# THE ELDERS AND THE PREFERENCE OF THE PLACE FOR MEDICAL TREATMENT

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#### Abstract

Ageing is considered as a natural process and a universal phenomenon. The advancement of technology and new scientific revolution lead people to live longer with adequate facilities. Health care centres whether it may be public or private in ownership made available to elders to get treatment to all of their acute and chronic diseases. The study focused on the elderly people and their preference of the place for medical treatment. The study is undertaken in two aspects such as socio-economic profile (age, sex, education, occupation, monthly income and family type) of the elderly respondents as independent variables and places for medical treatment of elderly people as dependent variables. A pre-pilot study was conducted prior to the study. Addalaichenai Divisional Secretariat area in Ampara district of Sri Lanka is selected to carry out this study using a simple random sampling method. To conduct this research successfully both qualitative and quantitative research methods were used in this study. The methods questionnaires survey, key informant interviews and focus group discussions are used to collect primary data. The collected data have been classified and tabulated with the help of statistical software package (SPSS). The chi-square test of independence has also been used for the nominal data in this study. The findings indicated that the respondents choose government hospitals, private clinics, traditional healers/ religious centres and medical shops as a place for medical treatment. Majority 46.6 per cent of the respondents visit the government hospitals. The chi-squire test of independence shows that there is a relationship between age, sex, education, occupation, monthly income and family type of the respondents and the preference of the place for medical treatment.

Keywords: Elders, Traditional healers, health problems

# I. Introduction

The statistical data indicates that the elders are on the increase in the developing countries as well as in developed countries. Sri Lanka is important as a country with a rapidly aging population in the South Asian context. Between 2000 and 2030, the projected proportion of people over the age of 60 to 70 in Sri Lanka is much higher than in any other country in the South Asian region - almost double (Siddhisena, 2004).

Though the elders are considered as the asset of the family, society and country, they have become a major

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concern of all developed and developing nations due to their impacts on economic condition, especially in the health sector. Human beings are prone to be diseased with an increase in health problems during their old age (Janbandhu and Bansod, 2015). Besides, the elderly are likely to suffer more and more health problems with longer life expectancy. The prevalence and extent of many chronic diseases along with functional problems in performing activities of daily living would be increasing among the elderly people (Kuruvila and Dhanasekaran, 2015).

The advancement of technology and new scientific revolution lead people to live longer with adequate facilities. Every state in the world put effort to provide adequate facilities and maintain minimum level of standard of living to its every citizens in all sectors. Health care is a developing sector in all developed and developing nations. Still, scientific researchers are on progress to find out remedies for incurable diseases. There are number of places available to give treatment to the people in their health problems of all acute and chronic diseases. Government hospitals, dispensaries, nursing homes, medical shops, traditional healing systems, allopathic medical system, and homeopathy medical systems are available in almost every country. Due to the privatization, private hospitals and clinic centres are also available to cure the patients immediately. Especially, free health care system and government hospitals are available in most of the countries in the world. Developing countries also provide both free and paid medicine to its citizens to improve the health care of the country. One can find both western and traditional medical system in Sri Lanka and hospitals and dispensaries are available in almost all parts of the country.

Today, elderly people are living longer and generally wanted to live a healthy life. Health seeking behaviour is highly prevalence among elderly population in order to tackle with their physical and psychological health impairments. Even though, the health seeking behaviour is common among the elderly population their preference of the place for the medical treatments are different from one another based on some reasons. Every elderly person does not prefer the same place for getting treatment to their health problems. It could be differ from person to person due to their economic condition, age, gender, education, availability of the medical institution and family condition. In connection with the point previously mentioned, this study was conducted to identify the elders' preference of the places for their medical treatment.

Studies have been conducted about the elders, hospitalization the level of patient's satisfaction. The study of Muhammad Mohsin (2018) examines the extent to which the patient is satisfied with the quality of service received from government and private hospitals. The results found that private hospitals provide better quality service to their patients compared to government hospitals. Kuruvila and Dhanasekaran (2015) reviewed the care and support provided to the elderly when they are admitted to the hospital. The study tells that patients want their doctor and nurse to spend more time with them. In their study, Rehim and Raveendran (2013) found that timely availability of rooms and nurses, drinking water and sanitation facilities, and patient mobility are key factors affecting patient satisfaction with concrete components. When Jawahar (2009) examined the degree of patient satisfaction and pleasure with the services delivered in the outpatient departments, it was found that 90-95 per cent of the patients were satisfied and enjoyed with the services and facilities provided at the hospital. Dissatisfaction was mainly seen in the long wait times and the unfriendly attitude of the staff.

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However, no studies have been carried out yet on the elders and their preference of the place for medical treatment in relation to the study area. To fill in this gap, this study was conducted to identify and explain the preference of place of elders in seeking medical treatment for their illness.

### II. Research methodology

#### Variables

The present study focuses on the elderly people and their preference of the place for medical treatment. The study is undertaken in two aspects such as socio-economic profile (age, sex, education, occupation, monthly income and family type) of the elderly respondents as independent variables and places for medical treatment of elderly people as dependent variables.

#### **Pre-Test and Pilot Study**

The questionnaire drafted was pre-tested for ambiguity and level of difficulty in understanding, with a few respondents. The suggestions offered are incorporated and the revised questionnaire is used in the pilot study. As suggested by the procedure of reliability (Cronbach's Alpha) some questions were removed. Then finally drafted questionnaire were administered for the data collection. The people involved in the pilot study are again considered in the data collection procedure. The quality of the research can be judged in terms of research **reliability and validity**. Cronbach's alpha was used to test the reliability of the questionnaire which showed alpha was greater than 0.80 (In general the cut-off reliability is 0.70) which implied that there was good internal consistency among the items/statement included in the questionnaire. In this study, the face validity has been obtained from the experts in the field of sociology and medicine.

#### Sampling Design

The Divisional Secretariat Division of Addalaichenai have been selected from Ampara district of Sri Lanka to carry out the research.

To carry out this research qualitative and quantitative research methods were applied. There were 2878 elders living in the study area (District Secretariat: Ampara, 2018). In order to collect the primary data, the questionnaires were distributed among 287 elderly respondents (10% from total elderly population) based on simple random sampling methods and collected. The methods of key informant interviews (12) and focus group discussions (05) also applied in this research to collect primary data. The secondary data were collected from Divisional Secretariat handbooks, government, private and NGOs records, online archives, published books, journal articles.

#### Data Analysis

The collected data have been classified and tabulated with the help of statistical software package. The chisquare test of independence has also been used for the nominal data in this study. International Journal of Psychosocial Rehabilitation, Vol. 24, Issue 07, 2020 ISSN: 1475-7192

## **III. Results and Discussion**

Choosing a place for medical treatment is very vital. When a patient plan to select a place for medical treatment he should make sure to get the greatest possible medical care and treatment. There are so many factors such as brutality of illness, time, cost, easy access, availability of facilities and communication that make the patient choose the right place for medical treatment. Information provided in the below table illustrates the place of treatment where the respondents resorted whenever they fell in ill.

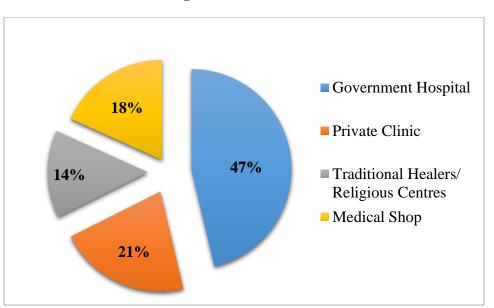
Data given in the table 01 denote that precisely 46.6 percent of the respondents visit the government hospital for seeking medical and health care services, because the government hospital is available everywhere with free of charge. Slightly one-fifth of the respondents want such services from private clinic for their convenience. They said that the medical aspiration of them is more achievable in private clinic than in the government hospitals. 18.5 percent of them go medical shop to buy medicine. A small number of them take medical and health care services from traditional healers/religious centres.

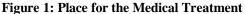
Place for Medical Treatment	Frequency	Percent
Government hospital	131	46.6
Private clinic	62	21.6
Traditional healers/ Religious Centres	41	14.3
Medical shop	53	18.5
Total	287	100

#### **Table 01: Place for Medical Treatment of the Respondents**

Source: Primary data, 2020

The above analysis is substantiated by the following figure.





#### **Prefer government hospitals**

Majority of the elders in the study area prefer government hospitals for their treatments. And they usually go to the government hospitals for the clinics and other medical purposes. The study identified why the elders of the study area prefer the government hospitals for their treatment most of the time. Elders prefer the government hospitals because of the free service. Government hospitals have been constructed by the government authorities. These government hospitals provide free services to the local people. They are funded by the government and relevant authorities under the allocation of the government budget to provide free medical services to all the public with the aim of creating a community with good health and well-being. The quality of the service is also high in the government hospitals here. These government hospitals in the study area not only provide free medical services to the public but also the best medical services with good quality. These treatments are usually given in high costs at private hospitals and clinics today. Though, these expensive medical services in the private clinics are freely given to the public in government hospitals and patients willingly choose the government hospitals because of the quality of the treatments.

Elderly people prefer the government hospitals in the study area because of the facilities it possess. Compare to the private hospitals and clinics in the study area, government hospitals posses with high facilities. Government hospitals were constructed with high facilities and good environmental conditions. Even, the particular rooms of high required services consist with air conditioned facilities. Compare to the private hospitals and clinics, high number of patients could be admitted in the same time at government hospitals. Rooms, beds and other equipment are also adequate to admit more patients to get treatments at the same time. The study area comprises such kinds of well-established and well-maintained hospitals namely Akkaraipattu Base Hopitals, Akkarraipattu Disstrict Hospital, Kalmunai Ashraff Memorial Hospital and Kalmunai North Hospital, etc. Elderly people prefer these hospitals to get medical treatment for their diseases with hope. Some parts of the nation have small government hospitals with limited

services, people of those area travels far to these government hospitals for the proper medical treatment or get medicine from local private clinics which have limited facilities.

Another reason for the preference of government hospitals by the elders in the study are is the quality of treatment and the professional consultants. The doctors are available for every medical service in the government hospitals now. Consultants, paediatrics, geriatrics, psychotherapists and other specialists are readily available in the government hospitals here. These consultants came from different parts of the country and are working with dedication. They provide adequate free services to the public and other are people are also visit these hospitals by considering the services of the hospital and the doctors. Preliminary Care Unit (PCU) is readily available for 24 hours with doctors in these government hospitals where the basic diagnosis and services are provided to the patients and then they recommend and transfer them to the relevant departments. There are small hospitals in the particular areas; however, these main government hospitals are well-equipped with all services at any time.

Commonly, private hospitals seem to be very clean, neat, and have quiet environment to attract people. Likewise, the government hospitals in the study area equip with the above three mentioned environmental conditions. Even, the government hospitals are better than the private hospitals today. The environment of the government hospitals here is very neat, clean and quite. It gives pleasant feeling to the visitors of the government hospitals. Akkaraipattu Base Hospital received an award for maintaining the clean environment. Ampara General Hospital also received an award for maintaining neatness. Nearly, all government hospitals in the study area reside with very neat, clean and quiet environment compared with private hospitals in the study area. These favourable environmental conditions of government hospitals in the study are attract not only the elders but also the other young people. Consequently, elders highly prefer these government hospitals based on the environmental conditions too.

There are private hospitals/ clinic centres available in the study area. Even though, these private hospitals perform high level surgeries, some time they transfer the critical cases or recommend some patients to the government hospitals because of the adequate facilities to look after every aspect of the patients' problem. The medical services and treatment after the surgeries are also very much appreciated in the government hospitals. For instance, the government hospitals send a full report after performing the surgery to the Colombo General Hospital for the verification and clarity. Doctors in the government hospitals behave in friendly manner. There are no irrelevant tests prescribed by the doctors in government hospitals. The Sri Lankan government highly considers about the government hospitals and provide best free services to its citizens. These government hospitals are highly governing by the Ministry of Health under the supervision of the Sri Lankan government. Through the analysis of the above described reasons, the demand for getting treatment in the government hospitals is high in the study area.

#### **Prefer Private Hospitals/ Clinic Centres**

Though the government hospitals provide medical services, some considerable amount of elders prefer private hospitals/ clinic centres in the study area. The private hospitals/ clinic centres perform immediate surgeries and they provide extensive treatment. Private hospitals/ clinic centres provide personalised care for the patients and they have more doctors, nurses and advanced facilities. However, only limited amount of patients visits private hospitals/ clinic centres. Wealthy people in the community highly prefer private hospitals/ clinic centres to get

immediate treatment for their diseases without further delays. In this sense, private hospitals/ clinic centres have become the 'status symbol' that portrays the status of the people in the society. People trust that their social status has the connection with the preference of medical treatment. The status of the people is shown through the preference. The high status people with wealth and power prefer private hospitals/ clinic centres with the thought that they would get social respect from others.

The waiting time period in the private hospitals/ clinic centres is shorter compared to government hospitals. And there is no need to wait in long queue to get treatment here. Faster access to the best medical specialists is another reason for preferring the private hospitals/ clinic centres. The government hospitals have a system that the treatment should be done step by step which requires time. On the other hand, the private doctor immediately starts the treatment once he/she diagnosis the problem of the patient. And, they transfer or recommend the patients to the particular specialists and the treatment would be done within one day in the private hospitals/ clinic centres. Government hospitals have controls in visitors' time for the patients; visitors can only visit the patients in the morning, lunch time and evening. But in private hospitals/ clinic centres, visitors can visit any time where the patients are provided with separate rooms.

Private hospitals/ clinic centres comprise cutting edge technology. This would help the patient to get treatment immediately with modern and high technological facilities. The private hospitals/ clinic centres are less crowd and noisy. This environment hinders the elders to prefer the private hospitals/ clinic centres. Convenient visiting hours is also another reason for preferring private hospitals/ clinic centres. The wealthy people can remain at room and let the doctors' visit them for check-ups regularly in the private hospitals/ clinic centres. No doctors' harassment is found in private hospitals/ clinic centres. The private doctors and the staff provide services for money to public, so their hospitality is high. The doctors and the staff of the private hospitals/ clinic centres behave friendly with kind and care. They always put a smile on their face without hesitation. They answer the each and every questions and doubts of the patients.

Therefore, the wealthy elderly people of the study area prefer private hospitals/ clinic centres considering the convenient of them. The elders do not tolerate the pain and delay of their treatment and they are not willing to wait in the long queue. The elders prefer private hospitals/ clinic centres, if they have money.

#### **Prefer Medical Shops**

A few amounts of elders prefer medical shops to buy medicine for their disease. These elders do not often visit the doctors or the private clinic centres. The elders who prefer these medical shops are fallen in chronic diseases such as diabetics, asthma, body pain and cholesterol problems. They have adequate knowledge about their illness and had detailed discussion with doctors. Based on the doctors' advice and prescription, they used to buy medicines from the shops. They only have the medical prescription that have already provided by the doctors and buy the medicine whenever they want to take it. They simply go to the medical shops or they send the other family members or known person.

	Pla	ce for Tre	eatment							
Age	Gov hospital	vernment	clinic	Private		Traditional s centres	healers/	shop	Medical	Total
<u>()</u> (1	59			41		12			13	 125
60-64	47.2	2%		32.8%		9.6%			10.4%	100%
65-69	40			5		8			13	66
03-09	60.0	5%		7.6%		12.1%			19.7%	100%
70-74	8			5		6			8	27
70-74	29.6	5%		18.5%		22.2%			29.6%	100%
75-79	21			7		9			2	39
13-19	53.8	3%		17.9%		23.1%			5.1%	100%
Above	3			7		6			17	30
80	10%	<b>0</b>		13.3%		20%			56.7%	100%
Total	131			62		41			53	287
Total	45.6	5%		21.6%		14.3%			18.5%	100%
	Chi-Square			68.188						
	df			12						
	P-value			0.000 (S	5)					

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The result denotes that majority 60.6 per cent of the respondents in the age group 65-69 years, majority 47.2 per cent in the age group 60-64 years and majority 53.8 per cent in the age group 75-79 years utilize the services from government hospital for obvious reasons. The government hospital is funded totally by the government and there are services with free of charge to all people. But 56.7 per cent of the respondents in the age group above 80 years take medicines buying from medical shop based on their illness due to their familiarity with medical shop and medicines.

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the age of the respondents. The chi-square test for independence has been carried out and the results are presented in the above table. The computed chi-square statistic is 68.188 with a corresponding p-value of 0.000. Since the p-value is smaller than 0.05, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondents' age and preference of the place for medical treatment.

	Place for Treatment					
Sex	Government hospital	Private clinic	Traditional healers/ Religious centres	Medical shop	Total	
Mala	74	18	19	13	124	
Male	59.7%	14.5%	15.3%	10.5%	100%	
El.	57	44	22	40	163	
Female	35%	27%	13.5%	24.5%	100%	
Total	131	62	41	53	287	
Total	45.6%	21.6%	14.3%	18.5%	100%	
(	Chi-Square	22.194				
df 3						
F	P-value	0.000 (S	3)			

Table 03: Respondents' Sex and Place for Medical Treatment

Source: Primary data, 2020

The table illustrates the sex and place of treatment of the respondents. From this data, it is evident that majority 59.7 per cent of males and 35 per cent of the females visit government hospitals because there is no consultation fee for doctors. The close proximity also enable the males and females elderly respondents to avail the health facility from the government hospitals. According to the data, considerable numbers of females 27 per cent prefer to consult private clinic or nursing home in their neighbourhood. They do not come to hospitals because of the long distance and none of the family members go to the hospital. One fourth of females go to medical shop to purchase the drugs.

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the sex of the respondents. The chi-square test for independence has been applied to test the null hypotheses. The computed chi-square statistic is 22.194 with a corresponding p-value of 0.000. Since the p-value is smaller than 0.05, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondents' sex and the preference of the place for medical treatment.

	Place for Tre	eatment			
Education	Government hospital	Private clinic	Traditional healers/ Religious centres	Medical shop	Total
Illiterate	6	8	5	14	33
Innerate	18.2%	24.2%	15.2%	42.4%	100%
Primory	24	9	3	7	43
Primary	55.8%	20.9%	7%	16.3%	100%
Ordinary Level	43	24	16	16	99
	43.4%	24.2%	16.2%	16.2%	100%
Advanced Level	55	21	16	11	103
Advanced Level	53.4%	20.4%	15.5%	10.7%	100%
Degree/	3	0	1	5	9
Postgraduate	33.3%	0%	11.1%	55.6%	100%
T. (.)	131	62	41	53	287
Total	45.6%	21.6%	14.3%	18.5%	100%
	1	1	1	II	
Chi-Squa	re	33.422			
df		12			

## Table 04 : Respondents' Education and Place for Medical Treatment

<b>P-value</b> 0.001 (S)	<b>P-value</b> 0.001 (S)
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It is evident from the above table that the elders in the primary, ordinary and advanced level visit the government hospital for their medical treatment. The degree or postgraduate level highly educated and uneducated respondents visit the medical shops to buy medicine for their illness. The ignorance about the bad impacts and side-effects of medicine without the physician prescription may be the reason to buy the medicine from medical shop. The highly educated people buy the medicine from medical shop by using their knowledge and experience

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the education of the respondents. The chi-square test for independence has been carried out and the results are presented in the above table. The computed chi-square statistic is 33.422 with a corresponding p-value of 0.001. Since the p-value is smaller than 0.05, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondents' educational level and the preference of the place for medical treatment.

	Place for Tre	eatment			
Occupation	Government hospital	Privat	Traditional e healers/Religious centres	Medical shop	Total
	74	17	17	14	122
Farmer/ Coolie	60.7%	13.9%	13.9%	11.5%	100%
	25	18	6	19	68
Not Working	36.8%	26.5%	8.8%	27.9%	100
Working in Private Organization	19	2	9	7	37
	51.4%	5.4%	24.3%	18.9%	100%
Pensioner	4	8	5	7	24
rensioner	16.7%	33.3%	20.8%	29.2%	100%
Own Business	9	17	4	6	36
Own Busiless	25%	47.2%	11.1%	16.7%	100%
Tetal	131	62	41	53	287
Total	45.6%	21.6%	14.3%	18.5%	100
		I			
Chi-Squa	re	49.37	0		
df		12			
P-value		0.000			

# Table 05 :Respondents' Occupation and Place for Medical Treatment

The table shows respondents' occupation and the place of treatment. Majority 47.2 per cent of the respondents who engage in business activities resort to private clinics in order to save time, because they are always surrounded by busy schedule. In private clinic, the most specialized concern is given to the patients for quick cure and relief, but this is more general in government hospital. It is noted from the table that 33.3 per cent of the respondents who get pension visit the private clinic to get medicine and 20.8 per cent of them visit traditional healers/ religious centres for their treatment due to their faith in it.

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the occupation of the respondents. The chi-square test for independence has been used to test the null hypotheses. The computed chi-square statistic is 49.370 with a corresponding p-value of 0.000. Since the p-value is smaller than 0.05, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondents' occupation and the preference of the place for medical treatment.

	Place for Treatment					
Monthly Income	Government hospital	Pri clii	ivate nic		Medical shop	Total
D.1	85	41		26	34	186
Below Rs.15,000	45.7%	22.	0%	14.0%	18.3%	100%
Rs.15,000-	31	6		6	6	49
Rs.20,000	63.3%	12.	2%	12.2%	12.2%	100%
Rs.20,000-	7	13		6	7	33
Rs.25,000	21.2%	39.	4%	18.2%	21.2%	100%
A have Do 25 000	8	2		3	6	19
Above Rs.25,000	42.1%	10.	5%	15.8%	31.6%	100%
	131	62		41	53	287
Total	45.6%	21.	6%	14.3%	18.5%	100%
					II	
Chi-Square			19.089			
df			9			
P-value			0.024			

Table 06 : Respondents' Monthly Income and Place for	or Medical Treatment
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The above result explains the monthly income and the place of treatment. It is evident from data that majority of the respondents who have low monthly income utilize government hospital due to their financial limitation. The

government hospitals provide free services to all. Majority of the respondents who earn Rs. 20,000 - Rs. 25,000 visit the private clinics due to their financial condition. The private hospitals ensure better facilities and quality of services.

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the monthly income of the respondents. The chi-square test for independence has been applied to test the null hypotheses. The computed chi-square statistic is 19.089 with a corresponding p-value of 0.024. Since the p-value is smaller than 0.024, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondent's monthly income and the preference of the place for medical treatment.

Family	Place for Treatment					
Туре	Government hospital	Private clinic	Traditional healers/ Religious centres	Medical shop	Total	
Nuclear	72	50	24	34	180	
Family	40%	27.8%	13.3%	18.9%	100%	
Joint	59	12	17	19	107	
Family	55.1%	12.2%	15.9%	17.8%	100%	
<b>T</b> 1	131	62	41	53	287	
Total	45.6%	21.6%	14.3%	18.5%	100%	
				·		
Ch	ii-Square		12.245			
df			3			
P-value			0.007			

Table 07 : Respondents' Fami	ly Type and Place for Medical Treatment
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Source: Primary data, 2020

The above table shows the family type and place of treatment. The first choice of respondents who live in nuclear family and in joint family is government hospital. The second choice is private clinic for the respondents who live in nuclear family whereas medical shop is for those who live in joint family.

It is proposed to examine the validity of the null hypothesis Ho: The preference of the place for medical treatment is independent of the family type of the respondents. The chi-square test for independence has been carried out and the results indicate that the computed chi-square statistic is 12.245 with a corresponding p-value of 0.007. Since the p-value is smaller than 0.05, the null hypothesis of independence is rejected. Thus, it can be concluded that there is a relationship between respondents' family type and the preference of the place for medical treatment.

## **IV.** Conclusion

The findings indicate that the respondents choose government hospitals, private clinics, traditional healers/ religious centres and medical shops as a place for medical treatment. Majority 46.6 per cent of the respondents visit the government hospitals. Majority of the male elders visit government hospitals than female elders and often go for private clinics on account of long distances and need a person to accompany them. The higher educated and uneducated elders visit medical shops for getting treatment while the others prefer government hospitals. The findings indicate that 47.2% of the elders who engage in business and the 33.3% pensioners prefer private clinics. The respondents who have low monthly income utilize government hospital due to their financial limitation. Both respondents who live in nuclear and extended families choose government hospitals as the first choice of getting treatment and the second choice is private clinic for the respondents who live in nuclear family whereas medical shop are for those who live in joint family. The study ultimately concluded that the chi-squire test of independence shows that there is a relationship between age, sex, education, occupation, monthly income and family type of the respondents and the preference of the place for medical treatment.

## References

- Siddhisena, K.A.P. (2004). Demography of ageing in Sri Lanka. In *Ageing population in Sri Lanka: Issues and future prospects* (pp.7-44). Colombo, Sri Lanka: United Nation Population Fund (UNFPA) & Population Association of Sri Lanka (PASL).
- Siddhisena, K.A.P. (2004). Socio-economic implications of ageing in Sri Lanka: An overview (Working paper No. WP 105). Sri Lanka: Oxford institute of ageing working papers.
- 3. Siddhisena, K.A.P., & Ratnayake, K. (1998) Ageing of population and elderly care in Sri Lanka. *Sri Lanka Journal of Population Studies*, 1(1), 35-55.
- Janbandhu, P. V., & Bansod, D. W. (2015). Perceived Health Status. Health Problems and Health Care Expenditure of Elderly in India: An Analysis of NSSO Data. In N. Audinarayana, & J. Johnsi, *Ageing: Health and Care* (pp. 81-82). Chennai: TR Publications.

- Kuruvila, S., & Dhanasekaran, G. (2015). Care and Support during Hospitalization: Elderly Patients' Perspective. In N. Audinarayanana, & J. Johnsi, *Ageing: Health and Care* (pp. 57-58). Chennai: TR Publications.
- 6. Muhammad Mohsin, (2018). Why people prefer private hospital over government hospital in Pakistan. *International Journal of Current Research*, 10, (05), 69304-69308.
- 7. Rehim, K.R.& Raveendran, P.T. (2013). Tangibility and satisfaction at government hospitals in Kerala: Analyzing the patient's perspective. *Management in Health*, 17 (4), 25-27.
- 8. Jawahar, S.K. (2009). A study on out-patient satisfaction at super-specialty hospital in India. *Interact Journal of Medical Update*, 2(2), 13-17.
- 9. Perera Bilesha. (2011). Social support and social security issues of elders in Sri Lanka. *Galle Medical Journal*, 16(2), 20-23.
- Perera, M.W., Ostbye, T., Rajapakse, H., Ranabahu, S., & Maselko, J. (2015). Perceptions of successful ageing in Sri Lankan older people: A qualitative study. *Asian J Gerontol Geriatr*, 10, 22–30.
- Perera, R. (2004). A sociological study on elderly care in an urban community in Sri Lanka. Proceedings of the Second Academic Sessions. Retrieved from <u>http://www.ruh.ac.lk/research/</u> academic\_sessions/2004\_mergepdf/142-146.PDF
- 12. Virk, A., Kaila, M. & Gupta, B.P. (2013). A study to evaluate patient expectation and satisfaction in a tertiary care teaching hospital. *Healthliac*, 4 (2), 19-25.
- 13. Waweru, L.M., Kabiru, E.W., Mbithi, J.N & Some, E.S. (2003). Health status and health seeking behaviour of the elderly persons in Dagoretti division, Nairobi. *East African Medical Journal*, 80(2), 63-67.
- Odion, M. Odaman., & Ibiezugbe, M.I. (2014). Health seeking behavior among the elderly in Edo Central Nigeria. *International Review of Social Sciences and Humanities*, 07(1), 201-210.