



Original Research Article

An Assessment of Awareness about Health Insurance among Residents of Western UP

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Abstract

Introduction: Health insurance is fast emerging as an important mechanism to finance health care needs of the people. With improved literacy, modest rise in outcomes and rapid spread of print and electronic media, there is greater awareness and increasing demand for better health services.

Objective: To assess the perception of health insurance among residents of Western UP.

Material & Methods: A community-based cross-sectional study was carried among rural and urban population of Moradabad Uttar Pradesh. 500 household were taken for the study purpose. A predesigned questionnaire was used to assess the awareness of public about health insurance.

Results: Out of 500 participants Overall 62% of the residents had knowledge regarding health insurance, while 11% had not heard about it. Individuals residing in urban area were more (71%) aware regarding health insurance than people living in rural areas (53%). Around 63.5% of the respondents derived the information about health insurance schemes from media which played a vital role in the dissemination of information. The middle and low socio-economic groups preferred government health insurance over private.

Conclusion: There is a need to improve level of awareness about health insurance. It is a necessity of life as all individuals suffer from any disease or health related problem at any time of their life. Therefore, it should be acquired by all for future security as it decreases the burden of high medical expenses.

Keywords: Health insurance, Awareness, premium.

Introduction

Over the last 50 years India has achieved a lot in terms of health improvement. In spite of enhancements in access to health care, disparities

are related to socioeconomic status, geography, and gender, and are compounded by high out-of-pocket expenses, with more than 3/4th of the increasing financial burden of health care being

met by households.^[1] high out-of-pocket expenditures, pushes 2.2% of the population below the poverty line each year.^[2] Health insurance is an emerging social security tool for the rural underprivileged, for whom, chronic health problems, arising due to prevalence of diseases and inaccessibility to an inexpensive health care system is a major threat to their income earning capacity. Insurance is one of the risk management strategies.^[3] Health insurance provides coverage for medicines, hospital visit & stay and other medical expenses. In our country health insurance set-up is a blend of obligatory social health insurance (SHI), voluntary private health insurance and community-based health insurance (CBHI)^[4]

India spends about 6.5 to 7% of GDP on Health care out of which 1.2% is in the Govt. sector (22% of overall spending) and 4.7% in private sector (78% of overall spending).^[5] As per NFHS 3 only 5% household are covered under any health scheme or insurance.^[6] We do not have any universal health insurance plan, which caters to all the citizens of our country. The present study is an effort to assess the individuals' awareness level & perception regarding health insurance.

Aims & Objectives

1. To assess the perception of health insurance among residents of Western Uttar Pradesh.
2. To analyze the determinants of awareness of health insurance of selected samples

Material & Method

This community-based cross-sectional study was carried out in Rural and Urban Field practice area of Teerthanker Mahaveer Medical College, Moradabad (UP) during the month of February-March 2018. Study population included in this study was from urban rural field practice areas of Teerthanker Mahaveer medical college, with 1 rural & 1 urban PHCs. Assuming the prevalence of 45% & 10% relative error sample size comes out around 488, Finally for this study, sample size

was taken 500. Total sample size was equally distributed between rural and urban field practice area of TMMC & RC. Desire respondents were selected from rural and urban area by systematic random sampling.

Inclusion criteria

- The person whose age was ≥ 25 years and agree to participate
- One person from one household.

Data collection

During home visit, the purpose of the study was explained to the people and informed consent was taken from them. Data was collected on a predesigned questionnaire. From each house only one member was interviewed.

Statistical Analysis

All the collected data were entered into the excel sheets and compiled. Data analysis was done by using SPSS-20 Software (IBM, Chicago, USA). Descriptive statistics and simple proportion were used to show the characteristics of the variables. Associations between awareness of health insurance and attributes have been find out using chi-square test. p value < 0.05 was considered as significant.

Results

A total of 500 subjects were interviewed from the study population. Out of 500 respondents 244 were males (48.8%) and 256 were females (51.2%). Most (26.4%) urban participants were of 25-34 yr age, while 29.6% rural subjects were of 45-54 yr age group. About 10% urban & 8% rural were >65 yr age group. Majority participants were Hindu (44.8% in urban & 43.2% in rural), followed by Sikh (40.8% urban & 39.6% rural). Out of total households, 61.2% were belonged to joint family (77.6% in rural and 41.6% in urban). According to B. G. Prasad classification, majority of the rural families belonged to class IV (36.8%) and class III (32%) while in urban population, 37.6% families were of class III. Illiteracy was more in rural population (23.2% Vs 11.2%). Among urban population, 32.4% respondents

were educated graduate or above while in rural, most (29.2%) studied up to secondary level only. Fig 1 showed that around 63.5% (45% rural and 82% urban) of the respondents came to know about health insurance schemes from media which played an important role in the dissemination of information.

Overall 62% of the residents had knowledge regarding health insurance, while 11% had not heard about it. Tables 1 explain different socio demographic variables of aware participants. Individuals residing in urban area were more (71%) aware regarding health insurance than people living in rural areas (53%). Awareness of health insurance depends on sex, education, type of family. Males were more aware than females (72.5% Vs 64.5 % in urban & 53.3% Vs 30.4% in rural), the difference was statistically significant ($p = 0.001$). Level of awareness significantly increased with education status. Persons living in joint families were less aware regarding health insurance. Participants belonging to higher socioeconomic class were more aware compared to those of lower class both in rural & urban population, though the difference was not statistically significant.

Majority of respondents were of the view that health insurance is for tax gain & coverage of medical expenses. (Table 2) Only 3% rural & 7% urban respondents were having health insurance presently (Chi Square Value = 4.05, P Value = 0.044 i.e. $p < 0.05$), while 24% urban & 15% rural were willing to get it.

Majority of respondents believed in governmental health insurance agencies. This difference was significant. Table 3 depicts that participants belonging to lower socioeconomic class had more preference for government health insurance schemes, while rich preferred private health insurance providers this may be because of higher premium amount. The mean premium amount agreeable to be paid by the respondents for health insurance was found to be Rs 1000, even the low socio-economic group of people were also willing

to part with a reasonable amount of Rs. 500 annually for health insurance.

Table 1: Sociodemographic Profile of Aware Participants

Awareness Level		
Gender	Rural	Urban
Male	53.3%	72.5%
Female	30.4%	64.5%
Religion		
Hindu	48.1%	75.9%
Muslim	26.3%	50%
Sikh	44.1%	67.6%
Christian	20%	25%
Type of Family		
Nuclear	55.3%	71.2%
Joint	39.2%	63.5%
Socio-Economic Status		
Class I	66.7%	92.3%
Class II	60.9%	76.3%
Class III	53.8%	68.1%
Class IV	39.1%	58.5%
Class V	10%	55.6%

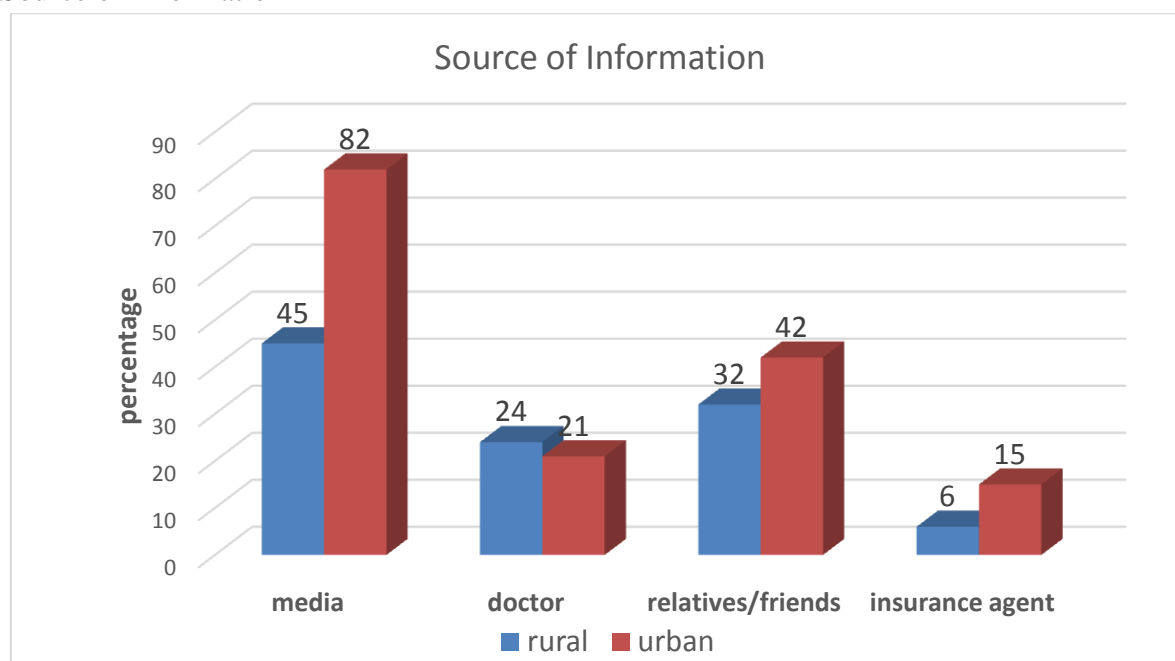
Table 2 Distribution of Subjects According to Perceived Purpose and Benefits of Taking Health Insurance

Purpose	Rural	Urban
Tax gains	27.2%	36%
Covering medical expenses	28.8%	33.6%
Compulsion from employer	11.2%	22.4%
Others	14.4%	17.2%
No Idea	57.2%	32%
Benefits		
Reduce financial burden	22.4%	31.2%
Emergency health care	24.8%	37.6%
Better utilization of health care facility	14%	28.8%
family coverage	18%	26.4%
Others	15.2%	21.6%
No Idea	62.4%	39.2%

Table 3: Distribution of Preference of Health Insurance Type According to Socio Economic Class

Socioeconomic Status	Government	Private
CLASS I	29.4%	70.4%
CLASS II	34.9%	65.1%
CLASS III	51.4%	48.6%
CLASS IV	63.5%	36.5%
CLASS V	84.2%	15.8%

Chi Sq=23.8, P Value = 0.0001

Figure 1 Source of Information

Discussion

In this study, awareness regarding health insurance was found 62%, while as per USAID study in UP, 38% respondents were aware about health insurance^[7] Yellaiah J reported that 33.5 % of the respondents of Hyderabad city were aware of health insurance^[8]. Similar studies from other parts of India reported 43.4% - 64% awareness rate^[9, 10]. Different socioeconomic factors do have impact on awareness level. Results of studies carried out elsewhere were also in agreement with the findings of the present study.^[11] Yellaiah J conducted a study in Hyderabad city & reported that compared to male respondents, female respondents were less aware of the health insurance, similarly education level also improves awareness. As the education qualification increases (graduates 16 % and post-graduates 6.5 %), it is clearly seen that the awareness among the respondents is being increased.^[8]

Awareness in the present study was seen mainly through media. Studies conducted by Reshmi *et al.* showed 34% were aware through TV ads.^[11] Thus media seemed to have played an important role in dissemination of information. Similar to our findings Patro *et al* found that different socio-economic strata agreed to pay a premium between Rs.600.00 and 1000.00 for a family of five per

annum.^[12] While Madhukumar S, *et al* reported that 31% families were ready to pay at least minimum of Rs 500 per year^[13] Madhukumar S, *et al* similar to our study showed that majority of poor respondents had believe in governmental health insurance agencies^[13]

A study conducted by Gumber and Kulkarni^[14] in Gujarat found out that the need for education for rural and urban population is a crucial aspect on extending awareness about health insurance on a large-scale.

Conclusion

There is a need to improve level of awareness regarding health insurance. Effective information, education and communication activities will improve the understanding of the people about insurance. It is important to understand people's perceptions and develop a health insurance package that is accessible, available, affordable and acceptable to all sections of the society. As health insurance is a necessity of life as all individuals suffer from any disease or health related problem at any time of their life. Therefore, it should be acquired by all for future security as it reduces the burden of high medical expenses.

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Declarations

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Ethical approval: Not required

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