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UNIVERSAL HEALTH INSURANCE COVERAGE FOR CHILDREN UNDER AGE 6: FACTORS ASSOCIATED WITH THE USE OF PRIVATE OVER PUBLIC HEALTH SERVICES IN VIETNAM

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INTRODUCTION

27% of children under age 6 were using private health services with full or partial fee for services although they have been granted health insurance coverage by the Vietnamese government if they go to public providers. Therefore, it is important to understand what makes these children go to private over public health providers.

OBJECTIVES

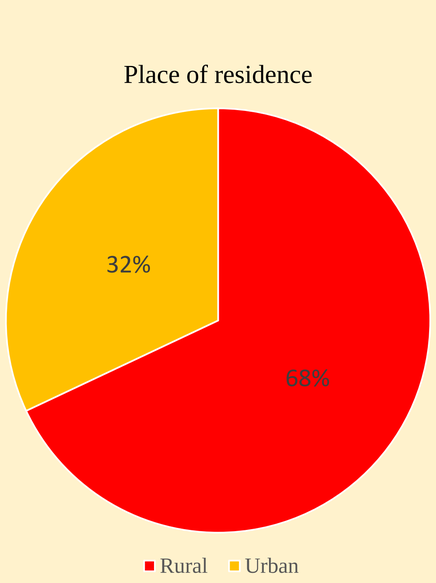
This study aims to examine predisposing, enabling (income per capita by quintiles, education level of the household other than health insurance) and medical need factors associated with the choice of private over public healthcare services in Vietnamese children under age 6

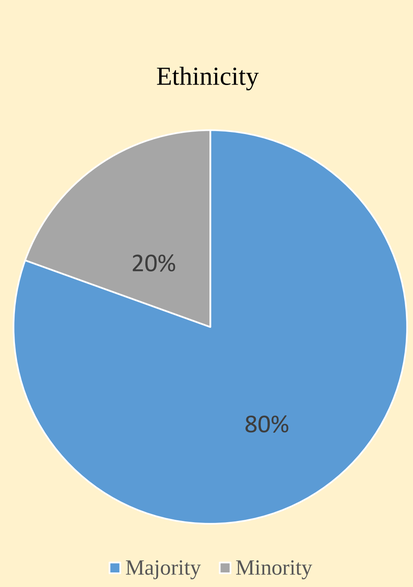
DATA & METHOD

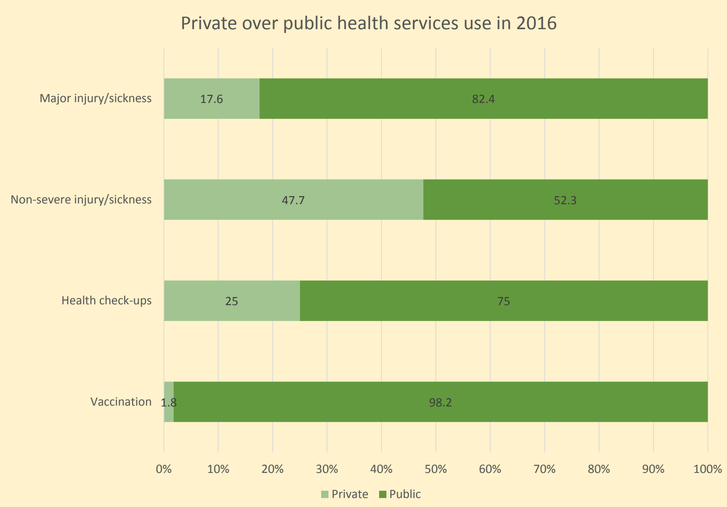
Based on Andersen Model of Health Services Utilization as a thematic framework, this study applied binary logistic regression models of private and public health service utilization, using nationally representative data from the Vietnam Household Living Standards Survey 2016

RESULTS

Participants: 2898 children under age 6 (50.2% male, 49.8% female)







- Medical needs have a larger effect than enabling and predisposing factors on the use of health services
- Predisposing factors: Private healthcare services are more likely to be used by children who are living in urban and higher income areas while public healthcare services are preferred by children living in rural and Midlands and Mountainous areas.
- Enabling factors:
  - Income per capita does not correlate with the use of private over public health care services.
  - Children living in a household with education of university degree or higher are more likely to use public healthcare services.
- Medical needs: the odds of using private over public services are 44 times higher for non-severe illness (95% CI: 25.9 - 74.6, $p<0.001$) than for vaccination, followed by health check-ups with 22 times higher (95% CI: 12.3 - 39.7, $p<0.001$).

CONCLUSIONS

- The private health services are more likely to be used by children who need non-severe treatment or health check-ups and who live in urban and higher income areas in Vietnam
- Implications: Organize and manage public and private health services delivery to harness the potential of private health providers and avoid two tiers in an essential health package