

# Utilization of Noncommunicable Disease Services Provided by Public Health Facilities in Kasaragod, Kerala

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## Abstract

**Background:** The burden of noncommunicable diseases (NCDs) is high with significant impact on households in the form of out-of-pocket expenditure. Provision of NCD services through public health facilities is considered as cost-effective and efficient means. **Aim:** The study aimed to assess the proportion of individuals using NCD services provided through public health facilities and identify the factors associated with its use in Kasaragod district of Indian state of Kerala. **Materials and Methods:** A cross-sectional survey of 375 individuals was conducted in Kasaragod District of Kerala state. The data obtained were analyzed using descriptive and analytical statistical methods using Statistical Package for the Social Sciences version 20. **Results:** About 56.28% of individuals with NCD, received NCD services from public health facilities; these services were primarily comprised screening services. In addition, 40.69% of total individuals with NCDs received treatment services from government health facilities. Insurance coverage, perception about quality, perceived barriers in accessing health services, health worker visit, knowledge about NCD services, and information provided by frontline health workers were significantly influencing NCD service utilization in public health facilities. **Conclusion:** Individual's usage of screening services provided by government facilities is higher than that of treatment services. Overall, the utilization of NCD services provided through the public health system could be said to be less than satisfactory. It could be improved by addressing the perceived barriers with respect to the quality of services provided in public health facilities. In addition, employing the frontline health workers to bridge the awareness gap in NCD service provision could help in improving NCD service utilization.

**Keywords:** Health-care delivery, health-care utilization, noncommunicable diseases

## INTRODUCTION

“Noncommunicable diseases (NCDs),” characterized by their nature of nontransmissibility and chronicity, account for majority of disease burden and disability worldwide. NCDs are the most common causes of premature death and morbidity worldwide and have a major impact on health-care costs, productivity, and growth of nation.<sup>[1,2]</sup> Due to their chronic nature and associated multimorbidity, health-care cost for NCDs is usually high.<sup>[3,4]</sup> According to 2017 estimates, NCDs kill 40 million people each year, equivalent to 70% of all deaths globally.<sup>[4]</sup> Each year, 15 million people die prematurely (i.e., between the ages of 30 and 69 years) due to NCDs with over 80% of these premature deaths occurring in low- and middle-income countries.<sup>[4]</sup> Within NCDs, cardiovascular diseases account for most NCD deaths, of 17.7 million annually, followed by cancers (8.8 million), respiratory diseases (3.9 million), and diabetes (1.6 million).

These four groups of diseases account for over 80% of all premature NCD deaths.<sup>[5]</sup> Once developed, NCDs reduce the productivity, cause premature deaths, and the individual may become lifelong consumer of medicines. As a result of the multidimensional effect at individual, household, health system, and macroeconomic level, NCDs are labeled as global chronic emergency.<sup>[5]</sup>

In India, NCDs contribute to around 5.87 million deaths that account for 60% of all deaths marking country's share to over two-thirds of the total deaths due to NCDs in the Southeast Asian region.<sup>[6]</sup> The major chronic diseases of cardiovascular

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