

Traveling Cost for Health Service Utilization in Early Pregnancy: Evidence from the Rajarata Pregnancy Cohort

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Abstract

Traveling cost for health service utilization (TC) is considered an unavoidable cost type categorized under the direct non-medical out-of-pocket expenditure. We aim to assess the magnitude and the associated factors of TC in early pregnancy among pregnant mothers in the Anuradhapura district, Sri Lanka. This study was conducted in all 22 MOH areas in the Anuradhapura district under the Rajarata Pregnancy Cohort (RaPCo). We used a pre-tested self-administered questionnaire to collect data on household income and expenditure during the pregnancy, and TC during the first trimester is presented in this study. Data analysis was conducted using SPSS V27, and non-parametric tests were used to assess the statistical significance. The sample consisted of 1573 pregnant mothers. The mean (SD) age was 28.3 (5.6) years. The mean (SD) and median (IQR) TC during the first trimester were LKR 744.01 (1,397.17) and LKR 300.00 (150.00-700.00), which was equivalent to 37.1% of the total direct non-medical expenditure. The mean (SD) and median (IQR) TC per visit were LKR 316.28 (529.28) and LKR 150.00 (75.00-316.67), and it was equivalent to 8.2% of the monthly household traveling cost. Mothers with maternal morbidities had higher TC during the early pregnancy than their counterparts ($p < 0.01$). Further, there were positive correlations between the distance to the health care facility and TC ($p < 0.1$), number of visits, and TC ($p < 0.1$). Hence, the study concludes that pregnant women in this rural Sri Lankan setting spend approximately one-third of the direct non-medical expenditure on TC. Mothers with maternal morbidities have high TC. There is a positive association between the distance to the health care facility and TC and between the number of visits and TC.

Keywords: *Health service utilization, maternal morbidities, out-of-pocket expenditure, pregnancy, travelling cost*

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