

Stages of Seeking Medical Care: Empiric to Quantity

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ABSTRACT

This paper discusses the stages of medical-seeking behavior of Thais in a context of pluralistic health care system. Thais are generally involved with both modern and traditional health treatment and seek medical care from various sources of government and private practices when they are ill. Within a single illness episode, Thai patients are more likely to change sources of medical care, ranging from lay treatment to highly-professional medical care. Interestingly, this so-called “switching medical care pattern” seems to be more focused and narrowly involved around highly-professional care, i.e., government hospitals and health centers, as the illness prolongs. This is clearly predominant among rural and poor patients. It is suggested that with a main stream of privatization and structural adjustment of health care, health care should be excepted from the globalization drive, and that health policies of Thailand should be relevant to the poor and rural majority. The information of this paper is based on the results of a research project entitled “Utilization of Government Health Care Services in Thailand, 2003” which was financially supported by Thai government funds. Methods of the investigation of the research include a structured questionnaire and in-depth interview.

PLURALISTIC HEALTH CARE SYSTEM

In Thailand, health care system is pluralistic, ranging from government to private practices, traditional to modern/western medicine and lay to medical professionals. When a person has an illness, he/she can obtain health care and treatment from several sources of medical care, including self-treatment/self-care, consulting lay professional and significant others, drug-store, traditional practitioner, health center, clinic, community and provincial hospital as well as polyclinic and university hospital. In fact, the predominant source of health care among Thais has been self-treatment and the use of drug-stores in which these sources are associated with lay professionals and tradition.

HEALTH PROFESSIONALISATION

Professionalization in health care here refers to the classification of health practitioners, including professionals and non-professionals. The sources of health care are arranged from low to high levels of medical treatments, regarding to the body of knowledge and outcomes of the treatment. Degree of this classification is based mainly on both the qualification of health providers and level of social relationships between the providers and clients. The sources of health care services indicated above are therefore ranked in terms of professionalization. That is, the lowest level is self-care/self treatment, and then increasing up to higher levels, i.e., drug-store, traditional healers, health center, private clinic, community/district hospital, private hospital, regional and university hospital, respectively (Figure 1). It