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Factors Related to the Utilization of Health Services in the Outstanding Unit in the Regional General Hospital of Buton North Regency

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ABSTRACT

Introduction: Service utilization is the use of service facilities provided either in the form of outpatient care, inpatient care, home visits by health workers or other forms of utilization of these services based on the availability and continuity of services, public acceptance and fairness, easily accessible by the community, affordable, and quality.

Method: This research is quantitative research with a cross-sectional study design. The population in this study amounted to 352 respondents. The sample size is 187 respondents.

Result: The average significance of respondents to four variables, the variable of health service availability is 0.000, the variable of access to health services is 0.002, the variable is cost affordability, the value is 0.000, the variable of Service Acceptance is 0.000. Of the four variables have a relationship with the utilization of outpatient health services.

Conclusion: The average the four variables with the level of trust that exists based on the significance number has factors related to the utilization of health services which are quite closely related to the condition and situation of hospital services when patients make visits.

Introduction

Public services are regulated in the Constitution of the Republic of Indonesia. In 1945 which is the embodiment of people's sovereignty which aims to increase the dignity of the nation and state, the 1945 Constitution mandates the

obligation of the government to create prosperity for the people, promote the general welfare and educate the nation's life. The 1945 Constitution gives orders, duties and authorities to all state apparatus to carry out the mandate.^[1]

One of its manifestations is accountability in good public services. The intended public is a community that has needs and expectations for service providers, one of which is a professional hospital.^[2]

Nurjaman 2018, said that until now hospitals have functions that continue to develop according to the demands of developments in science and technology, both as health service providers as well as education development. Therefore, hospitals are required to improve the quality of health services to the community which includes all types of services that should be carried out by hospitals by following per under regulations issued by the government, the services in question can be in the form of physical and mental services so that the realization of service effectiveness can be achieved.^[3]

The problem of equitable distribution of health care affordability in Indonesia still requires follow-up. The Utilization of health services is an interaction between service users and service providers. To maintain patient loyalty, hospitals that want to develop or at least survive must provide patients with better quality services. Regarding the utilization of health services, research from Magan 2014, stated that infrastructure is an element that is considered to affect the utilization of health services.^[4]

Good service can also be realized if the government issues policies in the field of health services such as the National Health Insurance program which is a follow-up to Presidential Regulation No. 12 of 2013 concerning Health Insurance. The availability of policies from the government will be very helpful in improving health services in hospitals, especially the Regional General Hospital of North Buton Regency as a provider of public health services in North Buton Regency.^[5]

Maslina 2011 in Fitriani 2018 said that one of the most important services in hospitals is

outpatient services, where outpatient services are the backbone of the health care system because of their role as a gateway for inpatient services and other health services. one of the services of major concern to hospitals around the world.^[6]

This is due to the tendency of the community to seek treatment services that are practical once they come and on the same day they get a complete service (one daycare).^[7]

Outpatient visits at the District Hospital. North Buton in the last three years outpatient visits tend to fluctuate. In 2017 there were 958 visits, in 2018 it fell to 904 visits and in 2019 it rose to 4,206 visits. Meanwhile, in 2020 there was a decrease in patient visits, namely 1182 patient visits. The increase in the number of visits in 2019 was because patients referred from the Puskesmas systematically had to make referrals to the North Buton District Hospital which in 2019 had several contract specialist doctors to be referred to a more adequate hospital.^[8]

Therefore, it is important to study the Factors Associated with the Utilization of Outpatient Health Services at the North Buton District Hospital.

Method

This research is quantitative research by measuring and observing in the field. The location of this research was conducted at the Regional General Hospital of North Buton Regency. The population is 351 patients and the sample is 187 respondents. Sampling using a systematic random sampling technique was carried out sequentially with intervals for each patient who visited with an odd registration number and 30 patients were taken every day.

Result

Table 1. Of the 187 respondents, it shows that the service category is lacking as many as 22 respondents (11.8%) and sufficient as many as 165 respondents (88.2%).

Table 2. Of the 187 respondents, 34 respondents (18.2%) of the information lack category and 153 respondents (81.8%).

Table 3. Out of 187 respondents, 8 respondents (4.3%) of the competency category lacked and 179 (95.7%).

Table 4. Of the 187 respondents, 17 respondents (9.1%) of the cost category indicated that the cost category was sufficient and 170 respondents (90.9%).

Table 5. Of the 187 respondents, 181 respondents (96.8%) did not use the utilization category and 6 respondents (3.2%).

Table 6. Based on the results of the crosstab, it is known that of the 22 respondents who said the service availability category was lacking, 18 respondents did not use it or 81.8% and 4 respondents who used 18.2%. Meanwhile, of the 165 respondents who said the service category was sufficient, 163 respondents did not use 98.8% and 2 respondents used 1.2%.

Table 7. Of the 34 respondents who said the service access category was lacking, 30 respondents did not use it or 88.2% and 4 respondents who used it 11.8%. Meanwhile, from 153 respondents who said the service category was sufficient, 151 respondents did not use 98.7% and 2 respondents used 1.3%.

Table 8. Crosstab results from 115 respondents who said the category of cost affordability, 113 respondents did not use or 98.3% and 2 respondents who used 1.7%. With a total of 181 respondents who did not use 96.8% and 6 respondents who used 3.2%.

Table 9. The results of the crosstab show that of the 8 respondents who said the service acceptance category was lacking, 4 respondents did not use or 50.0% and 4 respondents who used 50.0%. While the category of service acceptance is sufficient from 179 respondents there are 177 who do not use 98.9% and 2 respondents who use 1.1%.

Table 1
Distribution of Respondents by Service Category

No	Service Category	Amount	Percentage (%)
1	Not enough	22	11,8
2	Enough	165	88,2
Total		187	100

Source: Primary Data 2021

Table 2
Distribution of Respondents by Information Category

No	Information Category	Amount	Percentage (%)
1	Not enough	34	18,2
2	Enough	153	81,8
Total		187	100

Source: Primary Data 2021

Table 3
Distribution of Respondents by Competency Category

No	Competency Category	Amount	Percentage (%)
1	Not enough	8	4,3
2	Enough	179	95,7
Total		187	100

Source: Primary Data 2021

Table 4
Distribution of Respondents by Cost Category

No	Cost Category	Amount	Percentage (%)
1	Not enough	17	9,1
2	Enough	170	90,9
Total		187	100

Source: Primary Data 2021

Table 5
Distribution of Respondents by Utilization Category

No	Utilization Category	Amount	Percentage (%)
1	Not Utilizing	181	96,8
2	Utilise	6	3,2
Total		187	100

Source: Primary Data 2021

Table 6
The Relationship between the Availability of Health Services and the Utilization of Health Services at the North Buton District Hospital

Variable			Category		Total
			Not Utilizing	Utilize	
Service Availability	Not enough	Mark	18	4	22
		percentage	81,8%	18,2%	100,0%
	Enough	Mark	163	2	165
		Percentage	98,8%	1,2%	100,0%
Total		Mark	181	6	187
		Percentage	96,8%	3,2%	100,0%

Source: Primary Data 2021

Table 7
The Relationship between Access to Health Services and Utilization of Health Services in North Buton District Hospital

Variable			Category		Total
			Not Utilizing	Utilize	
Service Access	Not enough	Mark	30	4	34
		percentage	88,2%	11,8%	100,0%
	Enough	Mark	151	2	153
		percentage	98,7%	1,3%	100,0%
Total		Mark	181	6	187
		percentage	96,8%	3,2%	100,0%

Source: Primary Data 2021

Table 8
Relationship between Cost Affordability and Utilization of Health Services in North Buton District Hospital

Variable			Category		Total
			Not Utilizing	Utilize	
Cost Affordability	0	Mark	3	4	7
		percentage	42.9%	57.1%	100.0%
	1	Mark	4	0	4
		percentage	100.0%	0.0%	100.0%
	2	Mark	6	0	6
		percentage	100.0%	0.0%	100.0%
	3	Mark	10	0	10
		percentage	100.0%	0.0%	100.0%
	4	Mark	19	0	19
		percentage	100.0%	0.0%	100.0%
	5	Mark	26	0	26
		percentage	100.0%	0.0%	100.0%
	6	Mark	113	2	115
		percentage	98.3%	1.7%	100.0%
Total			Mark	6	187
			percentage	96.8%	3.2%

Source: Primary Data 2021

Table 9
Relation of Health Service Acceptance in North Buton District Hospital

Variable			Category		Total	
			Not Utilizing	Utilize		
Service Reception	Not enough	Mark	4	4	8	
		percentage	50,0%	50,0%	100,0%	
	Enough	Mark	177	2	179	
		percentage	98,9%	1,1%	100,0%	
				Mark	6	187
				percentage	96,8%	3,2%

Source: Primary Data 2021

Discussion

Availability of Health Services By Utilizing Health Services

The results of the chi-square statistical test carried out, obtained that the calculated χ^2 value

was greater than the table χ^2 value ($18,000 > 3,841$), besides the significance value of Asym.sig Pearson chi-square was equal to 0.000 or less than 0.05 so that the hypothesis could be concluded. accepted, which means that there is a

correlation between the variables of the availability of health services and the utilization of health services in the North Buton District Hospital. This significant result was caused by the similarity of patient perception between the availability of health services and the utilization of health services. Based on the results of the crosstab, it is known that of the 187 respondents studied, 181 respondents do not use and 6 respondents who use health services.

In measuring the availability of health services with the utilization of health services, 2 main elements are very decisive, namely expectations for the availability of service quality (expected quality) and perceived service (perceived quality).^[9] These two elements together affect the level of patient satisfaction and determine subsequent patient behavior. To realize a service that aims to create customer satisfaction, health care workers must be able to understand the level of perceptions and expectations of these customers.^[10]

Access to Health Services By Utilizing Health Services

The results of the chi-square statistical test carried out, obtained that the calculated χ^2 value was greater than the χ^2 table value ($9.796 > 3.841$), besides that the Asym.sig Pearson chi-square significance value was equal to 0.002 or less than 0.05 so that the hypothesis could be concluded. accepted, which means that there is a correlation between the variables of access to health services and the utilization of health services at the North Buton District Hospital. Several studies report that access to regional unit hospital is only easy for those who live within one or two kilometers of the Hospital. Ideally, community outreach to health facilities should be as easy as possible to make it easier for the community to obtain health services. The impact of geographical constraints can make it difficult to access health facilities and alternative efforts can be made such as buying their medicines, seeking alternative treatments and others.

Understanding access to health services from the perspective of the public as consumers can provide valuable input in the planning process. Data on access to health services can be used for policy maker to identify and support priorities in terms of funding for improvement. Public involvement in system stewardship will also be

critical to achieving a high quality system that is based on evidence and values of equity. Globally, there is an unequal maldistribution of health workers, with the lowest numbers in the places where the need is greatest.^[11]

The results of this study confirm that access and quality of health services are reciprocal. Not only from the perspective of the service provider, but also influenced by the perspective of the user or society. For the community, some receive access to low health care facilities, medicines are not available or even unaffordable. However, in all of these problems, there is much that can be done to address them if there is political will.^[12]

The public's perspective on access to health services from the physical aspect is still difficult to reach, because the road to access health services is difficult. Meanwhile, on the social aspect, it is still difficult to reach, because the existing health workers are not friendly in providing services and have not been able to mingle with the community. Meanwhile, there are no problems in the economic aspect, because now the community has felt the benefits of the National health insurance programs.^[13]

Cost Affordability By Utilizing Health Services

The results of the chi-square statistical test carried out, obtained that the calculated χ^2 value was greater than the χ^2 table value ($68.521 > 3.841$), besides the significance value of Asym.sig Pearson chi-square was equal to 0.000 or less than 0.05 so that the hypothesis could be concluded. accepted, which means that there is a relationship between the variable cost affordability and the utilization of health services at the North Buton District Hospital. This shows that the ability of participants to pay for health services can be afforded, but if the cost of this health service has an impact on the continuity of getting health services, for example due to a diagnosis that requires continuous and high-cost treatment, it is possible that the respondent's savings will decrease to cover their needs. the. Health costs are the number of funds that must be provided to organize and/or utilize various health efforts needed by individuals, families, groups and communities.

Based on the results of the study, to be able to take advantage of health services, every patient is required to have government health insurance so that they can get free treatment. Based on the respondents' answers, more respondents do not use

health services in hospitals than those who have health insurance. This is because the existing regulations in the regional unit hospital itself are free of charge for every type of health service available if they have government-owned health insurance.^[14] People who do not have health insurance can only take advantage of health services at the health center once. Of the 187 respondents interviewed, only 6 respondents used health services so that people who have health insurance can take advantage of them. Meanwhile, people who do not have health insurance can only take advantage of other health care facilities or try traditional medicine. Sources of funds at their own expense for outpatient and inpatient treatment have the largest percentage compared to other sources of funds.

Receipt of Service Fees By Utilizing Health Services

The results of the chi-square statistical test carried out, obtained that the calculated χ^2 value was greater than the table χ^2 value ($58.920 > 3.841$), besides the significance value of Asym.sig Pearson chi-square was equal to 0.000 or less than 0.05 so that the hypothesis could be concluded. accepted, which means that there is a relationship between the variable of service acceptance and the utilization of health services at the North Buton District Hospital.

Based on the results of interviews, respondents said that health is a priority in life if they are not healthy and cannot do any activities, so if they are sick, they will continue to use hospital health services even though they have to wait a long time. People can wait until they can consult a doctor regarding the disease they are complaining about and get the right treatment and get well soon so they can return to their activities. Time is an important element in ensuring the satisfaction of using the service.^[15] The timely completion of the promised service becomes a guide for service users as a guarantee for the completion of each application or agreement. Community health service users expect the completion of services to be timely so that it does not interfere with other activities and will save energy and costs.^[16]

Conclusion

The average of the four variables with the level of trust that exists based on the significance number has factors related to the utilization of health services which are quite closely related to the condition and situation of hospital services when patients make visits, so it is necessary to improve the quality of services by providing optimal services so that achieve consumer satisfaction.

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