

# **Impact of Gender on Health Care Access and Social Determinants of Health for Older Persons in Pakistan**

**IFA Conference Hyderabad, India  
June 13, 2014**

**Grace Clark, PhD.**

**Dean of Social Sciences and Professor, Forman  
Christian College (A Chartered University)**

**Lahore, Pakistan**



# Goals of the study

- To consider access to health care for older people.
- To identify problems in health care access for all older persons
- To identify differences between older men and older women in health related practices that affect health care access
- To identify social factors that relate to access to health care
- Identify questions and issues for future research
- Provide data for policymakers





# Today's presentation-

- Background of study
- Demographics
- Access to health care delivery
- Social factors that limit access to health care
- Conclusions

# Previous work

- Pakistan National Aging Survey – 2000, 2001, 2003, 2008- Clark, Haider, and Ghafoor
- Punjab Aging Study – 2011- M. Nizamuddin, U. of Gujrat.



# Methodology for this study

- Four semi-rural sites in Punjab
- Age 60 years and older
- Oral interview in Urdu or Punjabi by FCC Sociology faculty and majors trained in interviewing
- Mostly, men interviewed men, women interviewed women
- Attempted to interview all older people in the village at research sites. Snowball sampling.

# Demographics



# Proportion of sample by gender

- 222 Men 60% of sample
- 149 Women 40% of sample
- Women are somewhat underrepresented, although in Pakistan there are more older men than older women, and that this disparity increases for every five- year age cohort after age 45.

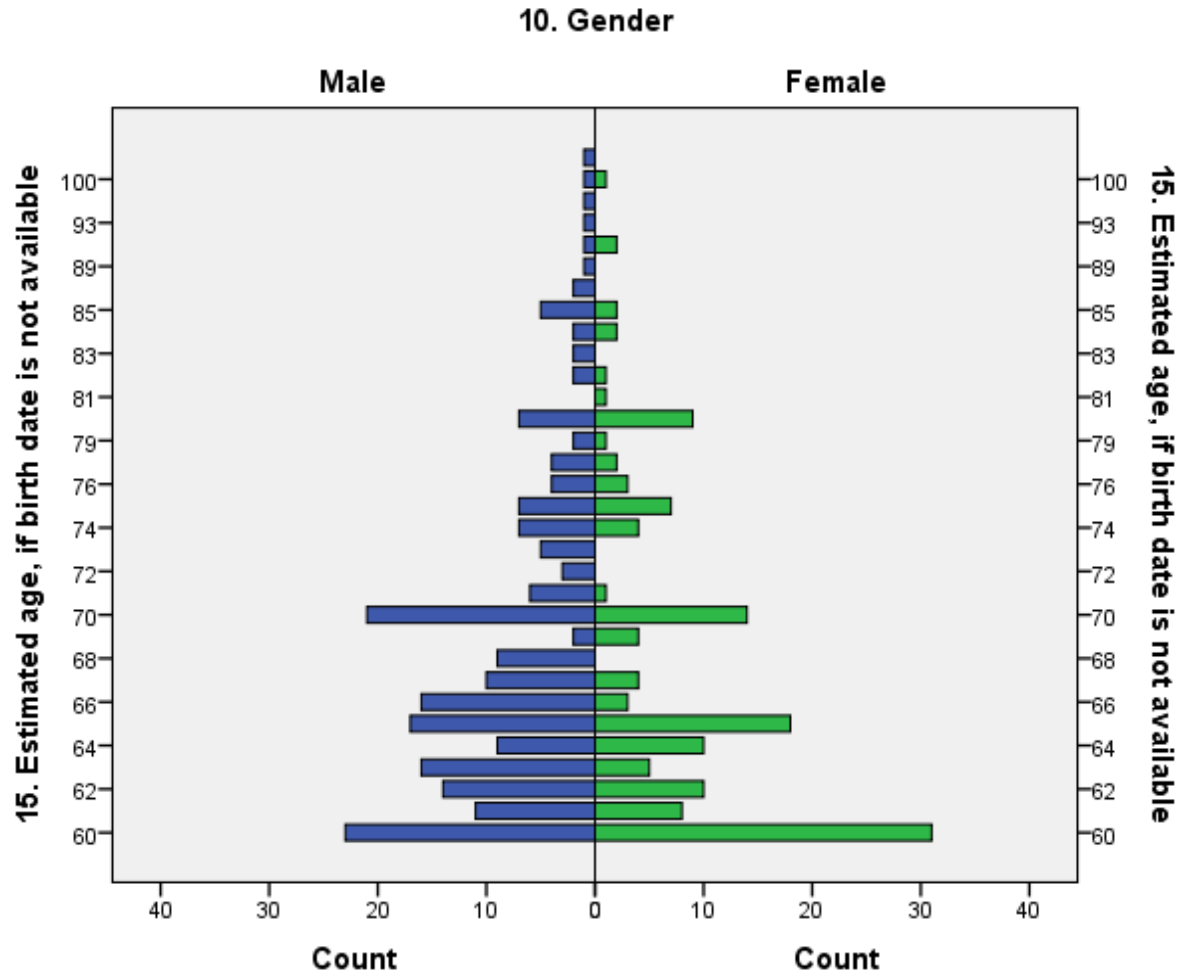


# Average Age of Older Persons in this Study

- Men 68.70 Years
- Women 67.62



# Population pyramid for sample





# Marital Status

## Men

- Single 10
- Married 157
- Divorced 10
- Widowed 39
- Missing 6

## Women

- Single 1
- Married 79
- Divorced 5
- Widowed 62
- Missing 3



# Education

## Men

No formal  
schooling

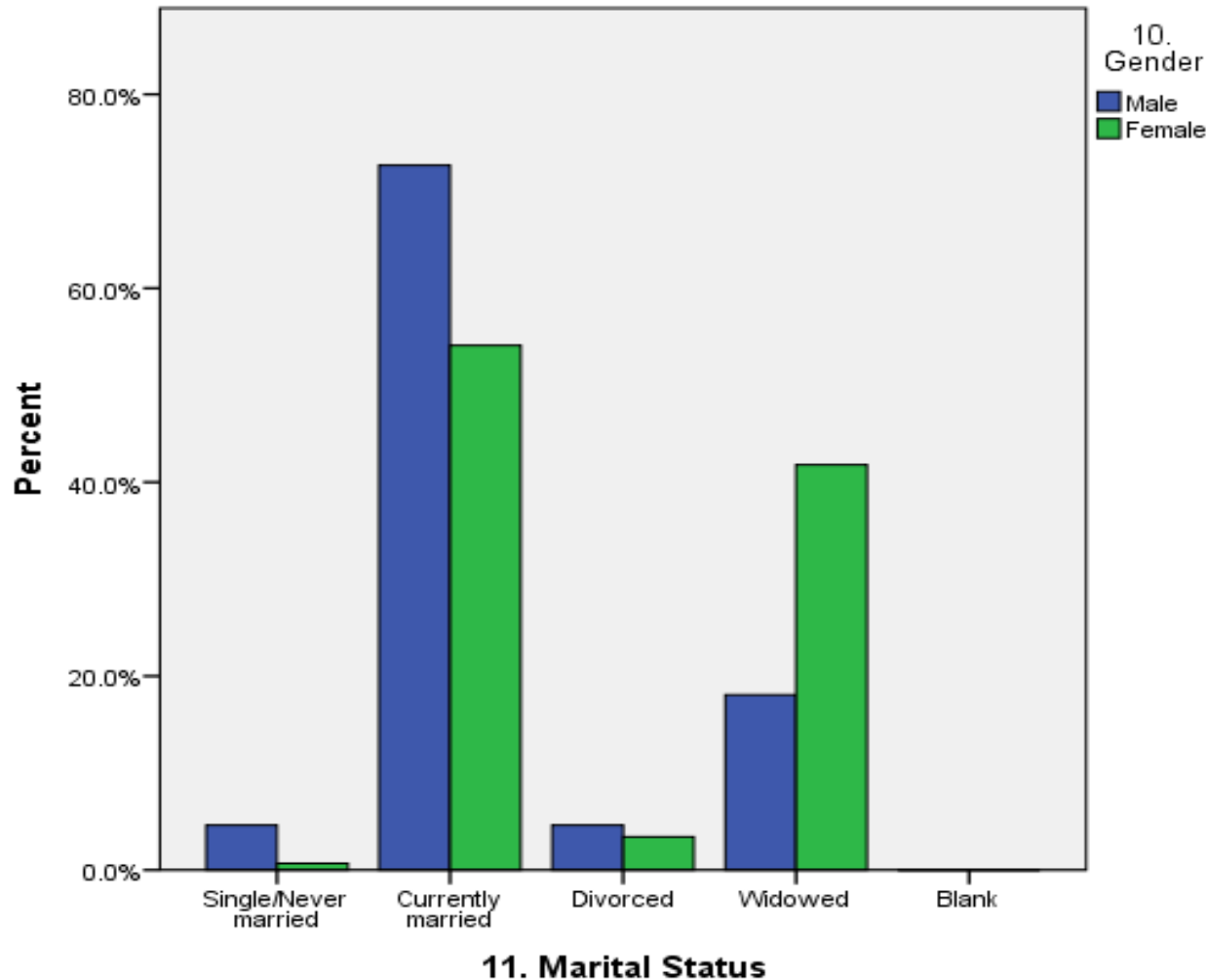
60%

## Women

No formal  
schooling

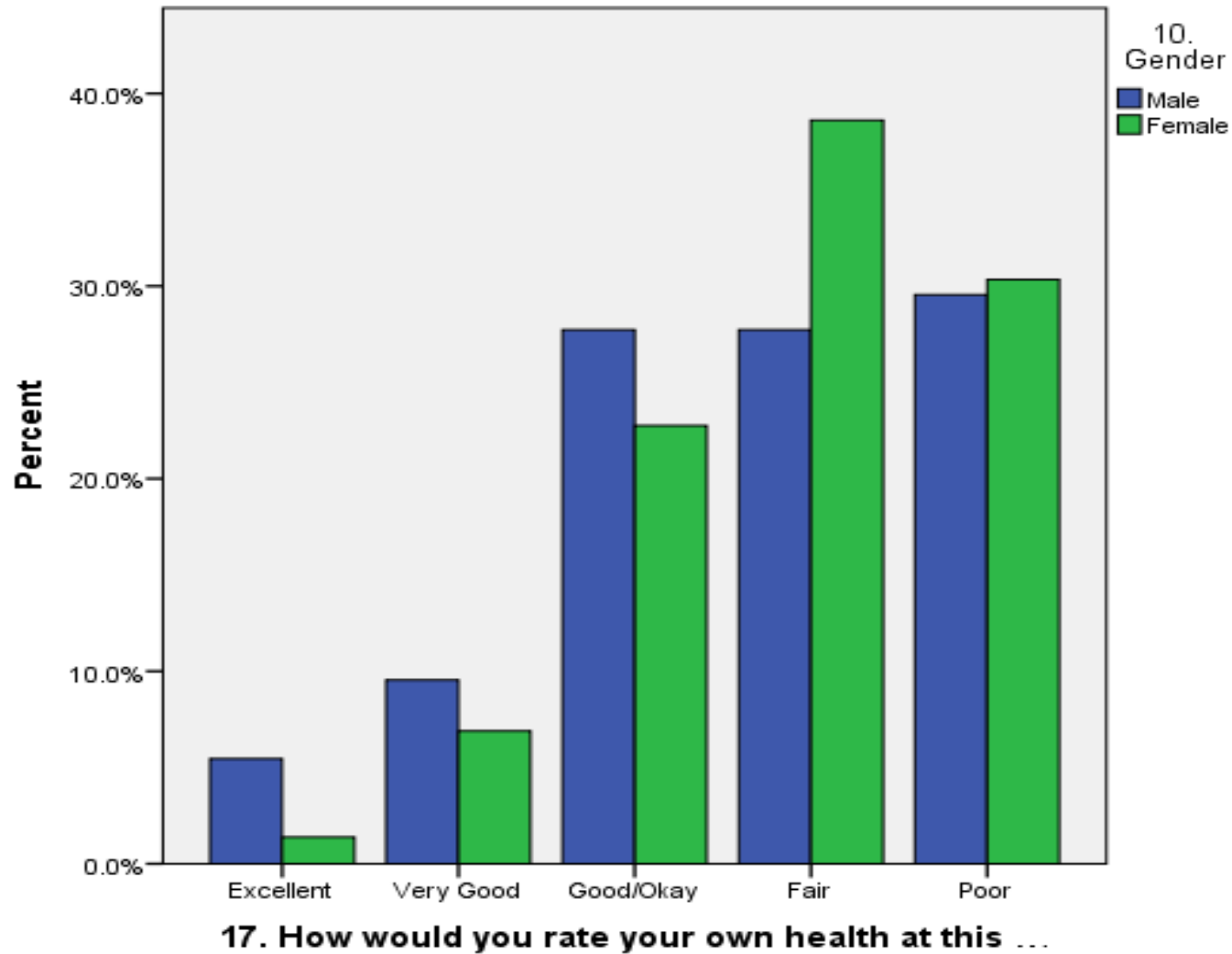
91%

# Marital Status by Gender



# General Health and Well-being

# Self-rated Health



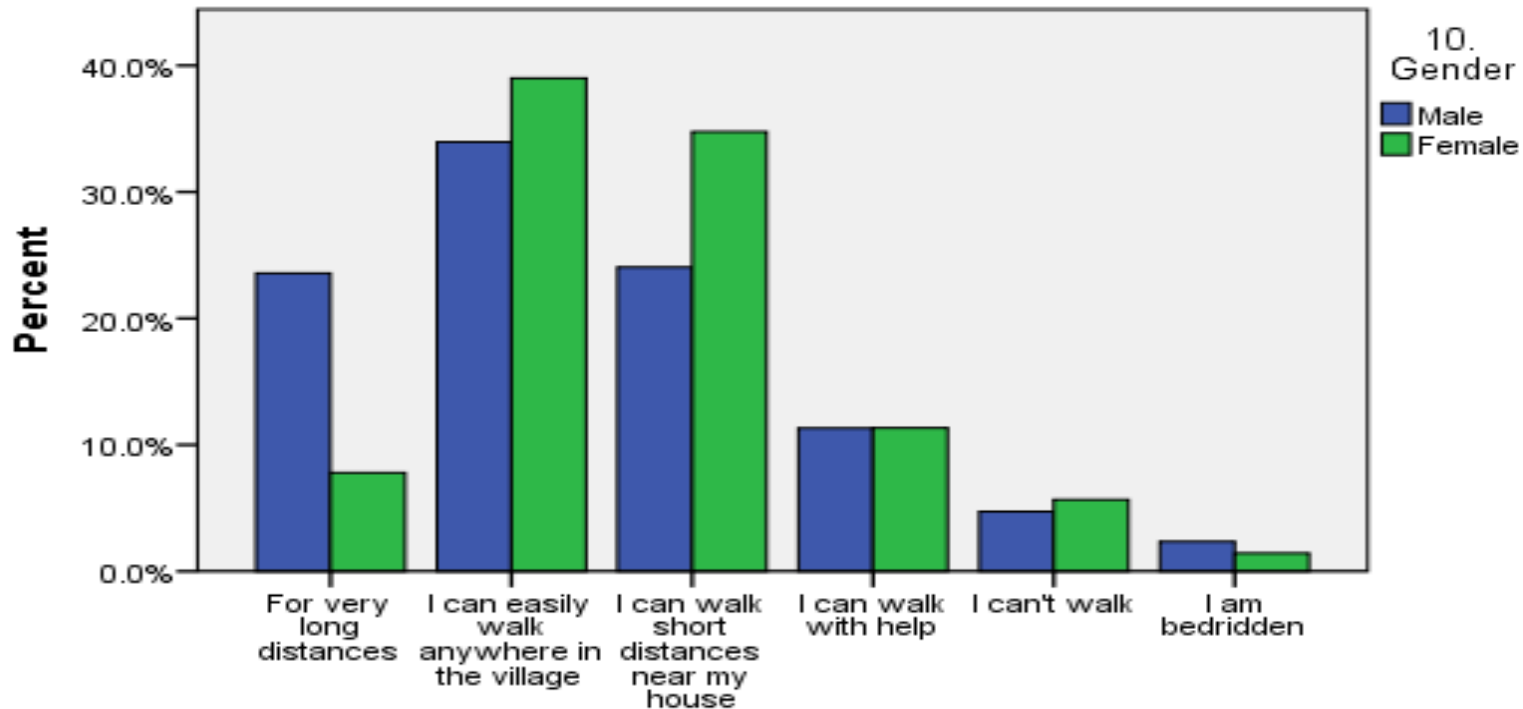


# Most common self-reported health issues

- High Blood Pressure
- Heart Disease
- Arthritis/Joint Pain
- Diabetes
- Asthma/difficulty breathing
- Kidney disease
- Difficulty seeing and hearing
- Lack of teeth
- Hepatitis
- Cancer



# Ability to walk alone



**18. How well are you able to walk on your own?**

# Wear glasses

## Men

- Yes 53
- No 140

## Women

- Yes 51
- No 84



# Why not?

- Don't want them 90
- No money 51
- No one to take me 17
- Difficult to put on 4
- Other 4



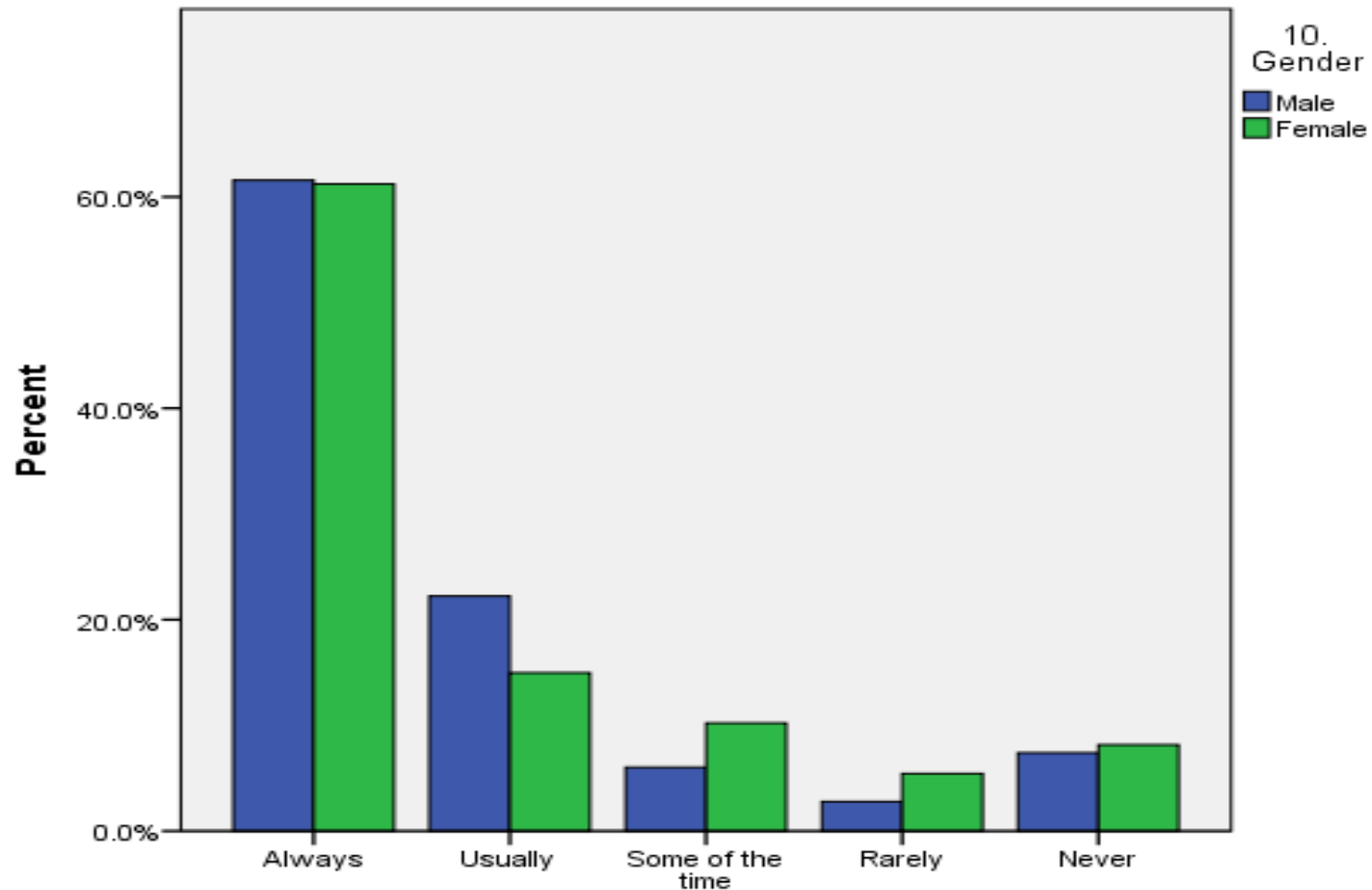
# Difficulty hearing

- Yes 37%
- No 63%

# Wear a hearing aid?

• Yes	13	4.8%
• No	259	95.2%

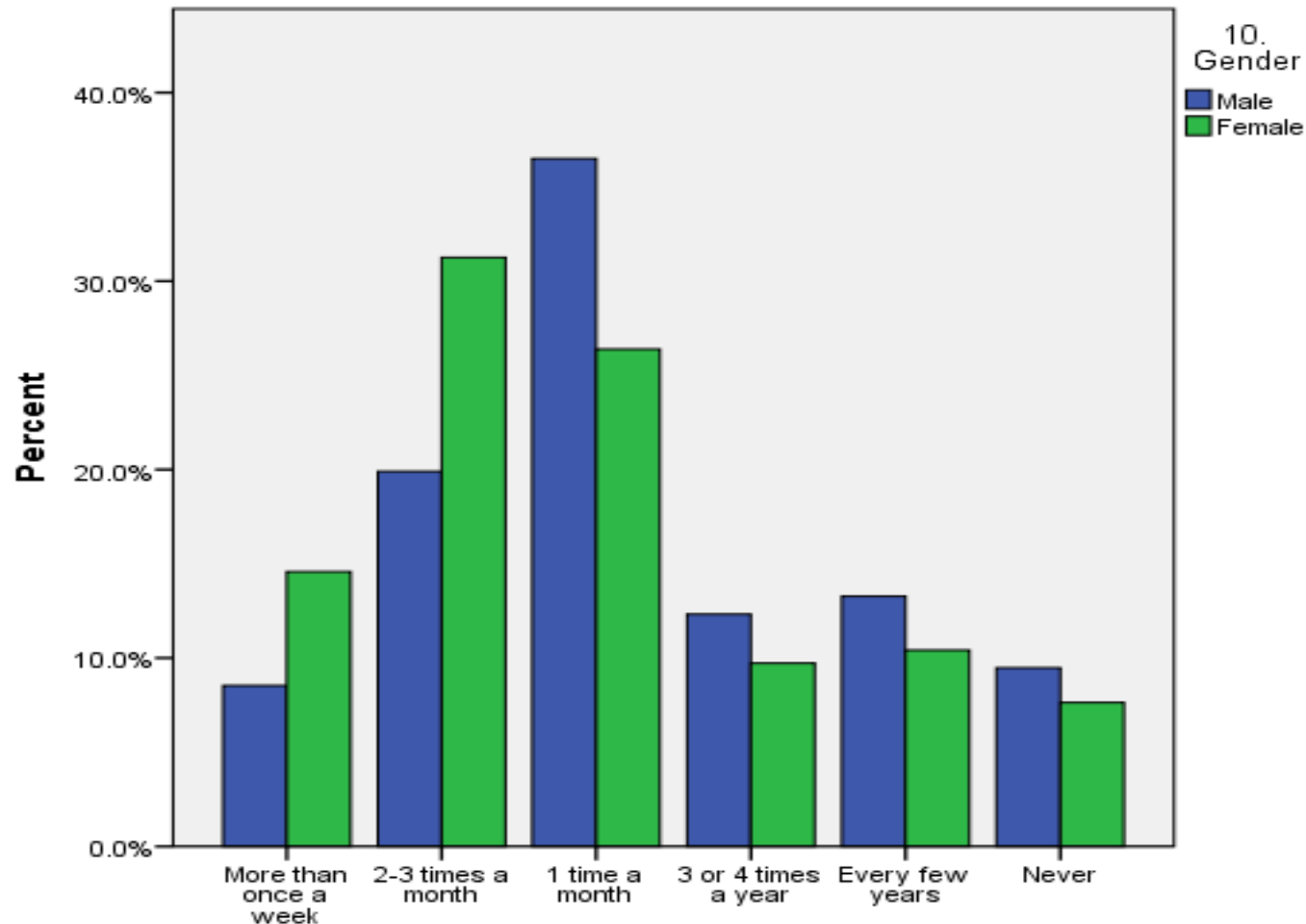
# Family care when sick?



29. Does your family take care of you when you are sick?

# Accessing Health Care Seeking Behavior

# How often go to doctor?

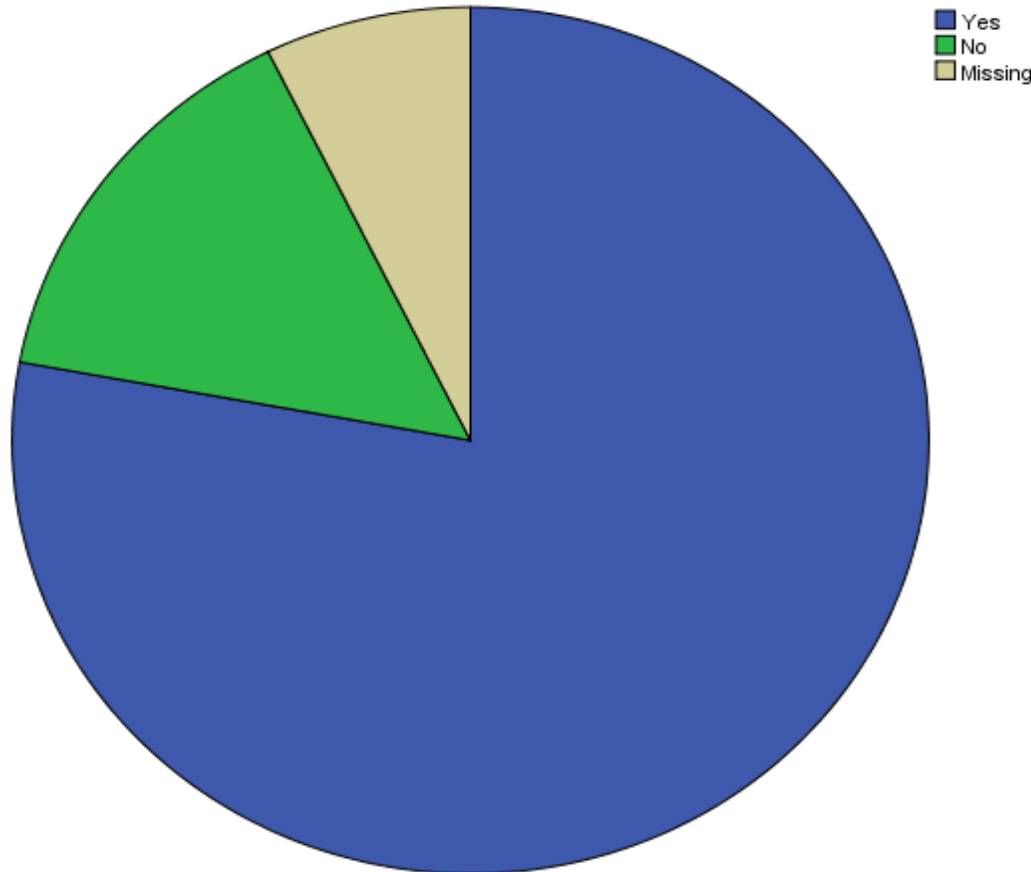


36. How often do you go to the doctor?

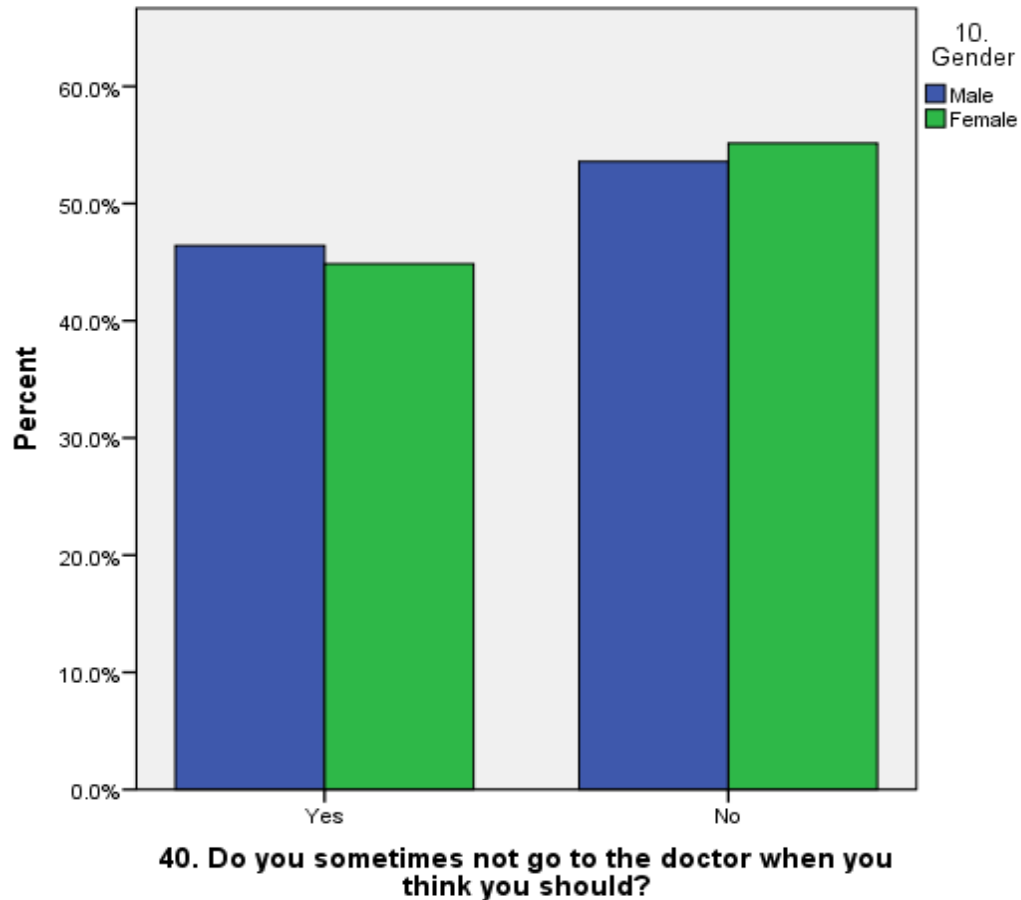


# Only go to doctor when something is seriously wrong?

37. Do you only go to the doctor when something is seriously wrong?



# Sometimes not go to doctor

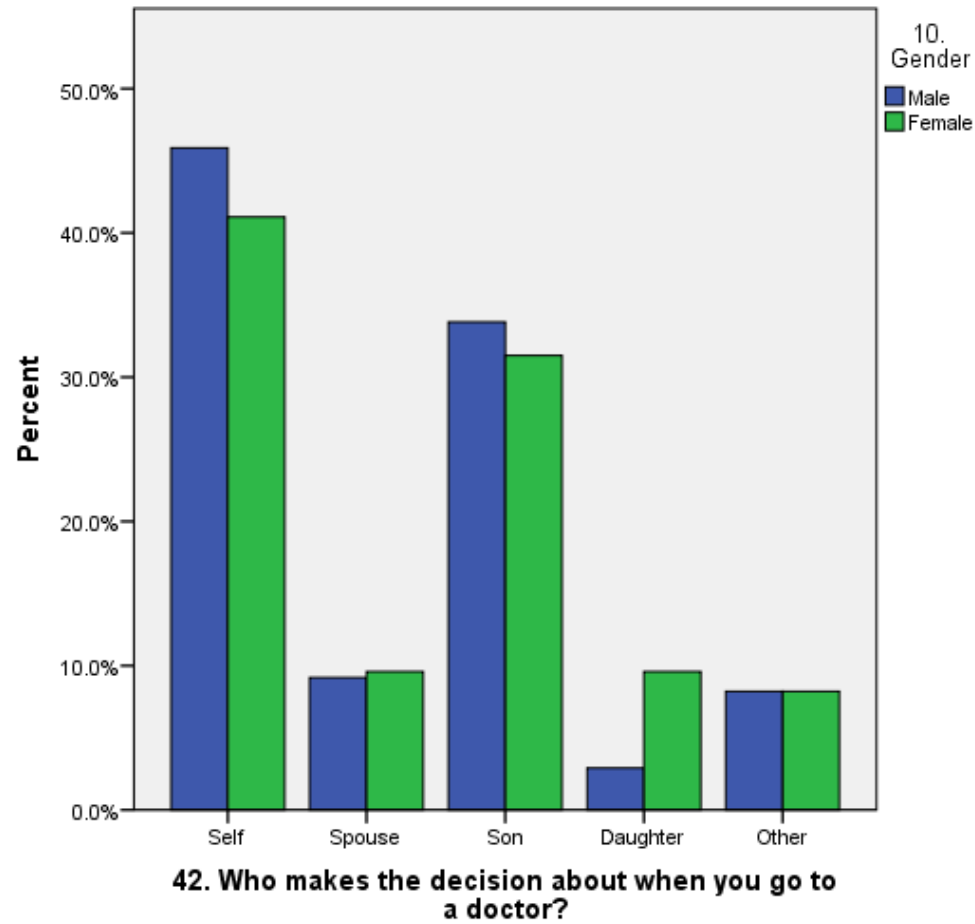




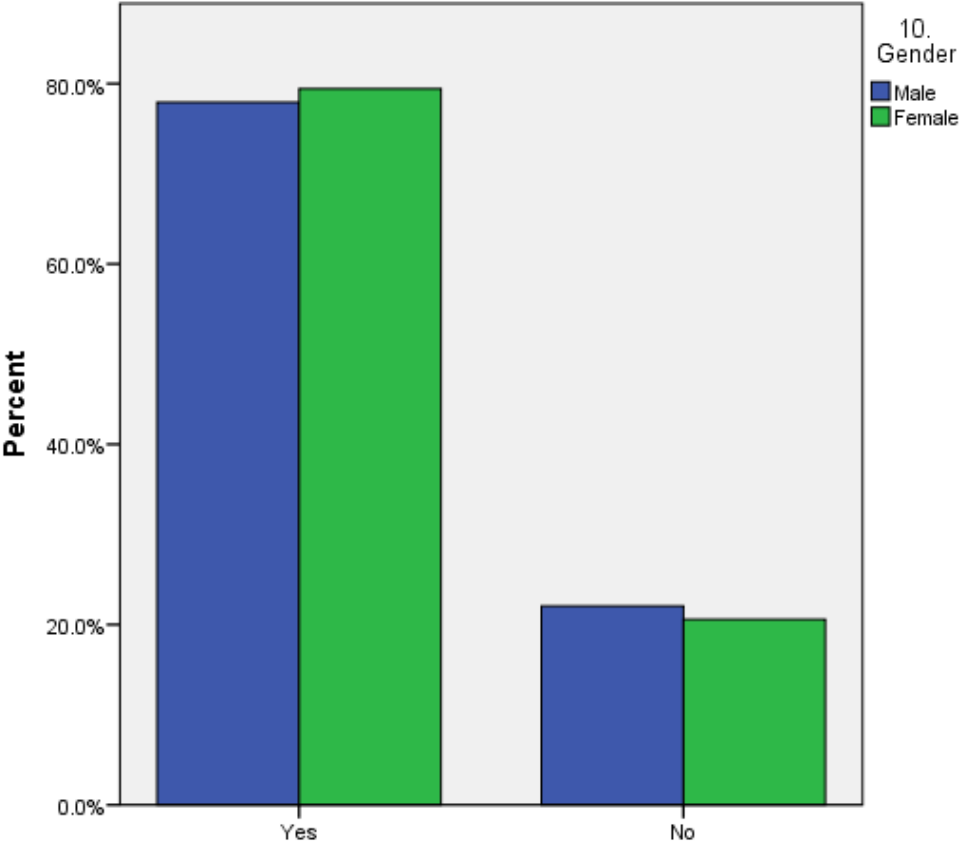
# Why not?

- Not enough money 124
- Afraid what the doctor will tell me 23
- No transportation 16
- No one to take me 8
- All other 5

# Decision-maker on health care

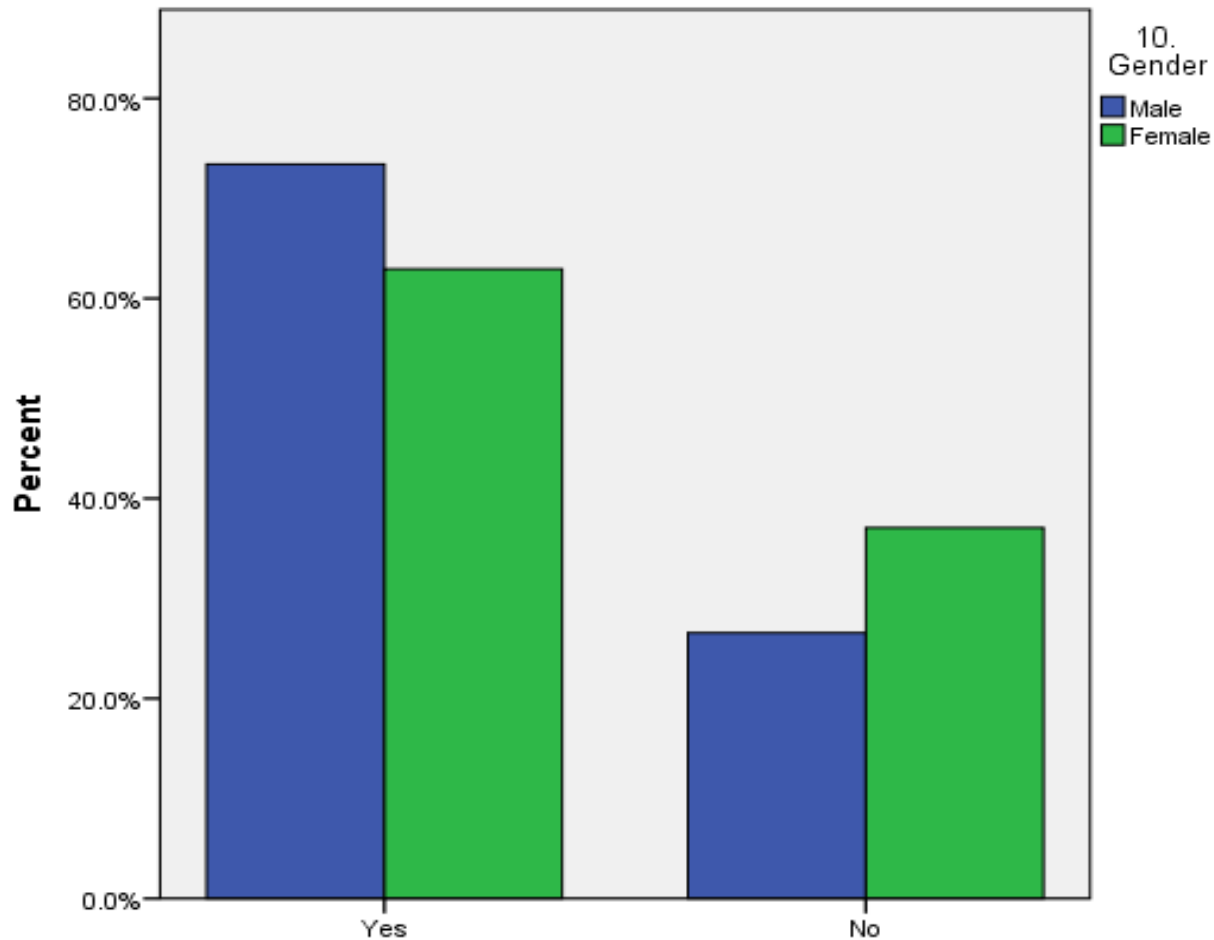


# Will family take you to the doctor when needed?



44. Do you feel that your family will take you to the doctor whenever you need to go?

# Family allow you to go by yourself



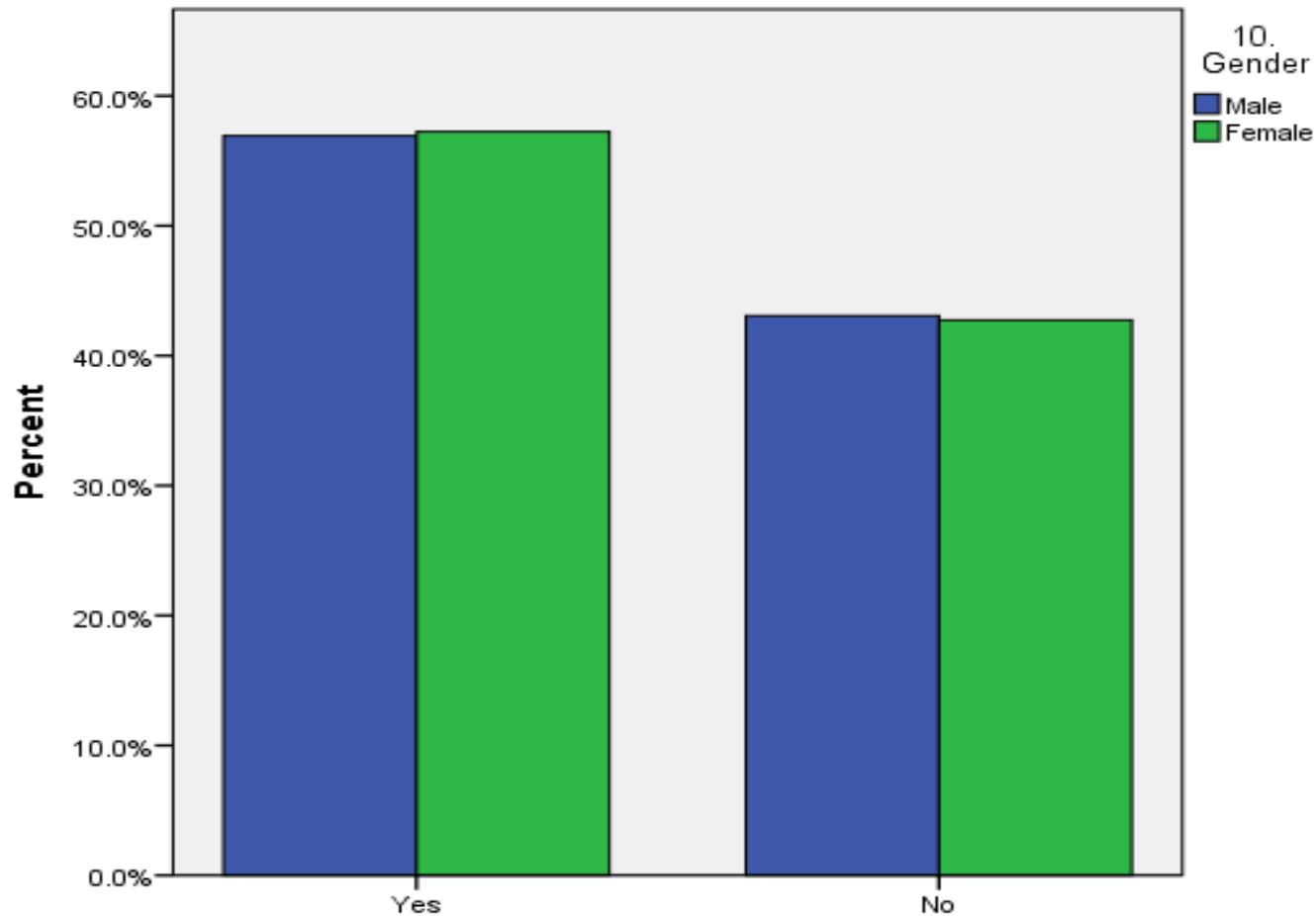
**47. Are you allowed to go to the doctor without someone from your family with you?**



# Time to nearest Emergency Room

- 5 minutes to 2 ½ hours
- Depends on type of transport
- Depends on where they go
- Poor question to people who don't measure time in minutes, much less kilometres
- Future surveyers should measure the time themselves

# Need to pay for emergency transport?




**54. Would you or your family need to pay someone to take you to an emergency room?**





# How much?

- Wide range from Rs. 30 to Rs. 15,000
- About 30% don't know at all
- More women than men didn't know how much.



# If you didn't go to emergency room, Why not?

- Couldn't afford it 50.4%
- Too weak to travel 10.6%
- No one to go with me 5.5%
- No transportation 4.2%
- Went to Doctor instead 30.6%

People do the best they can to get older relatives to medical care





# Night in Hospital in last three years?

- Yes 124 36%
- No 221 64%



# Who paid for hospitalization by gender?

## Men

- Self 44
- Spouse 4
- Son 59
- Other relatives 2
- Gov't insurance 13
- Private insurance 1
- Others 6

## Women

- Self 16
- Spouse 14
- Son 33
- Other relatives 3
- Gov't insurance 6
- Private insurance 0
- Others 7

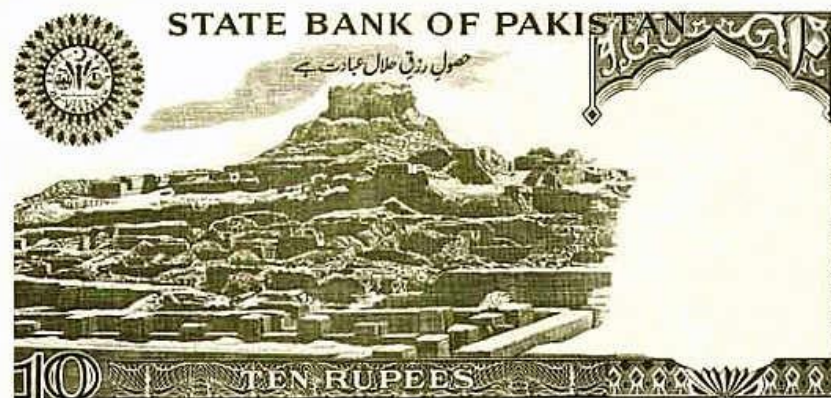


# Always able to buy medicine?

- Yes 40%
- No 42%
- Didn't answer 18%

# Why not?

- Cost 148
- Didn't think it was necessary 14






# Respect from medical personnel

- Always 42%
- Usually 25%
- Sometimes 14%
- Rarely 9%
- Never 3%
- Blank 9%






# Do doctors explain what is wrong so you understand?

Always	127
Usually	99
Sometimes	55
Rarely	41
Never	17



# Are treatment and options explained?

Always	98
Usually	95
Sometimes	59
Rarely	41
Never	38



Do you do a breast self exam  
regularly?

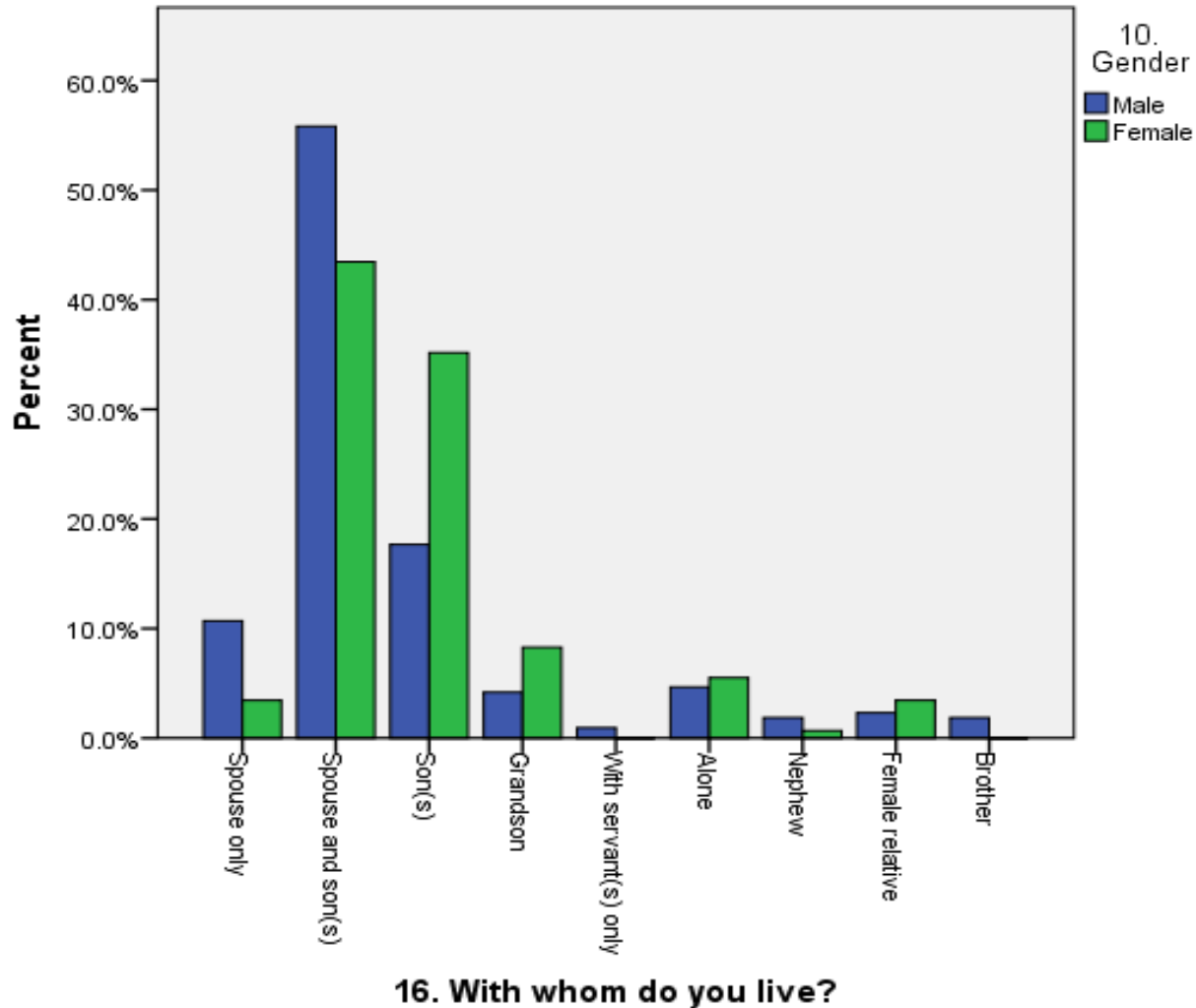
Yes	20
No	88
Don't know how	15
Sometimes	12

# Breast tumor?

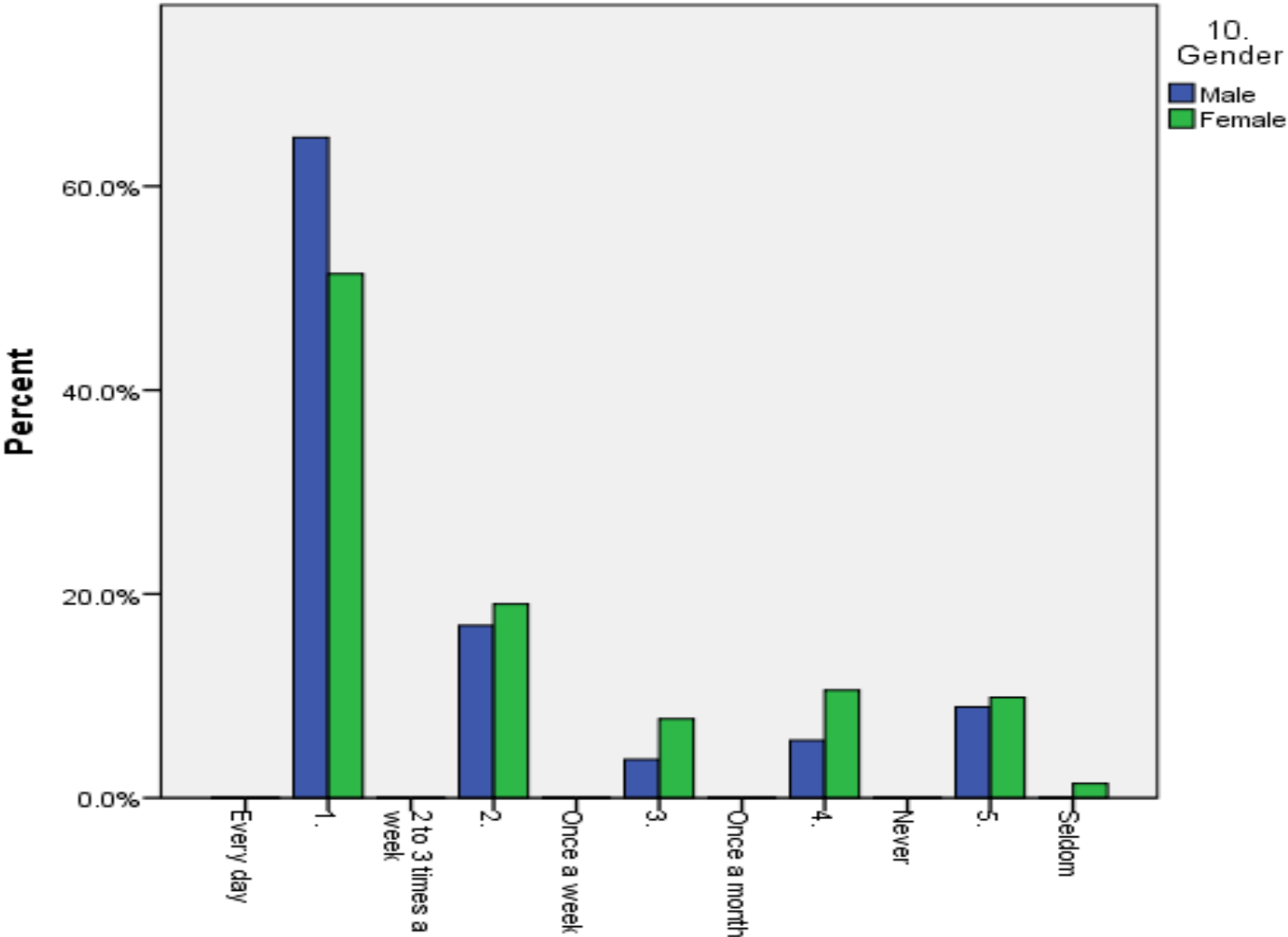
- No 109
- Yes 6
- Still have one 2

Social factors affecting  
access  
to health care

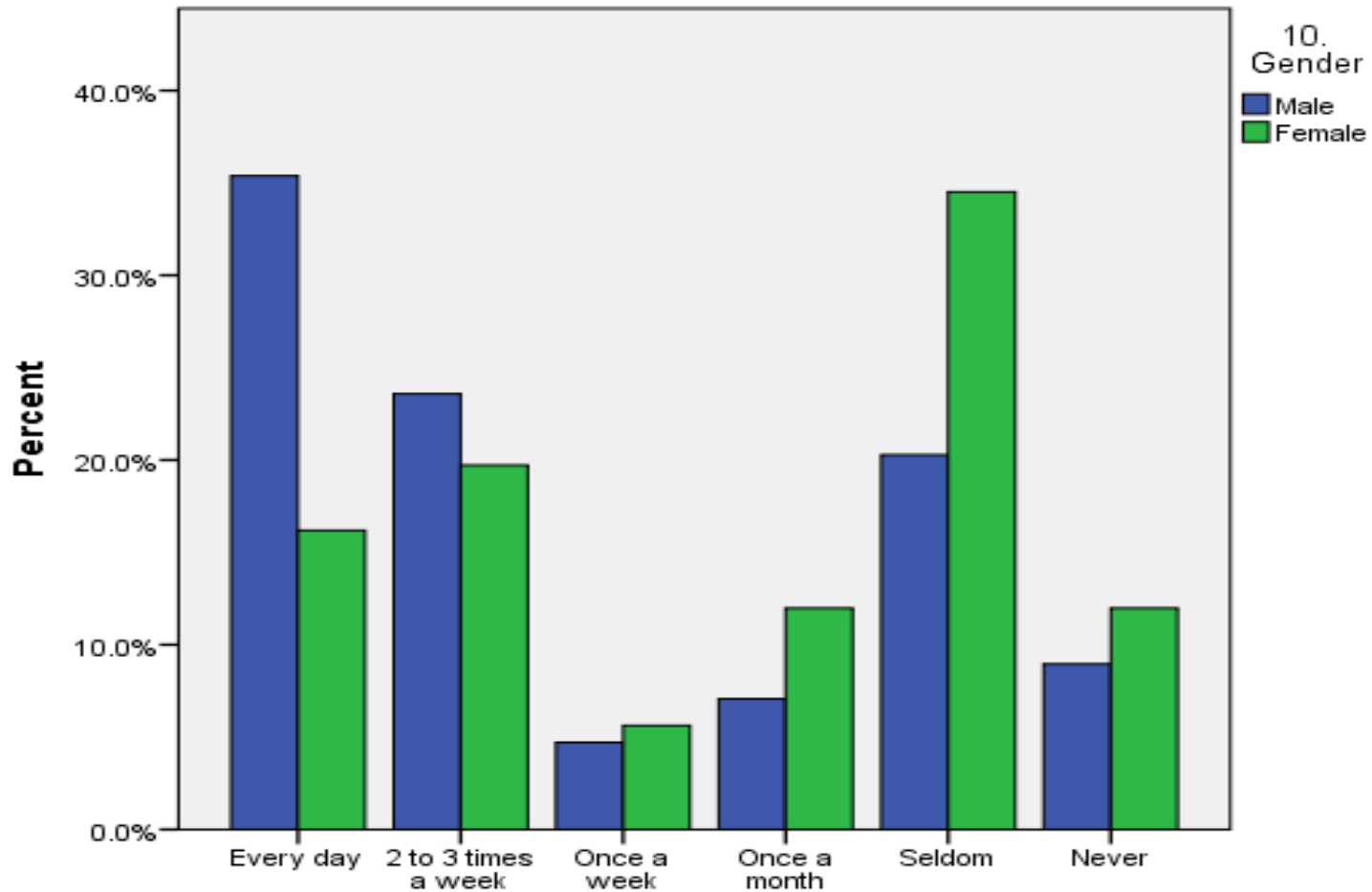
# With whom do you live?



# How often do you go outside?



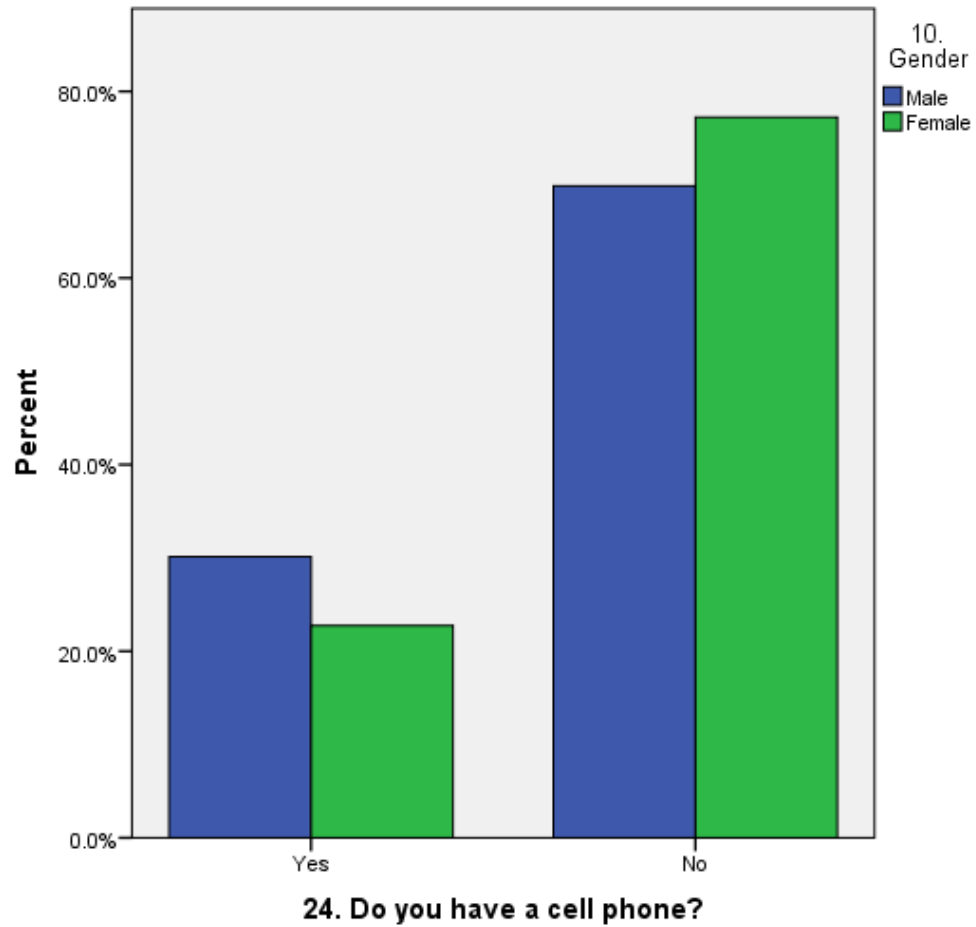
# Frequency of meeting with same age peers



**23. How often do you meet with friends your own age who are non-relatives and have shared many experiences with you?**



# Cell phone? By gender





# Self rating of Diet

- Excellent 43
- Good 110
- Fair 129
- Poor 51
- Inadequate 25

# Cause of Inadequate Diet

- Men

- Not enough meat 64%
- Not enough fresh fruits and vegetables 25%
- Can't cook for myself 0%
- Not enough food 9%



- Women


- Not enough meat 22%
- Not enough fresh fruits and vegetables 44%
- Can't cook for myself 2%
- Not enough food 30%



# Men and boys eat first?

- Men
- Yes 127
- No 81
- Women
- Yes 93
- No 53





Do you feel comfortable telling  
son or husband about female  
troubles?

Yes	44
No	63
No, but would if sick	21



# How often do you eat meat?

- Every day 11
- 3 times a week 55
- 1x week 0
- 1 x month 0
- Only special occasions 128
- Never 24



# Social Factors Affecting Health

- Lack of money
- Someone else is paying
- Lack of knowledge about good health habits
- Lack of knowledge about common diseases
- Failure to see a doctor except for acute, serious problem (No identification of health issues and regular monitoring)
- Lack of glasses, hearing aids
- Lack of knowledge about breast cancer, incontinence



# Conclusions

- Both men and women need more knowledge about health
- Both older men and women have limited access to health care
- Cost is a major factor for both
- Older women more often have a male relative making decisions about health care than older men
- Older women more often have someone else paying for their care
- Older women face more social obstacles to good health





# Women face special cultural restrictions

- Less education
- More frequently widowed
- Lifetime high birth rate takes its toll
- Often need permission to leave the house
- Often dependent on male family member for permission to go and for escort
- May not be allowed to see male doctor
- Not a priority for spending money on health care, as not usually a wage earner
- Men and boys eat first
- Insufficient food



# Questions for continued exploration

- What is the situation of the very old?
- How is the situation of older widows different from that of older married women?
- What relationship does continuity of work have to health?
- How far is it to the nearest emergency room and how long does it take to get there by various modes of transport?
- What are the factors that men consider in accessing health care for themselves and the women in their family, and what moves this decision in favor of health care?



# More questions for further research

- Are the people who go for checkups ones who already know they have a serious condition?
- How would people respond to health education programs?
- How do we work better with families to explain some of the special considerations needed for older persons, especially if they love them.
- There is a need for extensive qualitative as well as more quantitative work needed to understand these relationships.

# Recommendations





# Recommendations

- Mobile clinics for screening, monitoring, and dispensing of basic medicines.
- Health education (same mobile units) on diet, exercise, need to meet with peers, need to go to doctor for prevention, self-exams, what to report to doctor
- Special programs targeted to men in older women's families about the women's health needs, esp. breast cancer and incontinence
- Support for old-age clubs to help with education and help meet with same age peers
- Use cell phones for public service verbal messages and info
- Encourage and support university student volunteers to help elders and to learn about aging
- Improve diet
- Pensions for very old women (75 plus) to give status and to pay for health care and food.