seeking medical care:

This section consists of 46 items to identify the factors contributing towards delay in seeking medical care. Factors were classified into various aspects like: personal, transportation, financial, perceptual, psychological, medical, traditional, cultural.

The study included the people who are not diagnosed with any disease by physician, avoid visiting doctor or seeking medical care when they suspect they should (delay in seeking medical care), willing to participate in the study, available at the time of data collection and able to speak and understand the English, Hindi and Punjabi. The study excludes the people who are psychologically ill. Analysis is done by using statistical software SPSS 20 V and Microsoft Excel.

IV. RESULT

Table 1: Frequency distribution of socio - demographic variables among people selected in sample N=250

Sr. No.	Socio – demographic variables	Frequency (f)	Percentage (%)
1.	Age (in year)		
	18- 27 year	41	16.4%
	28-37year	80	32%
	38-47 year	71	28.4%
	48-57year	58	23.2%
2.	Gender		
	Male	143	57.2%
	Female	107	42.8%
	Transgender	0	0%
3.	Type of family		
	Nuclear	210	84%
	Joint	40	16%
	Extended	0	0%
4.	Family monthly income (in rupees)		

	Upto 30,000/-	117	46.8%
	30,001-60,000/-	48	19.2%
	60,001-90,000/-	61	24.4%
	>90,000/-	24	9.6%
5.	Educational status		
	No Formal Education	31	12.4%
	Up to Primary Level	16	6.4%
	Up to Secondary Level	54	21.6%
	Up to Senior Secondary Level	74	29.6%
	Graduation or above	75	30%
6.	Occupational status		
	Government employee	77	30.8%
	Semi –Government employee	60	24%
	Private employee	52	20.8%
	Unemployed	36	14.4%
	Self Employed	16	6.4%
	Home Maker	9	3.6%
7.	Marital status		
	Unmarried	139	55.6%
	Married	80	32%
	Divorced	15	6%
	Separated	8	3.2%
	Widow/Widower	8	3.2%

TABLE: 1 It shows socio - demographic variables of people included in sample. Majority of people's age i.e. 32% were in the age group of 28-37 years. Gender distribution of sample revealed that majority of samples were male i.e. 57%. 30% had educational qualification as graduation and above followed by 29.6% as having up to senior secondary. Most of the people i.e. 30.8% were government employee. 55.6% were unmarried

Table 2: Criteria for evaluating level of factors contributing towards delay in seeking medical care.

N= 250

Sr. No.	Level of factors	Number of factors present
1.	Few factors	0-15
2.	Many factors	16-30
3.	Lot many factors	31-46

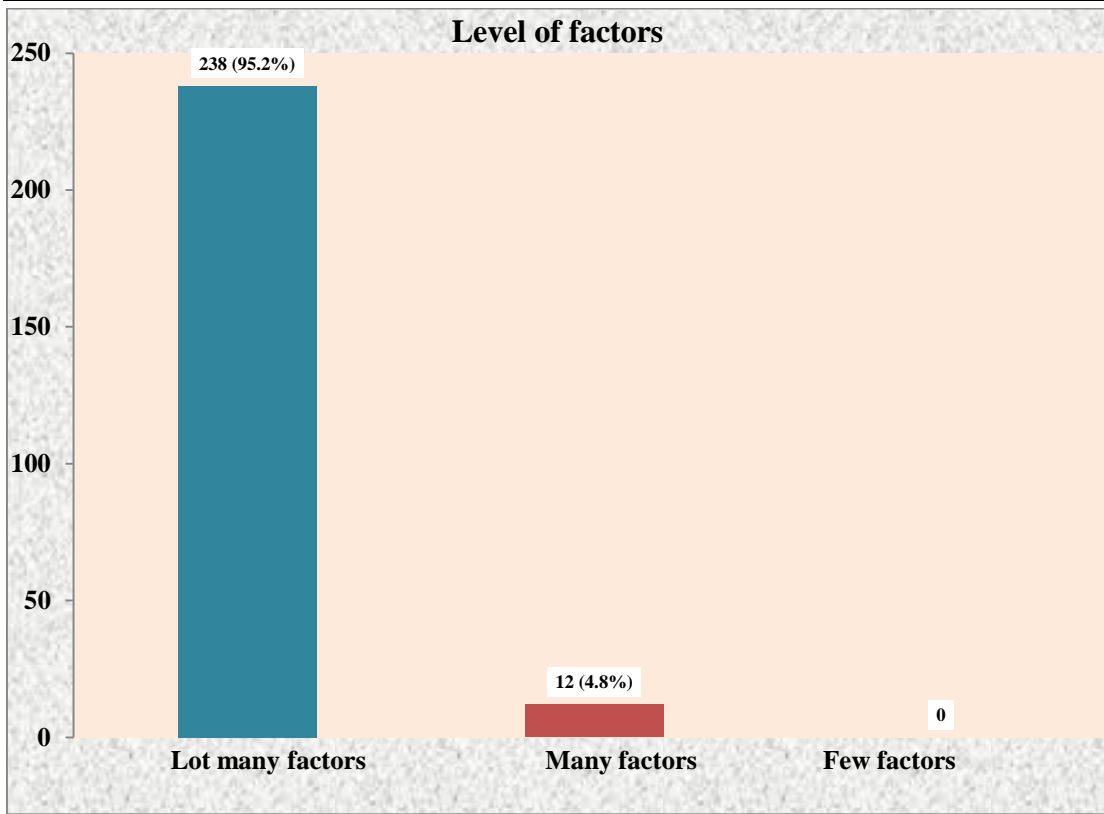


FIGURE 1: Frequency and percentage distribution of level of factors contributing towards delay in seeking medical care.

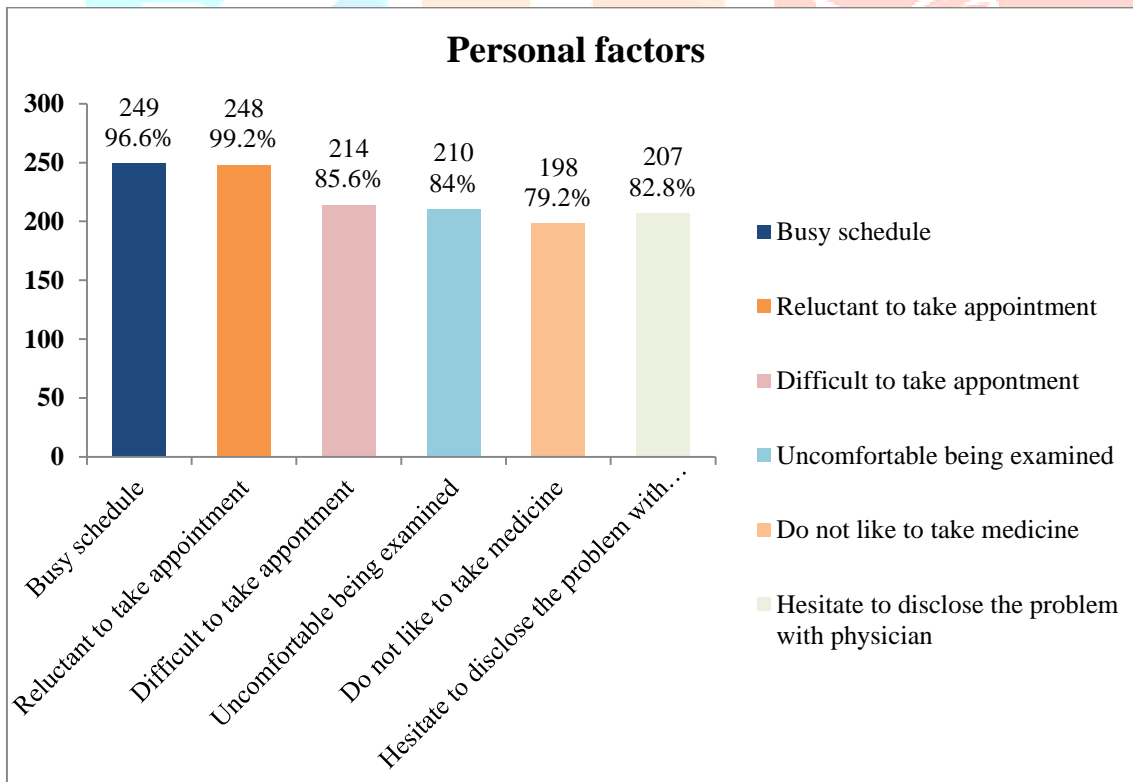


FIGURE 4: Frequency and percentage distribution of personal factors contributing towards delay in seeking medical care

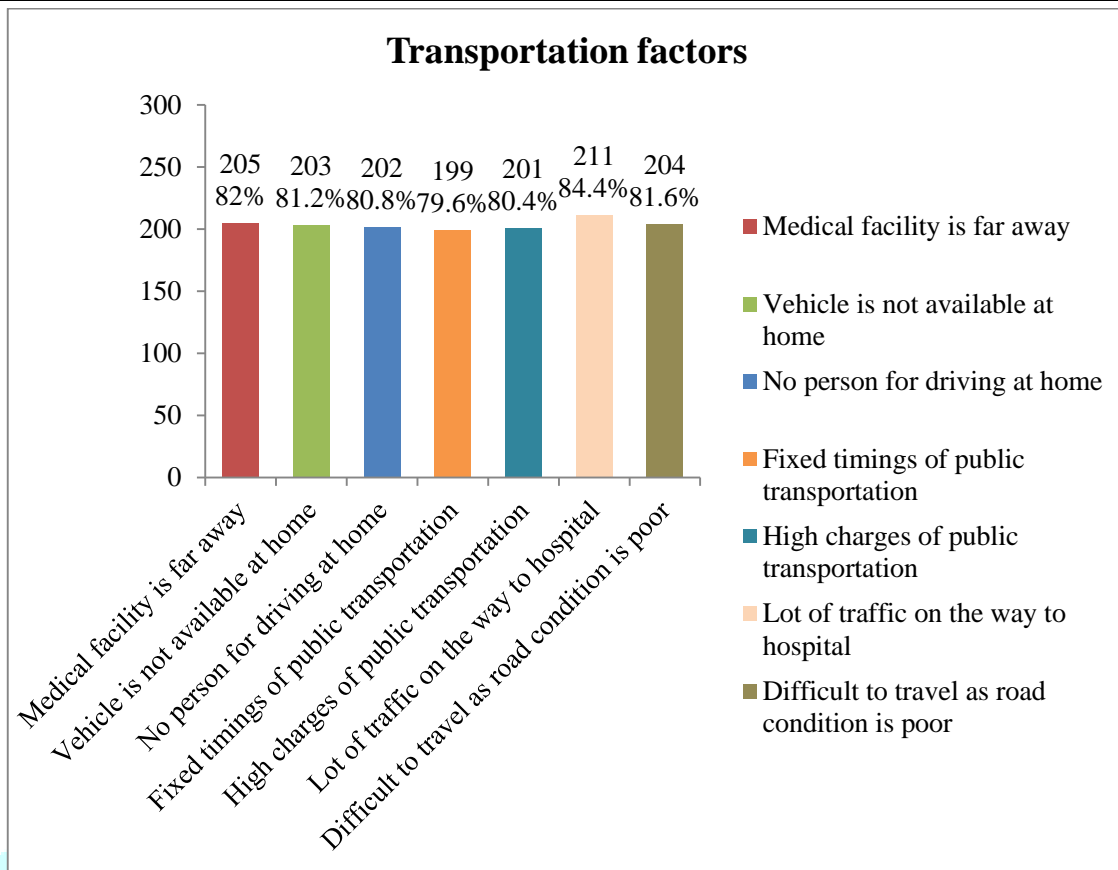


FIGURE 5: Frequency and percentage distribution of transportation factors contributing towards delay in seeking medical care

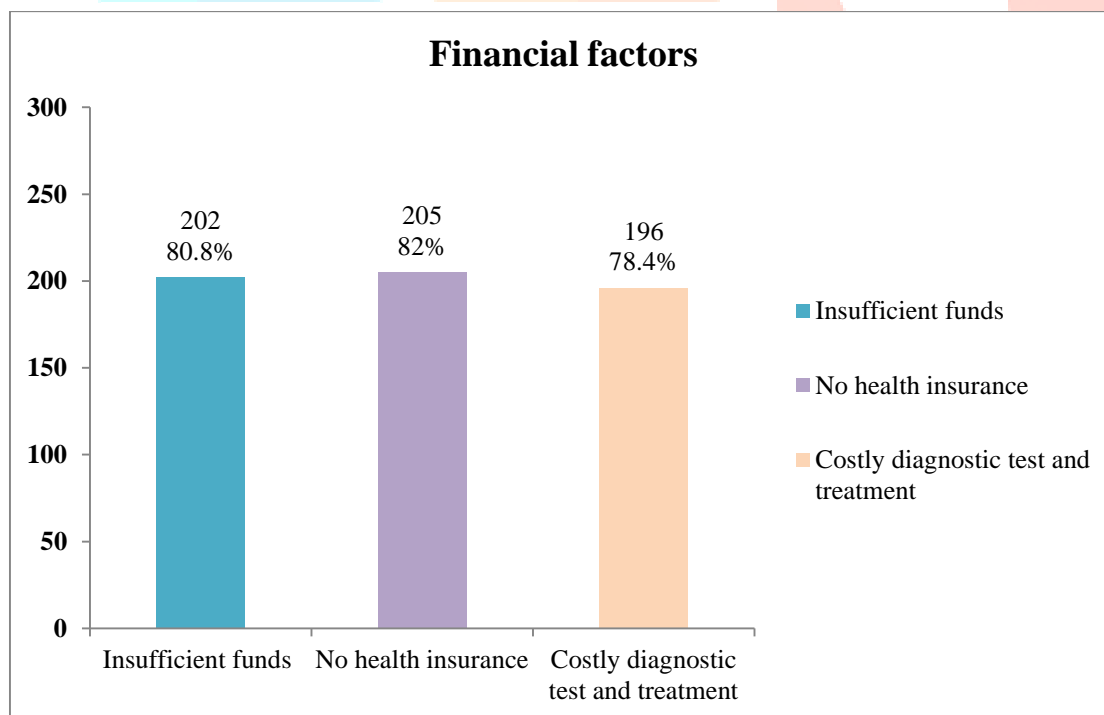


FIGURE 6: Frequency and percentage distribution of financial factors contributing towards delay in seeking medical care

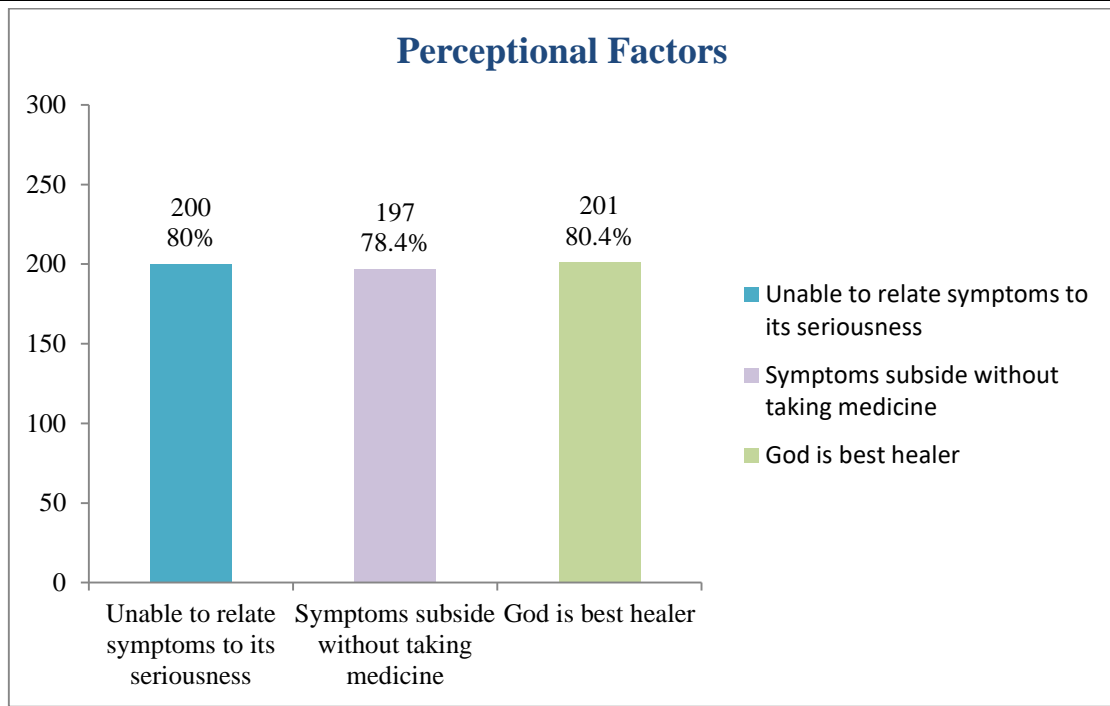
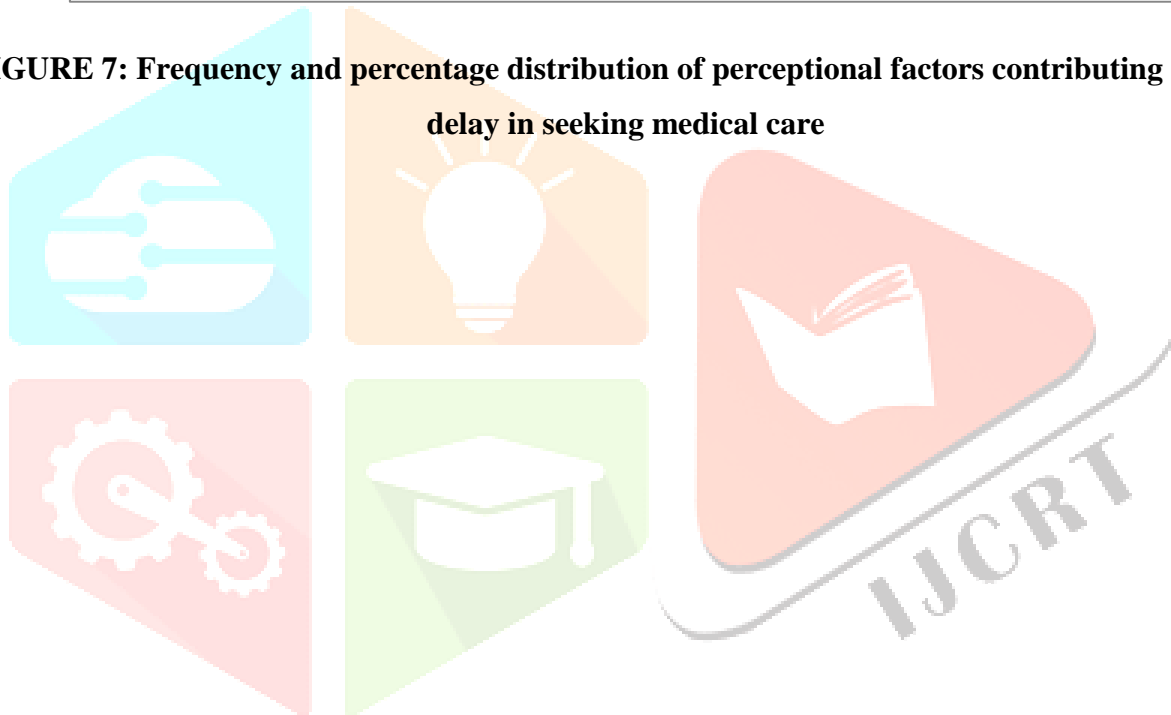


FIGURE 7: Frequency and percentage distribution of perceptual factors contributing towards delay in seeking medical care



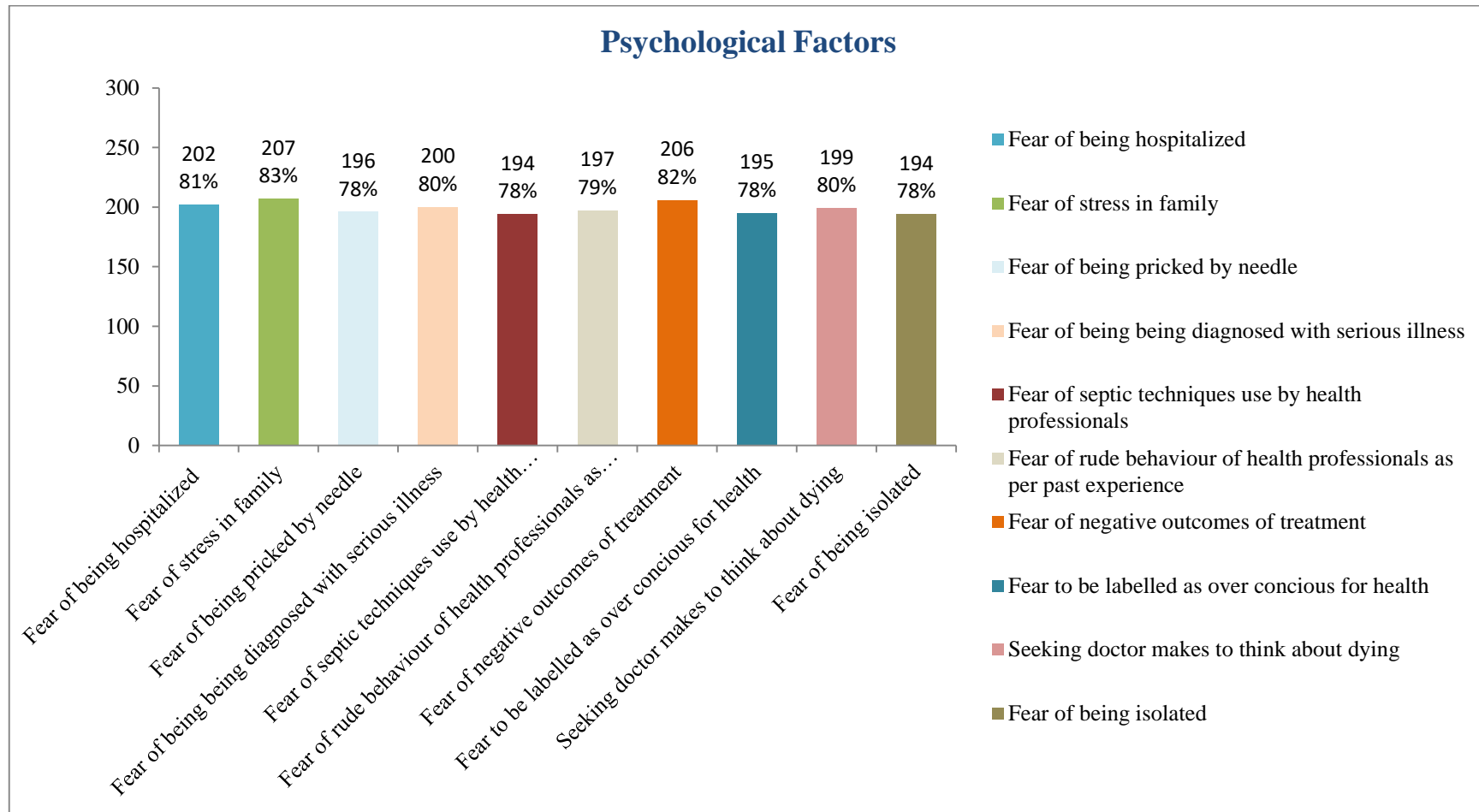


FIGURE 8: Frequency and percentage distribution of psychological factors contributing towards delay in seeking medical care

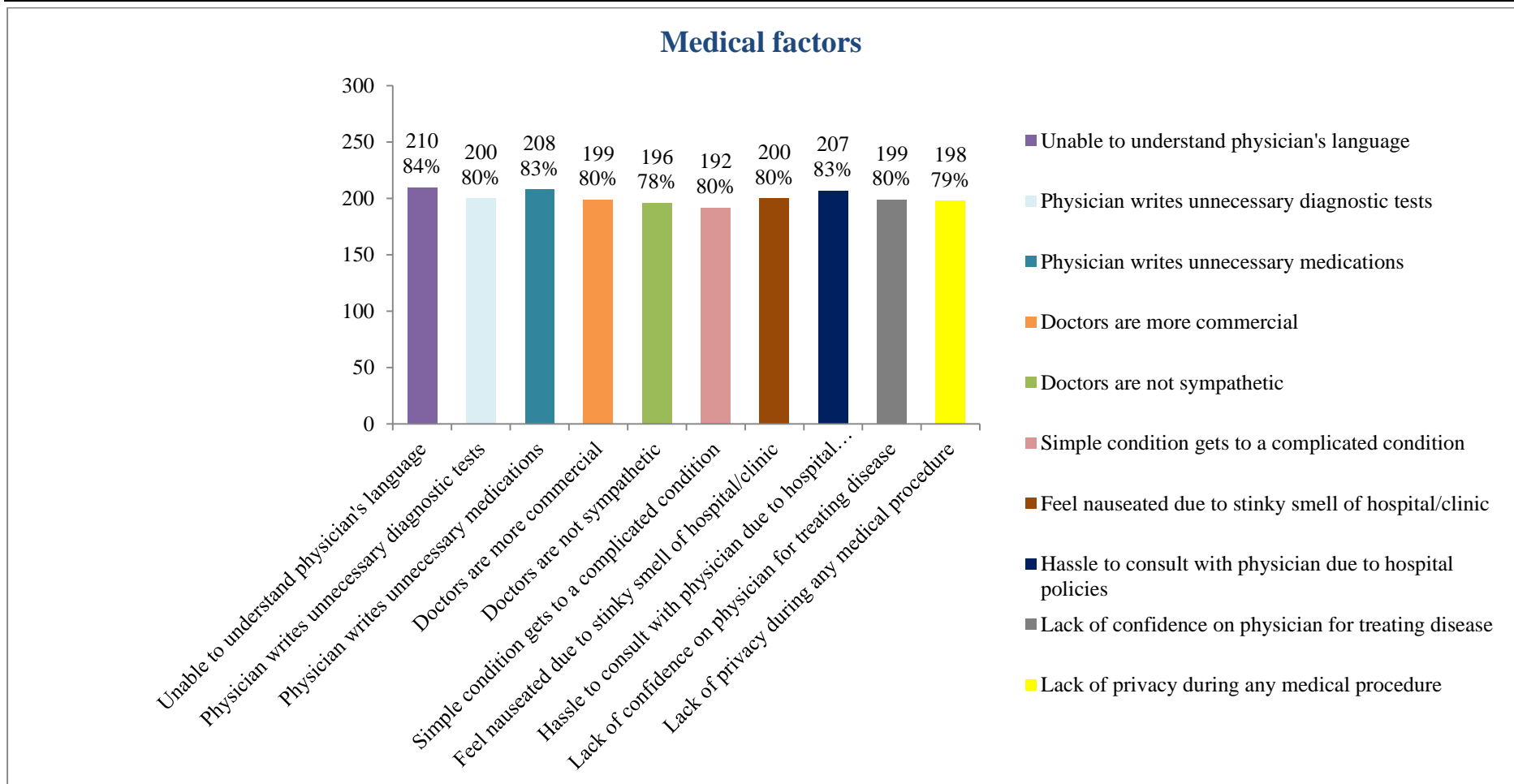


FIGURE 9: Frequency and percentage distribution of medical factors contributing towards delay in seeking medical care

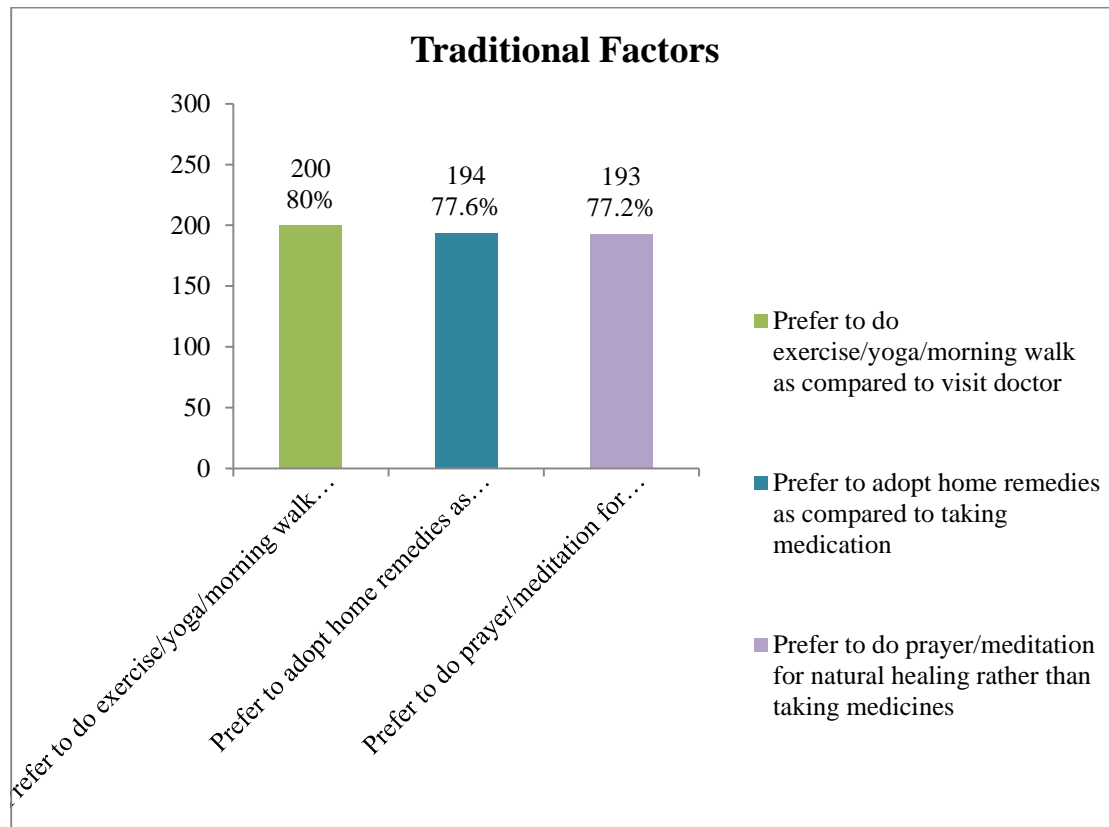


FIGURE 10: Frequency and percentage distribution of traditional factors contributing towards delay in seeking medical care

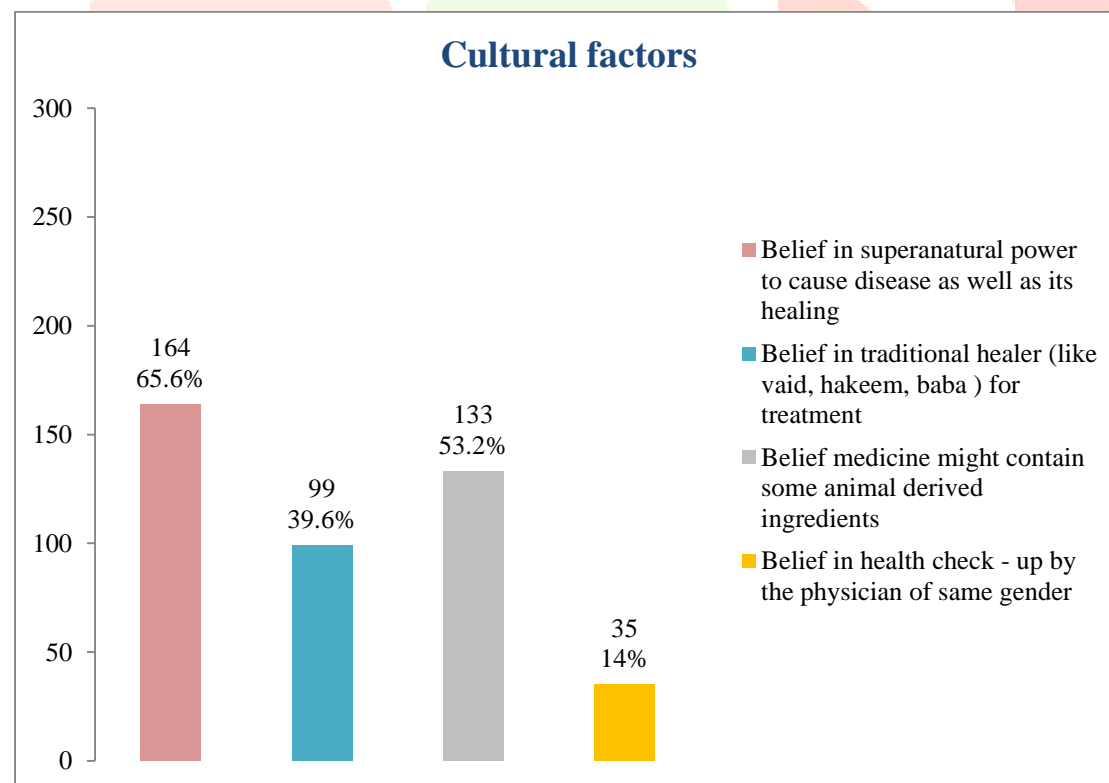


FIGURE 11: Frequency and percentage distribution of cultural factors contributing towards delay in seeking medical care

Table 3: Table showing association between level of factors for delay in seeking medical care and selected socio – demographic variables. N=250

Sr. no.	Socio demographic variables	Lot many factors	Many Factors	χ^2 , df, p value
1.	Age (in year)			
	18- 27 year	40	1	2.597, 3 0.458^{NS}
	28-37year	77	3	
	38-47 year	68	3	
	48-57year	53	5	
2.	Gender			
	Male	136	7	0.007, 1 0.935^{NS}
	Female	102	5	
	Transgender	0	0	
3.	Type of family			
	Nuclear	201	9	0.760, 1 0.383^{NS}
	Joint	37	3	
	Extended	0	0	
4.	Family monthly income (in rupees)			
	Upto 30,000/-	113	4	1.367, 3 0.713^{NS}
	30,001-60,000/-	45	3	
	60,001-90,000/-	58	3	
	>90,000/-	22	2	
5.	Educational status			
	No formal education	30	1	6.131,4 0.190^{NS}
	Up to primary level	14	2	
	Up to secondary level	52	2	
	Up to senior secondary level	68	6	
	Graduation or above	74	1	
6.	Occupational status			
	Government employee	73	4	0.988,5 0.964^{NS}
	Semi –Government employee	58	2	
	Private employee	49	3	
	Unemployed	34	2	
	Self Employed	15	1	

	Home Maker	9	0	
7.	Marital status			
	Unmarried	132	7	0.945,4 0.918^{NS}
	Married	76	4	
	Divorced	14	1	
	Separated	8	0	
	Widow/Widower	8	0	
	No	0	0	

NA = Not applicable
0.05

NS = Not significant at p<

Table 3: It shows there is no significant association of level of factors for delay in seeking medical care with selected socio - demographic variables $p < 0.05$ as depicted by chi-square test.

IV. CONCLUSION

Study concluded that 238 (95.2%) people had lot many factors and 12 (4.8%) people had many factors which contributed towards delay in seeking medical care. Further, frequency and percentage distribution of all factors included in personal, transportation, financial, perceptual, psychological, medical, traditional and cultural factors have been found. Also, there is no significant association of factors for delay in seeking medical care with selected socio - demographic variables such as age, gender, type of family, family monthly income, educational status, occupational status and marital status at $p < 0.05$ as depicted by chi-square test.

4. DISCUSSION

- Study conducted by **Alharbi AY, Alhazmi AS, Aljabri MA, Alawaji OM, Almolhi MK 2018** revealed a high prevalence of delay in seeking medical care among participants. Lack of health insurance and economic factors was the main obstacles in seeking medical care among people.⁴
- Study conducted in Nepal by **Subedi M, Engelbrektsson UB. 2018** revealed factors of delay in leprosy treatment. Use of traditional medicine, a belief in self-cure and visit to traditional healers, misdiagnosis and inadequate knowledge about the disease and its early symptoms were the main factors that influenced the delayed diagnosis.⁵
- Study conducted by **Comfort O, Chukuezi, Anelechi. 2019** interpreted that the factors associated with delay were waiting time to see doctor, delayed attention in the hospital, waiting to see how the illness goes, cost of treatment and not accessible or distance to the nearest doctor.⁶
- Study conducted by **Wechkunanukul K, Grantham H, Clark RA. 2017** interpreted that the factors associated with longer delay times included old age, female gender, ethnicity, low education level, history of chronic disease, lack of knowledge of symptoms and underutilization of ambulance service.⁷ Another study conducted by **Gangane N, Anshu, Manvatkar S, Ng N, Hurting AK, San Sebastian M. 2015** revealed that age more than 60 years was significantly associated with patient delay.⁸

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ETHICAL CLEARANCE

A formal written permission was obtained from the research and ethical committee of Mata Sahib Kaur College of Nursing, Mohali to conduct the study. A formal written permission was obtained from the Principal of Mata Sahib Kaur College of Nursing, Mohali to conduct the study. A formal written permission was obtained from the sarpanch of Districts Mohali, Punjab. Researcher explained the purpose of study to sample and took written informed consent from them. All respondents were assured about their confidentiality and anonymity.

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