

Women Healthcare Expenditure in Punjab

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ABSTRACT

Women health has remained comparatively a neglected area. Women utilize health care resources to a lesser degree than men and they get affected by various types of diseases. Also, awareness regarding diseases, its symptoms and risks are insufficient among them. The objective of the paper is to examine the extent of diseases among women and their expenditure level on diseases. The Chi-square test has been applied to know the association between various socio-economic characteristics of the women respondents. The socio-economic characteristics like age of women respondents, their housing structure, family structure, education level, employment status and income level have been examined. It has been found that women have been ignoring their health issues and spending very less on diseases. On the basis of findings of this study the women education and income level are required to enhance.

KEYWORDS: Health, women, expenditure, diseases

INTRODUCTION

Healthy and empowered women are the finest assets of any society. In the 21st Century, though women enjoy more autonomy and power than ever before, but they are still disadvantaged when compared to men in all aspects of life. They are deprived of equal access to education, healthcare, capital/property and decision-making powers in the political, social and economic sectors. They are entitled to a lower size of household resources due to their weak bargaining power within the household. Therefore, they utilise health care resources to a lesser degree than men. Women with low educational status, living in rural areas face several difficulties regarding their access to advanced medical facilities (Gupta, 2018). Due to this, women get affected by various types of diseases like- obesity, cardiovascular diseases, hypertension, diabetes mellitus, arthritis and osteoporosis, cancer, malaria, leprosy, HIV/AIDS and more which are the main leading cause of death among them globally (WHO, 2008). In Punjab, women are disadvantaged in case of health care due to social, economic, and cultural factors those directly influence their health and hinder their access to health related awareness. That means, they spent less on their health. Also,

male child received better health care services as compared to girls in most of the rural areas of Punjab (Das Gupta, 1998). All these issues point towards the poor health status of women. They lack the access to main services needed for their good health (World Bank, 1996). All this point out the need for creating awareness and developing healthy attitude among women toward diseases so that women may have a good living and contribute in the process of economic development.

Objectives of the Study

The objective of the paper is:

1. To examine the extent of diseases among women and
2. To study the healthcare expenditure of women.

Research Methodology

The primary data have been used to analyse the type of diseases faced by women and their expenditure level on diseases in the Punjab state during 2019. The study is confined to two districts i.e. Hoshiarpur and Mansa selected on the basis of highest and lowest literacy rate, as per 2011 Census. Information was collected from 500 women respondents residing in

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urban as well as rural areas of both the selected districts. Survey method was used to get the required information. A well designed and pre-tested questionnaire was used for the study. An effort has been made in the present study to examine the relationship between age, education, income, employment, standard of living of the respondents with expenditure on diseases. For the presentation and analysis of the data, statistical tools like Per cent ages and Chi-square test have been used.

Results and Discussion

Socio-economic characteristics of the respondents

The socio-economic characteristics of the women respondents include their age, housing structure, family structure, education level, employment status, income level and expenditure done on diseases. As revealed by Table 1, majority of the women respondents i.e. 45 per cent were young and belonged to age group 20-40 years. Near about 76 per cent of

women respondents were living in their own houses whereas 24 per cent lived in rented house. 56 per cent of women had joint family structure. 48 per cent of women respondents belonged to Sikh community whereas 41 per cent respondents belonged to Hindu and 11 per cent to other religions. Near about 40 per cent of women were qualified up to matriculation level. Very few of them were qualified up to post graduate level i.e. 8 per cent whereas 21 per cent of them were illiterate. Majority of women respondents i.e. 65 per cent of them were housewives and were dependent on their husbands/parents for meeting their economic needs. Near about 50 per cent, 41 per cent and 9 per cent women had average, good and bad living standard, respectively. Majority of women lived in the lowest income group i.e. up to Rs. 10,000. In case of expenditure done on diseases, 36 per cent of women spent between below Rs. 1000 per month.

Table 1-Distribution of sample according to their socio-economic characteristics in the study area

n=500

Sr. no.	Socio economic characteristics	Women respondents	
		Frequency	Per cent age
1.	Age group		
	20-40 years	225	45
	40-60 years	204	40.8
	60-80 years	71	14.2
2.	Housing structure		
	Own	381	76.2
	On rent	119	23.8
3.	Family structure		
	Nuclear	220	44
	Joint	280	56
4.	Religion/Caste category		
	Hindu	206	41.2
	Sikh	239	47.8
	Muslim	37	7.4
	Parsi	18	3.6
5.	Education Level		
	Upto Matric	200	40
	Senior Secondary	69	13.8
	Graduation	66	13.2
	Post Graduation	41	8.2
	Other qualification	19	3.8
	No education	105	21
6.	Employment Status		
	Wage employment	103	20.6
	Self employment	72	14.4
	Unemployed/Housewife	325	65

7.	Income Level (in Rs.)		
	Upto 10,000	392	78.4
	10,000-20,000	45	9
	20,000-30,000	34	6.8
	30,000-40,000	12	2.4
	Above 40,000	17	3.4
8.	Standard of living		
	Good	205	41
	Average	251	50.2
	Bad	44	8.8
9.	Range of expenditure (in Rs.)		
	Up to 1000	181	36.2
	1001-2000	181	36.2
	2001-3000	80	16
	3001-4000	28	5.6
	4001-5000	19	3.8
	Above 5000	11	2.2

Field survey, 2019

Extent of diseases

In this research study, it has been found that women were suffering from various type of diseases. Among all diseases, BP& Depression has been found more common among the sampled women respondents. Research Study shows that out of 500 women respondents 23 per cent of them were facing Sugar & BP, BP, Cholesterol and Depression, 17.4 per cent from Sugar, 12.6 per cent from the problem of Arthritis/joint pain & back pain and 11 per cent women respondents were suffering from Cervical/Migraine. Out of 500, 49 women respondents i.e. 9.8 per cent were suffering from Asthma/Thyroid. Heart/Stroke related problems covered the 7.6 per cent of women respondents whereas 4.4 per cent women were suffering Cancer. 14.2 per cent women were suffering from various diseases like- allergies, kidney, liver related diseases which have been considered under the category of other (Table 2).

Table 2: Type of disease faced by women respondents

1.	Types of diseases	No. of Women	Per cent age
	Sugar	87	17.4
	Cervical, Migraine	55	11
	Depression, BP, Cholesterol, Sugar+BP	115	23
	Asthma, Thyroid	49	9.8
	Arthritis/Joint pain, Back pain	63	12.6
	Heart, Heart+BP, Stroke	38	7.6
	Cancer	22	4.4
	Other diseases	71	14.2

Field survey, 2019

In order to examine the degree of association between the type of diseases faced by women with various determinants like age, education, income, employment, living standard of the respondents and their expenditure on diseases, Chi-square test has been applied at 5% level of significance. Table 3 shows that in case of association between type of diseases faced by women has been found to be positively correlated with various determinants. The Chi-square test shows that there is a significant association between age, education, income, employment status, expenditure level and living standard with the type of disease faced by women respondents.

Table 3: Association of type of diseases with various determinants of women respondents.

Determinants	Calculated Chi-Square Value	Degree of freedom	Table value of Chi-Square	Remarks
Age	59.84	14	23.7	S
Education	102.37	35	49.8	S
Employment status	34.33	14	23.7	S
Income level	49.98	28	41.3	S
Standard of living	64.7	14	23.7	S
Expenditure level	162.99	35	49.8	S

Field survey, 2019

Note: S=Significant: $P < 0.05$; NS=Not significant: $P > 0.05$ tested at 5% level of significance.

As we talk about the women expenditure on diseases it has been found that most of the women spent below Rs. 2000 per month. In order to examine the degree of association between the expenditure level of women with various determinants like age, education, income, employment, and living standard of the respondents, Chi-square test has been applied at 5% level of significance. The chi-square test confirms the correlation between expenditure level of women respondent with their education, income level and living standard (Table 4). Chi-Square test shows confirms this association whereas depicts no association between expenditure level of women respondent with their age and employment status.

Table 4: Expenditure level of women on diseases and various determinants.

Determinants	Calculated Chi-square Value	Degree of freedom	Table value of Chi-square	Remarks
Age	16.41	10	18.3	NS
Education	56.25	25	37.7	S
Employment status	12.53	10	18.3	NS
Income level	52.49	20	31.4	S
Standard of living	65.66	10	18.3	S

Field survey, 2019

Note: S=Significant: $P < 0.05$; NS=Not significant: $P > 0.05$ tested at 5% level of significance.

Conclusion and Suggestions

The research study highlights that women were ignoring their health issues as they are not willing to spent much on their health and diseases. So, the need is to enhance their knowledge regarding their health issues. Taking this fact in view, there is an urgent need to aware women about the dangers of various types of diseases. The main recommendations of the study are as:

- Firstly, education is the pre requisite. Government should provide free and quality education to the women of all religions.
- Government should initiated programmes which helps to generate guaranteed employment opportunities for women to make them empowered.

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