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THE MEASUREMENT AND CORRELATES OF WOMEN'S HEALTH CARE UTILIZATION

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Gillian L Madison-Smith 1998

ABSTRACT

Andersen's Behavioural Model of Health Care Utilization was used to examine New Zealand women's use of six health care services. The model conceptualises health care utilization as a function of predisposing, enabling and need variables. Predisposing variables encompass the individual's characteristics which are present prior to the onset of illness that represents their propensity to use health services, for example, age. Enabling variables represent features affecting the means to obtain services, for example, income. Need variables represent the presence of illness, either self perceived or professionally diagnosed. Of the six services investigated in the present study, two were non-medical (use of disability and bed days) and four were medical (use of General Practitioners (GPs), health professionals, hospitals and prescription items). The study examined a geographically stratified sample of 964 women between the ages of 19 and 90 drawn from a range of New Zealand households. Five hypotheses were tested for each of the six health services. Incorporating new measures to capture the model's components, the first two hypotheses replicated the model by examining use of health services in terms of 'contact' and 'volume'. Contact focused on whether or not a service had been accessed, while volume focused on the amount of consumption that occurred over a defined catchment period. Predisposing and enabling characteristics were important predictors of contact; but need became more important when predicting ongoing service use. The last three hypotheses expanded the model by examining the effects of trauma and Post-Traumatic Stress Disorder (PTSD) on health care utilization. Traumatic events were associated with ongoing use of bed days and hospitals. PTSD was associated with use of bed days, hospitals, and GPs. Suggestions are made regarding future research in terms of overcoming research limitations and expanding the field. These included improving measures to capture needs for women of all ages as opposed to focusing on measures capturing chronic conditions best suited for the elderly, examination of service use in terms of episode events and suggested developments for the model incorporating reciprocal and feedback loops to account for traumatic events, PTSD, personal health habits and satisfaction with use of health services.



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More isn't always better Linus. Sometimes, it's just more.
- Julia Ormond ISABRINA, Paramount Pictures, 1996]

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