Study on the Consumer Behavior Towards Geriatric Home Care Services

By

Abhinav Mohanty

Dissertation submitted for the partial fulfillment of the

MBA Hospital and Health Management

Academic year, 2016-2018

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TO WHOMSOEVER MAY CONCERN

This is to certify that Dr. Abhinav Mohanty, student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at AllizHealth (Caressa Solutions Pvt. Ltd.) from February 5th, 2018 to May 4th, 2018.

The Candidate has successfully carried out the study designated to him during internship training and his approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

Iwish him all success in all his future endeavors.

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The certificate is awarded to

Dr. Abhinav Mohanty

In recognition of having successfully completed his Internship in the department of

Marketing

and has successfully completed his Project on

Consumer Behavior Towards Geriatric Home Care Services

Date: May 4, 2018

Organization: AllizHealth (Caressa Solutions Pvt. Ltd.)

He comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning.

We wish him all the best for future endeavors.

VP, Strategy

Director and COO

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled Consumer Behavior Towards Geriatric Home Care Servicesand submitted by Dr. Abhinav Mohanty, Enrolment No IIHMR-U/01/2016-18/0369 under the supervision of Dr. RuchiGarg for award of MBA in Hospital and Health of the University carried out during the period from February 5, 2018 to May 4, 2018 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Signature

ABSTRACT

Title: A Study of the Consumer Behavior Towards Geriatric Home Care Services

Author: Dr. Abhinav Mohanty

Background: Ageing is a phenomenon that is prevalent around the globe and this demographic transition is affecting India also. The need of the hour is to focus on the geriatric population of the country. Involving various disciplines and approaches to healthcare needs of the geriatric population can be achieved by training medical, paramedical and other professionals. Exploring the possibilities of home healthcare as a viable healthcare delivery system for geriatric persons needs to be focused on too considering the comprehensive, professional and compassionate care needs of the geriatric population. Being able to provide prospective patients, quality and affordable care in the comfort of their homes and in the presence of their near and dear ones can go a long way in creating a positive impact of the care provided to geriatric persons.

Objectives:

1. To study the health needs of geriatric patients in India.
2. To study the behavior of consumers toward home care services for geriatric patients.

Method: The study is a quantitative and cross-sectional study in nature. Methodology included a questionnaire based survey circulated among respondents above 18 years of age with average monthly household income above Rs. 30,000. The sampling technique used for they study is Purposive Sampling. The questionnaire comprised of 17 close ended questions pertaining to different aspects of the study.

Conclusion: Home healthcare is a viable model to address the health care needs of geriatric population. It can provide quality and professional care to the geriatric persons in the comfort of their homes.Technology can be incorporated to aggregate home healthcare service providers to provide a wide array of options to choose from.

Key Words: Geriatric Health, Home Healthcare, Elderly Health

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CONTENTS

LIST OF FIGURES

LIST OF TABLES

1. INTRODUCTION

Ageing of a population is an unavoidable process and a reality that cannot be reversed and this affects the demography of every country. This phenomenon assists innovations and improvements when it comes to medical and health care. Factors such as declining fertility and longevity are contributing factors to the global growth of the aged population, i.e. people above the age of 60 years, than the overall general population. When populations age rapidly, all governments are not prepared enough to manage the consequences of this ageing and this result in consequences that affect the health and also socio-economic conditions of the elderly population.

The main factors that contribute to ageing of a population are primarily demographic factors such as an increase in survival among the elderly, a declining fertility rate and dropping mortality rates. When this happens, the population structure of a country reflects a shift from the young age to the old. Longevity among the older population and a large number of elderly people in a population has implications such as dependency on revenues and the income generated by the younger population that is gradually declining.

All around the world, the population of people who are aged 60 or more constitutes almost 11.5% of the total of 7 billion. It is predicted that by 2050, this figure may increase to about 22%. This increase will gradually lead to outnumbering of children below 15 by the elderly. The elderly population comprises of the fastest growing age group whereas the young and working population are reducing gradually. It is also projected that the elderly population shall grow to 31.9% in 2050 which is a 9.5% growth from 2012.

As compared to developed countries, the increase in ageing of the population does not usually run parallel to the increase in the income in developing countries. Development priorities do not enable governments of developing countries to identify and respond timely to this pattern of demographic transition.

The percentage of the aged population in India has been gradually increasing at an upward rate and this particular trend is most likely to continue for the next few decades.

Prediction says the percentage of elderly population in India is most likely to increase to 19% resulting in an 11% growth from 2015. Even though there were phases of dips in the elderly population in the 1960s and 1980s, this population has always been more

than the other population and the overall gap between these two populations has been widening over the years.

The diversity in demography on the basis of demographic transition in India is very significant across regions and states. The age structure of the population, hence, varies considerably. Maharashtra, Himachal, Punjab, Odisha and the Southern states of India reflect the highest ageing in their population. States belonging to the central and northern parts of India such as Madhya Pradesh, Jharkhand, Bihar, Uttar Pradesh, Rajasthan and Chattisgarh reflect lower percentages of elderly population. States in the North East such as Arunachal Pradesh, Nagaland and Meghalaya reflect the least percentage of elderly population. A higher dependency on old age means there shall be more demand for care from the immediate family. All states of India project a life expectancy of 15 years for people at the age of 60. When it comes to gender, women have more life expectancy at old age than men.

1.1: Background Information

Healthcare for the elderly in India is rapidly emerging as a concern for both private as well as public. Owing to modernization, the aged population of India does not enjoy the same privileges and status as they used to enjoy a few decades back. The rapidly changing social scenario has its impact on the traditional mechanisms of imparting care to the elderly. Therefore, there is a need for a plan of action to ensure utilization of resources for the elderly. Very little knowledge, acceptance and awareness regarding geriatric care as an area of healthcare that needs to be addressed is a reason for poor and inaccessible healthcare for the elderly people in India.

The needs of aged people are not only economical but also physical, social and psychological. Institution based changes are needed to address as well as ensure the psychological and social wellbeing of the elderly. Multi-disciplinary and specialized care from various disciplines of medicine is needed to tackle the health problems of the elderly. It is important that the emphasis on acute healthcare needs to be shifted to chronic diseases with a focus on prevention of diseases especially NCDs and this change needs to be brought within healthcare systems. To improve the quality of life of the elderly population it is imperative that there should be an emphasis on immunization also. Models of healthcare that have a comprehensive and holistic approach towards healthcare needs of the elderly at all levels are very important to address their increasing

needs. Prevention, promotion and rehabilitation are the different of aspects of healthcare that can address healthy ageing.

1.2: Aim of the Study

The aim of this study is to study and understand the importance and healthcare needs of the elderly population and also to understand the role of home healthcare for the elderly. The study aims to understand the healthcare seeking behavior of and for the elderly and understand if home healthcare can address the growing healthcare needs of the elderly by providing affordable and quality healthcare to the elderly at their doorstep. The concept and model of home healthcare is to impart compassionate and personal healthcare and at the same time providing the comfort of their homes to patients. This gives a sense of security to the patients also. Members of the family are primarily responsible for the healthcare and wellbeing of the elderly at their homes. When it comes to home healthcare, the burden of primary care is taken off the shoulders of the family members and they are assured that the elderly are being provided with compassionate and professional care in the comfort of the home in their presence. Moreover, home healthcare can be tailored according the needs of every individual patient, reduces the cost of hospitalization, time spent in transferring the patient to the hospital and back to their homes. Another major advantage of home healthcare is that it protects the patients from the risk of nosocomial infections.

1.3: Objectives of the Study

The study has tried to address the following research objectives:

- To study the health needs of geriatric patients in India.
- To study the behavior of consumers toward home care services for geriatric patients.

1.4: Implications of the Study

The study would help us to understand the healthcare needs of the geriatric population and also their and their family members' healthcare seeking behavior. It will help us understanding the various institutions that are utilized for healthcare for the elderly as well as the awareness of geriatric health care problems. The study will also help in

understanding consumer attitude and perception towards home healthcare and thereby help in developing a way by which home healthcare can be made accessible to the elderly patients so that tailor made and professional healthcare services can be delivered to them in the comfort of their homes in the presence of their family members.

1.5 Outline of the Study

The study consists of a set of questions that have been circulated to respondents between the age groups 18-25, 26-35, 36-45, 46-55, 56-65 and 65+ through e-mail and text messaging services. The questions probe various dimensions of consumers such as attitude, trust, behavior and commitment towards home healthcare services for geriatric patients. Ethics had been taken into consideration by taking an informed consent from the respondents before answering the questionnaire. The respondents were assured that the participation in the study was completely voluntary and they were free to withdraw from the study at any stage. The respondents were informed that the data collected would be shared with the guide allotted for the study and that the study was being conducted for academic purposes only.

1.6 Limitations of the Study

1. The time period of the study is limited to three months. The study may not be valid for a longer duration owing to rapid changes in the healthcare delivery systems and models.
2. Due to a limited amount of time and resources involved to carry out this study was restricted to a very limited sample size. The conclusions drawn from this study, hence, may have restrained application which means that it may be subject to biasness over regions but insights into a broader aspect of current healthcare trends pertaining to the elderly can be obtained from this study.

2. REVIEW OF LITERATURE

The review of literature suggests a steadily increasing proportion of elderly population as compared to children and young population. “The population over the age of 60 years has tripled in last 50 years in India and will relentlessly increase in the near future. According to census 2001, older people were 7.7% of the total population, which increased to 8.14% in census 2011. The projections for population over 60 years in next four censuses are: 133.32 million (2021), 178.59 (2031), 236.01 million (2041) and 300.96 million (2051). The increases in the elderly population are the result of changing fertility and mortality regimes over the last 40-50 years” (Verma and Khanna,2013). Verma and Khanna (2013) also suggest that “As the elderly population is likely to increase in the future, and there is a definite shift in the disease pattern, i.e. from communicable to non-communicable, it is high time that the health care system gears itself to growing health needs of the elderly in an optimal and comprehensive manner. There is a definite need to emphasize the fact that disease and disability are not part of old age and help must be sought to address the health problems.”

Tao and McRoy (2015) feel that one of the major issues that involves healthcare for the elderly is the “shortage of hospital beds, making it necessary to provide more complex care to the elderly with chronic or comorbid health conditions while they are living at home.” It is well known that countries like China and India have such societies where children are the primary caregivers for the elderly people at their homes who are now dependent on them. They identified the following home caregivers for the elderly: family members, professional caregivers, home aides, home health visiting nurses, rehabilitation therapists and healthcare social workers.

Naylor, et al.(1999), believe that “Home health care offers several advantages over hospital-based health care. Health care in a home setting may be more cost effective than that provided in a hospital.” According to Smith (1989), the elderly population is more susceptible to hospital acquired infections as compared to the younger population and Leff, et al. (2005) feel that home care can help protect the elderly population from hospital acquired/nosocomial infections. The comfort and a sense of security of being

provided care at home can be a very useful health care delivery system that can address the healthcare needs of the elderly.

According to Boland et al (2017), “Many elders struggle with the decision to remain at home or to move to an alternative location of care. A person’s location of care can influence health and wellbeing. Healthcare organizations and policy makers are increasingly challenged to better support elders’ dwelling and health care needs. A summary of the evidence that examines home care compared to other care locations can inform decision making.” Their findings and reviews indicate that the location where care is imparted to the elderly hold importance pertaining to the impact of the care delivered. It can also help identify the carious gaps in the healthcare delivery models in institutional care provided to the elderly and help improvise upon them.

In a study conducted by Barrett, et al (2010), they concluded that “Not only can care be provided less expensively at home, evidence suggests that home care is a key step toward achieving optimal health outcomes for many patients.” Their studies showed that care interventions at home have the capability to reduce hospitalizations and also improve the quality of care when it came to adverse events or in the case of chronic diseases.

According to Romagnoli (2013), “When patients leave the hospital and return home with home nursing care, they go from highly supportive medical environments with potentially many physicians, nurses, aides, and other professionals, to non-medical environments with formal and informal caregiver support frequently supplemented by visits from home care nurses.”

3. RESEARCH METHODOLOGY

3.1 Nature and Scope of the Study

The nature of this study is exploratory and it seeks to identify the awareness of healthcare problems that geriatric people face and the different kind of institutions that their family members opt for as providers of geriatric healthcare services. This study also aims at identifying and understanding the behavior of consumers and their awareness regarding home healthcare services which include the type of services they may want to avail of at home, the amount they are willing to spend for these services and the type of payment methods they are comfortable with while availing these services.

3.2 Sampling

This study included respondents with ages 18 onwards having average monthly household incomes beginning at Rs. 30,000 considering that respondents with ages 18 years onwards play a role while seeking healthcare services for the geriatric patients. Diversity in the age of the respondents gave a wide perspective about healthcare seeking behaviors and also an insight on the use of technology for availing healthcare services. Primary data was collected by 100 respondents with diverse ages and household incomes using a questionnaire. The questionnaire was floated to the respondents through e-mail and text message services and the data collected was analyzed on MS-Excel. The duration of the study was three months beginning on the February 5th, 2018 and ending on February 4th, 2018.

3.2 Data Collection Process

The study is a quantitative and cross-sectional study in nature. Methodology included a questionnaire based survey circulated among respondents above 18 years of age with average monthly household income above Rs. 30,000. The sampling technique used for they study is Purposive Sampling. The questionnaire comprised of 17 close ended questions pertaining to different aspects of the study. An initial pilot study was carried out among 35 respondents to check the validity of the questionnaire after which some questions were removed or replaced to ensure a better outcome and understanding of the results. The questionnaire was distributed among 150 people all over India from which 100 completed responses were

submitted. The 100 respondents were also contacted by telephone or over text messages to validate their responses.

3.3 Research Tool

The content of the questionnaire included various parameters pertaining to geriatric healthcare such as common diseases that the elderly face, the common problems that elderly people need home assistance with. It also includes the various methods and institutions for seeking healthcare services for the elderly. Another aspect that the questionnaire probes is the spending behavior and preferred payment method while seeking healthcare services. Apart from the mentioned aspects, the study helps in understanding the awareness of respondents regarding home healthcare services and their willingness to avail these services for the care of the geriatric members of their families. The questionnaire was developed after reviewing relevant literature, understanding and identifying the specific issues pertaining to geriatric healthcare.

3.4 Data Analysis

The data collected by respondents was analyzed using MS-Excel and the results of the data analysis is presented in the subsequent section of the report.

4.RESULTS

The study was aimed at addressing the following objectives:

1. To study the health needs of geriatric patients in India.
2. To study the behavior of consumers toward home care services for geriatric patients.

The questionnaire comprised of 15 close ended questions to complete and meet the requirements of the objectives of the study.

The content of the questionnaire comprises of key parameters such as the average household income, the presence of geriatric persons in the household, the awareness of various health problems that affect geriatric persons, the awareness regarding those health problems for which geriatric people may need assistance at home, the various institutions used for availing healthcare services for geriatric persons, the various methods used to obtain information about health problems of the geriatric population, the awareness regarding home healthcare services for geriatric services, the spending behavior and preference of payment methods for availing the healthcare services.

The graphical representation of the result of the surveyis given below:

1. What is your age?

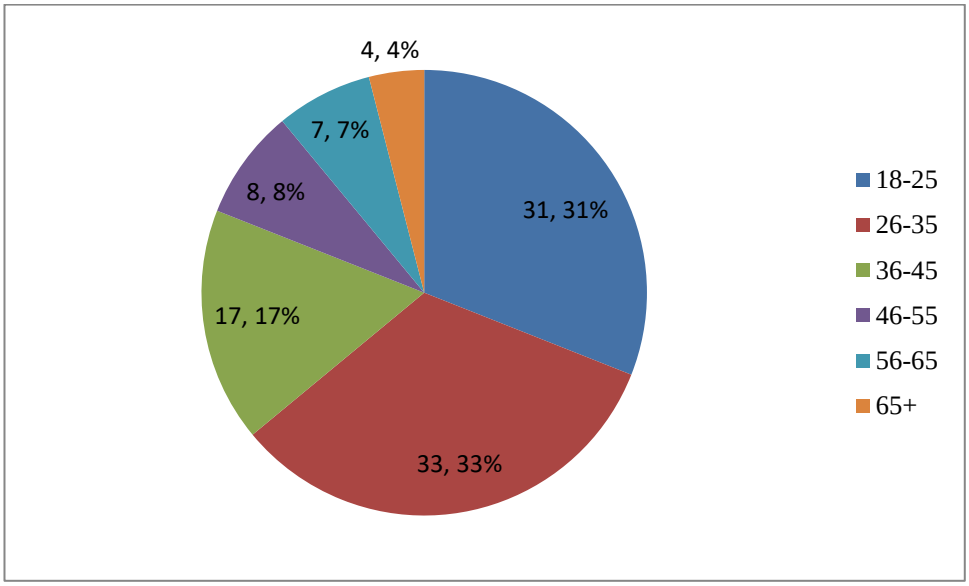

Fig.1: Age of the respondents

2. Are you or anyone in your family (including extended family) above the age of 60?

Answer	No. of Respondents	Percentage %
Yes	84	84%
No	16	16%
	100	100%

Table 1: Number and percentage of respondents who have or do not have anyone in their family (including extended family) above the age of 60

3. What is your average monthly household income?

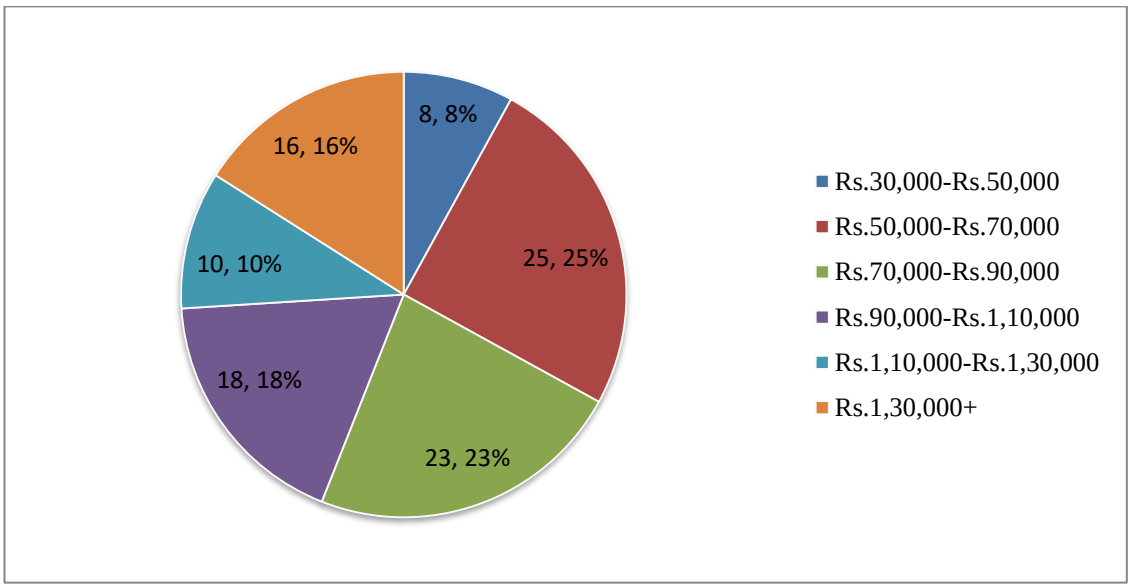

Fig.2: Average monthly household income of the respondents

4. Which of the following elderly health problems are you aware of? (Mark Multiple options if applicable)

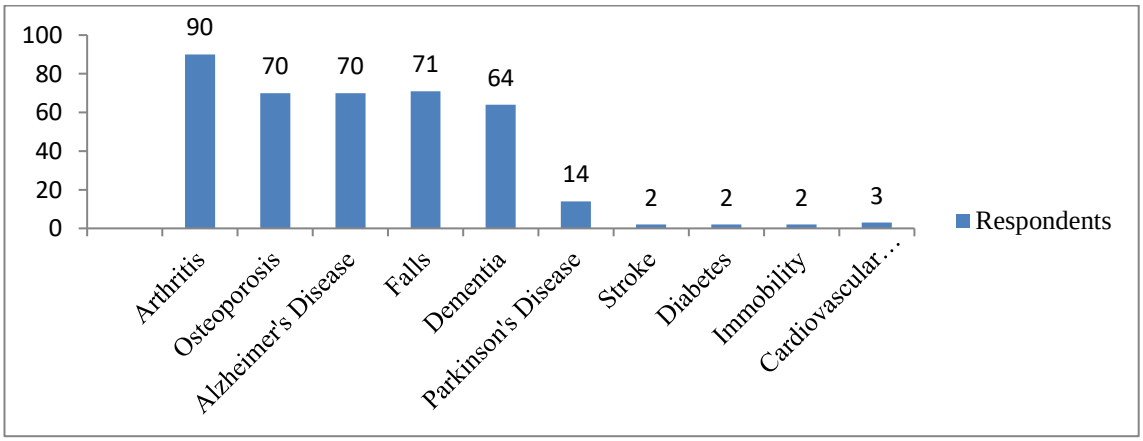

Fig. 3: Awareness of respondents regarding various elderly health problems

5. Whichof the following problems do you feel elderly people need home care assistance for? (Mark multiple options if applicable)

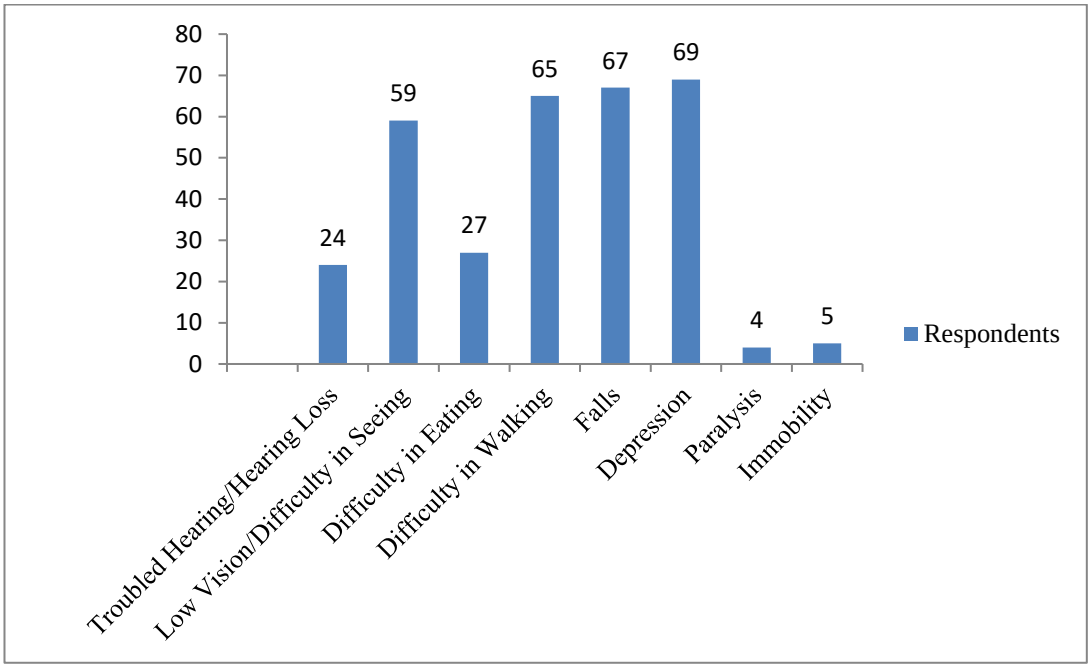

Fig.4: Respondent's perception regarding health problems of the elderly that require home assistance

6. According to you, how important do you feel it is to possess information regarding elderly health?

Importance	Respondents	Percentage %
Not Important	0	0%
Somewhat Unimportant	1	1%
Neutral	5	5%
Somewhat Important	21	21%
Very Important	73	73%
Total	100	100%

Table 2: Respondent's perception regarding importance of possessing information pertaining to elderly health

7. Among the following sources, how likely are you to use them to obtain information on health problems of the elderly?

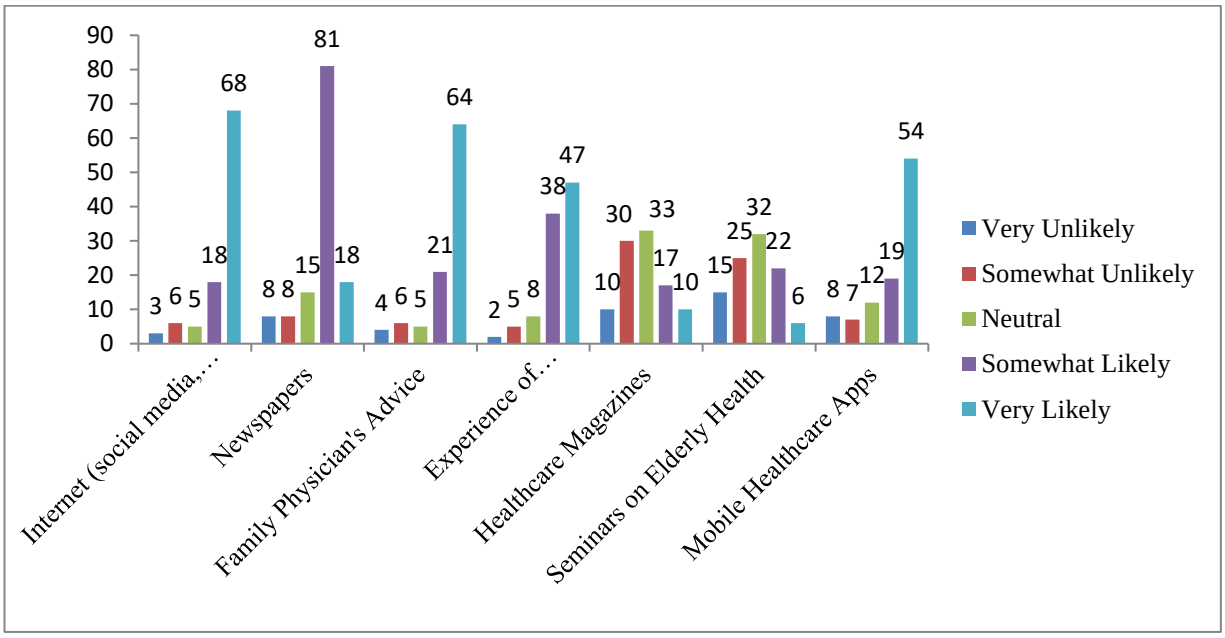

Fig.5: Respondent's likelihood regarding the means of obtaining information pertaining to elderly health problems

8. Which of the following institutions are you more likely to use for elderly health care problems?

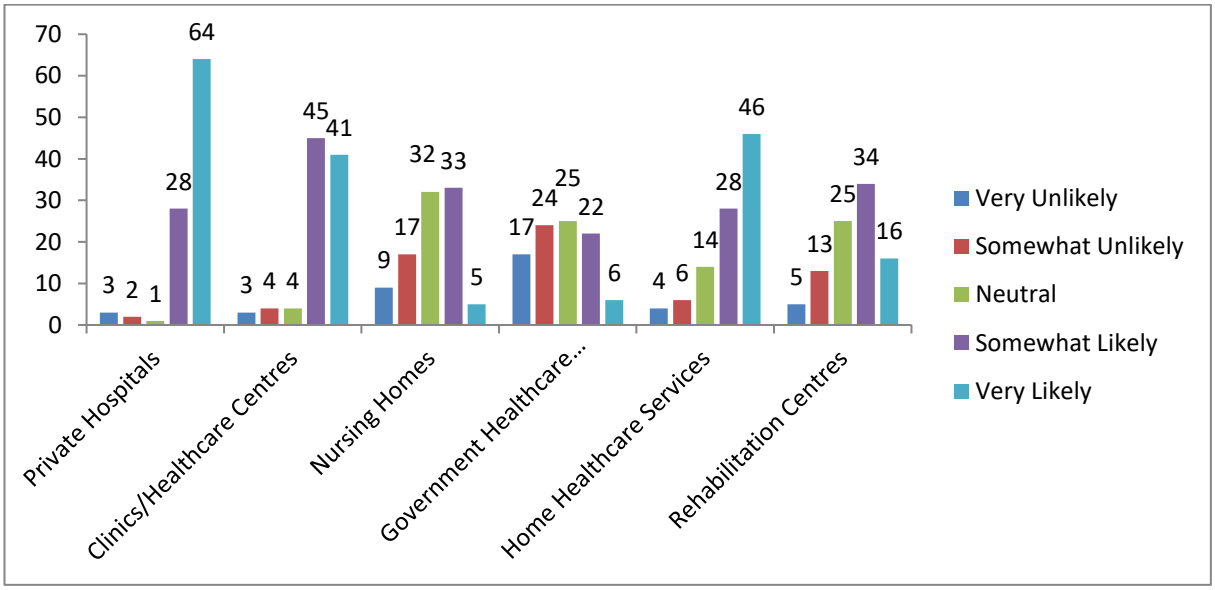

Fig. 6: Respondent'spreference of healthcare delivery institutions for availing healthcare services for the elderly

9. Are you currently using or have you ever used any home healthcare services for yourself or your family? (If no, skip question 10)

Answer	No. of Respondents	Percentage %
Yes	63	63%
No	37	37%
	100	100%

Table 3: Respondent's current and past usage of home healthcare services

10. If you discontinued using the home care services, which of the following factors do you feel are most likely to be a cause of the same?

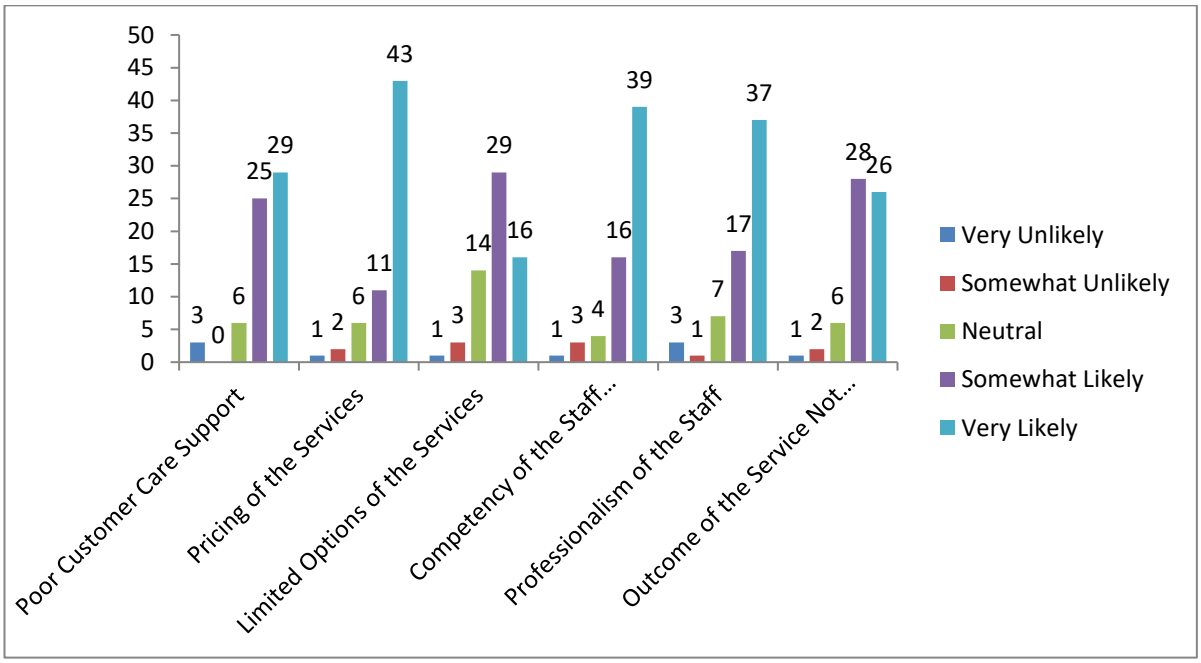

Fig.7: Respondent's reasons for discontinuing home healthcare services

11. How likely are you to consider using some home care services for yourself or for someone else (senior or disabled member of your family, etc.) in the next 5 years?

Likelihood	Respondents	Percentage %
Very Unlikely	1	1%
Somewhat Unlikely	3	3%
Neutral	15	15%
Somewhat Likely	35	35%
Very Likely	46	46%
Total	100	100%

Table 4: Respondent's likelihood of availing home healthcare services in the next 5 years

12. According to you, what could be the probable reasons for not opting for home healthcare services?

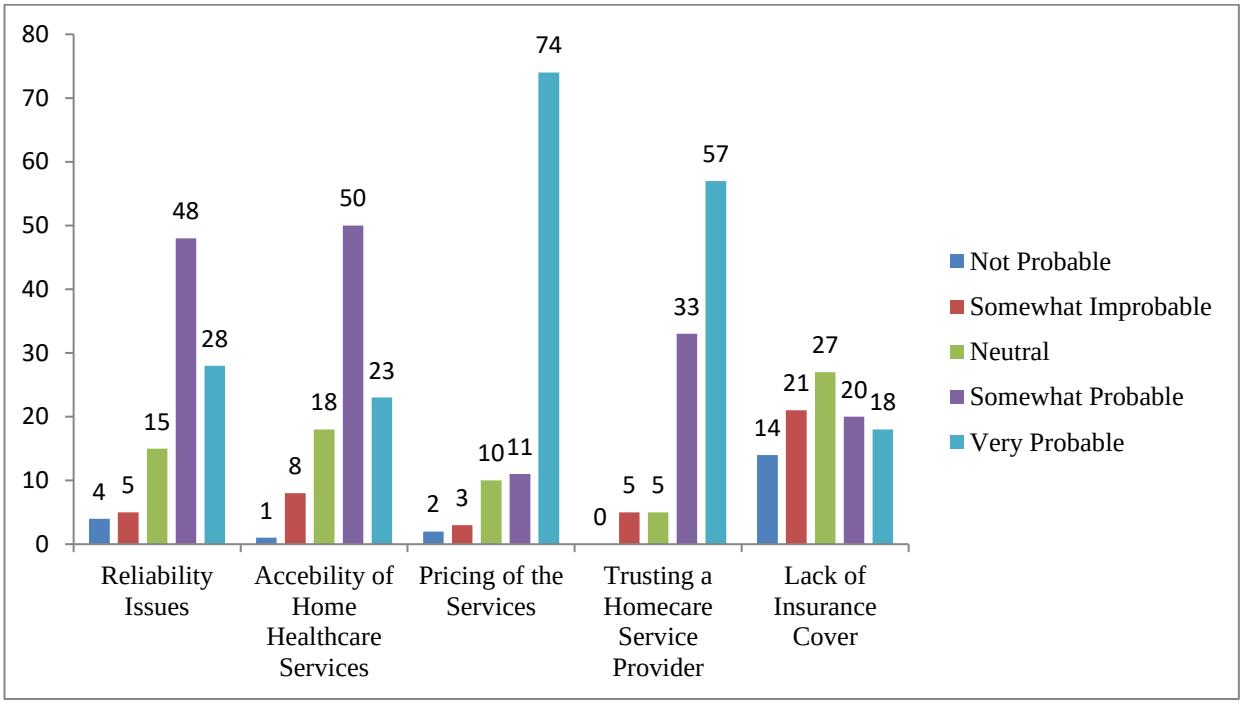

Fig.8: Respondent's perception regarding the reasons for not opting home healthcare services

13. How did you/would you find your home healthcare service provider? (Mark multiple options if applicable)

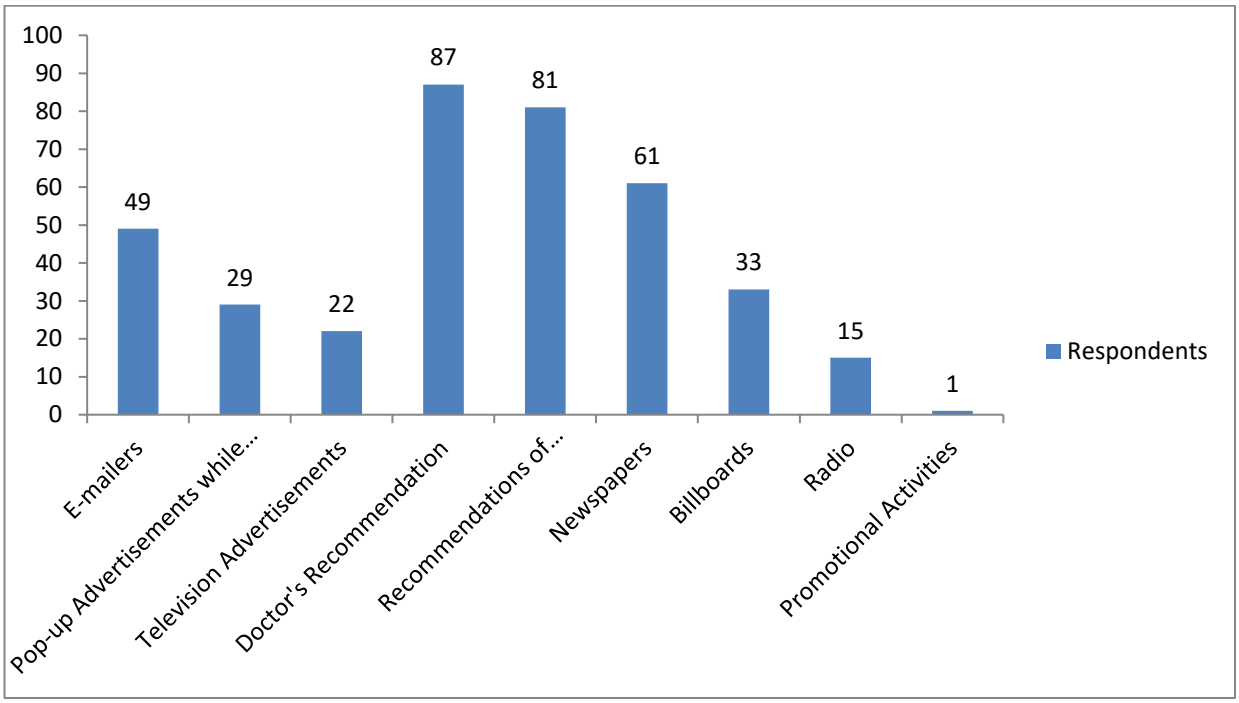

Fig. 9: Respondent's preferred means of searching for home healthcare service provider

14. Which of these following services have you/would you use? (Mark multiple options if applicable)

Service	Respondents
In-Home Nursing Services	65
Physiotherapy/Rehabilitation	79
Medical Equipment Delivered at Home	36
Post-Operative Home Care	65
Medicines Delivered at Home	79
Companionship	24

Table 5: Respondent's preference of availing particular healthcare services at home

15. If you would be looking for home care service for elderly people, what would be the important criteria to choose a company that provides home care services?

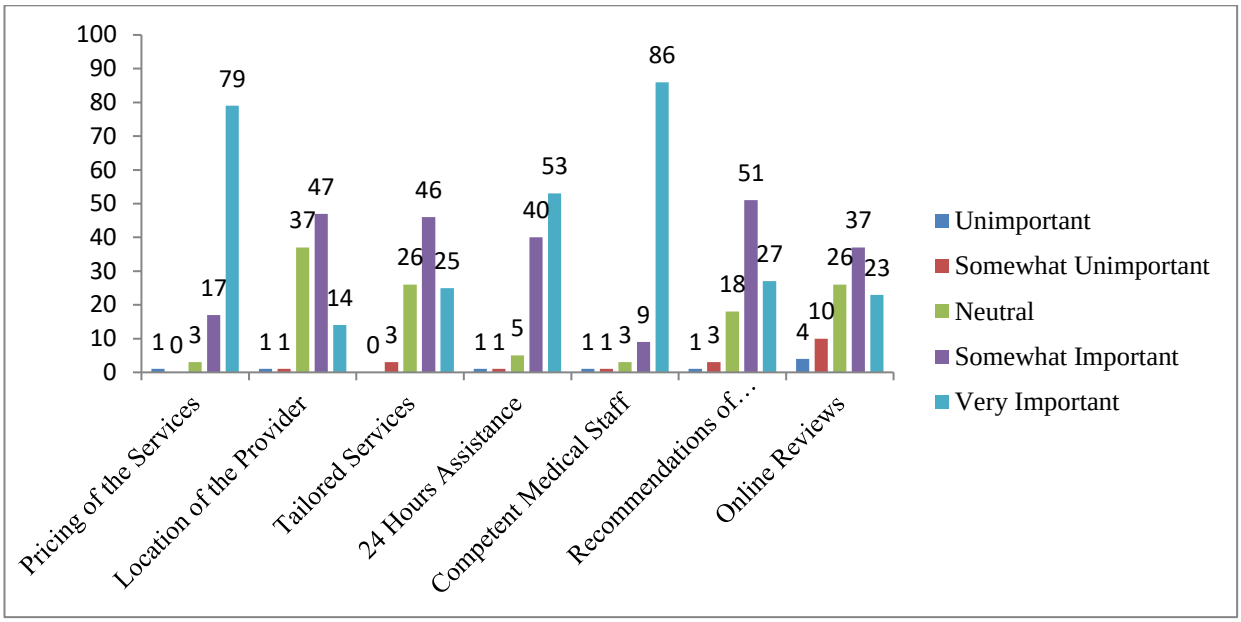

Fig.10: Factors that respondent's feel are important while selecting a home healthcare service provider

16. How much would you be willing to pay for in-home nursing care services?

Price Range	Respondents
Rs.200-Rs.400 per hour	14
Rs.400-Rs.600 per hour	26
Rs.600-Rs.800 per hour	22
Rs.800-Rs.1000 per hour	23
Rs.1000-Rs.1200 per hour	15
Total	100

Table 6: Amount the respondent is willing to pay per hour for home healthcare services

17. What mode of payment would you prefer for these services?

Mode of Payment	Respondents
Online Pre-Payment while Booking Services	29
Online Payment after Completion of Service	36
Cash Payment After Completion of Service	35
Total	100

Table 7: Respondent's preferred mode of payment for home healthcare services

5. DISCUSSION

Based on the questionnaire filled by the respondents, the following points were inferences were made:

1. The age of the respondents varied from 18 years to more than 65 years with the highest percentage of respondents between the ages 26-35 at 33%. A large number of people in this age group are bread earners of their family and are also decision makers. They are also the primary caregivers for the geriatric persons at home.
2. A majority of the respondents (84%) reported that either they or some person in their household is above the age of 60. Considering that 11 respondents out of 100 are above the age of 56, most of the respondents have some geriatric person in their household and may be dependent on the respondent for care.
3. The average monthly household of 49 respondents were found to lie between Rs. 50.000-Rs. 90,000. Keeping in mind the various day-to-day expenditures in a household, it is important that preventive measures must be taken in the case of geriatric persons in the household so that there is no catastrophic consequence in due course of time due to health problems that the geriatric persons may suffer from. It is also important that the members of the household should possess adequate information and knowledge regarding health problems of geriatric persons and ways by which they can be prevented.
4. Most of the respondents were found to be well versed with health problems that geriatric people commonly face. Health problems among the elderly such as arthritis, osteoporosis, Alzheimer's Disease, Dementia, falls, Parkinson's Disease and cardiovascular diseases are serious and efforts must be made to prevent these problems as far as possible. Once these problems occur, they patients need constant care and attention so that these problems to do not aggravate and affect not only those who are suffering from these problems but also immediate family members who are the primary caregivers of the patients. The fact awareness regarding geriatric health problems was present among the respondents is a good sign. Without awareness, the right actions cannot be taken.

5. Among the various problems listed, the respondents felt that geriatric persons need home care and assistance when they face problems with vision and with

walking and moving about. The respondents felt that falls are a common problem with the geriatric persons and care must be taken to avoid such falls. The consequences of falls can be very serious and sometimes fatal. With old age comes the feeling of loneliness especially in widows and widowers. The feeling of dependency coupled with loneliness can lead to depression. This is another area that needs to be addressed. Mental health is very important for a good quality of life.

6. 73% of the respondents felt that it is very important for individuals to possess information regarding geriatric health problems. Without the right information, preventive and curative measures cannot be taken during health problems among the geriatric persons. Making informed choices and taking decisions post information can have a very positive impact on the outcome of healthcare delivery to the elderly.
7. Based on the answers by the respondents, it could be seen that most of the respondents were well acquainted with using the internet while obtaining information pertaining to health problems of geriatric persons. 68 respondents mentioned that they were very likely to use various platforms on the internet for obtaining such information whereas 54 respondents were found to be comfortable using mobile applications for obtaining such information. It was interesting to note that 64 respondents were very likely to consult their family physician for such information. These figures indicate the respondents' faith and comfort using the internet and mobile phones and also their faith in their family physicians. This information can be utilized well to develop web and mobile based platforms to disseminate information pertaining to the health of geriatric persons and the option of online doctor consultations could also be integrated to disseminate genuine information, advice and consultation to those seeking such information.
8. Regarding institutions that are involved with healthcare delivery, 64 respondents answered that they were very likely to seek healthcare services from private hospitals. An alarming number of 6 respondents mentioned that they were very likely to seek such services from government healthcare institutions. This speaks volumes about the faith that the respondents have in government institutions. A plan of action could be charted to involve government healthcare institutions via the Public-Private Partnership model. This would ensure that quality healthcare services are being meted out to those seeking healthcare services for the elderly.

It was interesting to note that 46 respondents were aware about home healthcare services and mentioned that they were very likely to seek home healthcare services for the geriatric persons in their household. 63 respondents answered that they are either currently availing home healthcare services or have used home healthcare services in the past. Considering the professional and compassionate service that can be provided to geriatric persons in the comfort of their homes, this model of healthcare delivery can be a very promising option in the long run.

9. To understand the possible reasons for discontinuing home healthcare services and to identify gaps in the model, the respondents were given a list of factors that could be probable reasons for discontinuing home healthcare services. Most of the respondents felt that high pricing of the services, incompetency and unprofessionalism of the staff providing the services could be very probable reasons why someone would discontinue using home healthcare services. These factors are very important while collaborating with home healthcare service providers for ensuring affordable and quality healthcare delivery to geriatric patients.
10. 46 respondents answered that they were very likely and 35 respondents answered that they were somewhat likely to avail home healthcare services in the next 5 years. This is a good indication regarding the awareness of home healthcare and acceptance of the home healthcare model for healthcare service delivery to geriatric persons. Considering the unavailability of hospital beds in India and the rising costs of hospitalization, home healthcare can tackle these issues while providing a comfortable atmosphere to the patients. Presence of familiar surroundings and people can have a positive psychological impact on recuperating patients.
11. The study also aimed to explore the probable reasons why someone would not opt for home healthcare services for the geriatric persons at their home. According to 67 respondents, high pricing of the services could be a deterrent factor. 57 respondents felt that one of the most probable reasons could be trusting a provider. Home healthcare service providers need to ensure that their services are affordable as compared to charges in a hospital for the same services. At the same time they need to set and maintain proper standards to match the expectations of their clients and build a sense of trust within them.

12. One of the components of the study was to understand the means by which the respondents would search for the home healthcare service provider. This aspect is very important as it helps determine ways by which providers can reach out to potential clients and also incorporate the same while developing apt marketing strategies to maximize their outreach.87 respondents answered that they would rely on a doctor's advice and 81 respondents mentioned that they would seek recommendations from their friends, family or relatives. 61 respondents, interestingly, answered that they would seek for providers in newspapers which indicates that attractive newspaper advertisements can be used as a method to reach out to potential clients. 49 respondents answered that they would prefer e-mailers which is a very commonly and frequently used to method to reach out to potential clients.
13. To understand the variety of services that respondents were looking to avail from home healthcare services providers, the respondents were given a list of potential services to pick from. 80 respondents picked physiotherapy/rehabilitation services which made it the most sought after service followed by delivery of medicines at home which was picked by 79 out of the 100 respondents. In-home nursing services and post-operative home care were picked by 66 respondents alike. The overall responses made it evident that the respondents were looking for a comprehensive mix of services that they would avail for healthcare delivery to the geriatric persons in their household. Understanding the requirement of the respondents helps in developing comprehensive healthcare solutions and providers can strive to be one-stop solutions offering a wide array of services. In doing this, the potential clients can save time and effort while availing various services also.
14. From the answers of the respondents it was evident that the prospective home healthcare service provider should price their services attractively making their services affordable as 80 respondents felt that pricing of the services is a very important criterion while selecting a provider. Since 87 respondents mentioned that competent medical staff is a very important criterion, home healthcare service providers must ensure they hire highly skilled and competent staff and at the same time they should have proper and rigorous training regimes for their staff that can develop and help evolve their skills over time.
15. To understand the paying tendency of respondents and also the preferred mode of payment, respondents were given price ranges beginning from Rs, 200 per

hour. These prices ranges were selected after going through price ranges of various home healthcare service providers. The respondents were given three options of payment for the services namely, online pre-payment while booking services, online payment after completion of services and cash payment after completion of services. 26 respondents answered that they were comfortable paying Rs. 400-Rs.600 per hour for various home healthcare services whereas 23 respondents answered that they were comfortable paying Rs. 800-Rs. 1000 per hour for home healthcare services. Almost an equal number of 36 respondents answered that they were more comfortable in paying for the services after the completion of services. They answered that they were comfortable with both online and cash options. The understanding of these options can help in identifying way by which payment for the delivered services can be collected without glitches or loopholes making it a seamless transaction experience for providers as well as clients.

6. CONCLUSION

Conclusions pertaining to geriatric health care and home healthcare for geriatric persons that were drawn from the analysis of results are as follows:

- Geriatric population is increasing steadily in the country and their population will slowly outnumber of the population of children and working youth.
- It is important to understand the health problems of geriatric persons as many geriatric people are dependent on their family members financially as well as well as psychologically for care.
- Geriatric health problems need immediate attention to prevent them from aggravating as it may affect the economics of any household.
- Sound knowledge and information is essential to address health needs of geriatric people to ensure that appropriate health care services can be provided to them.
- Home healthcare is a viable healthcare service delivery model keeping in mind that comprehensive, compassionate and professional health care can be meted out to geriatric persons in the comfort of their homes in the presence of their near and dear ones.
- Web and mobile based platforms can be utilized to disseminate appropriate information regarding geriatric health.
- Web and mobile based platforms can be utilized to help potential clients search for home healthcare service providers.
- Doctors play a very important role in educating people regarding geriatric health and also the feasibility of home healthcare option.
- Home healthcare providers must ensure that they employ skilled staff for healthcare service delivery and also continuously train their staff to keep them updated in the evolving healthcare scenario.
- Home healthcare providers should ensure that they formulate a comprehensive mix of services that can customized as per individual needs. Prompt and round the clock customer support service can go a long way in building trust in the minds of clients.

7. RECOMMENDATIONS

Some recommendations that are made to AllizHealth after analyzing the results of the study are as follows:

- Addressing geriatric health is the need of the hour.
- Geriatric healthcare services can be incorporated among the existing array of services to address geriatric health problems considering the wide outreach of AllizHealth as it has already engaged over 7,50,000 employees of their various clients.
- Considering that AllizHealth is a technology-based preventive healthcare organization, they can enter this segment of healthcare by mutually beneficial collaborations with existing elderly home care organizations.
- As AllizHealth presently operates in the B2B space, they can expand into the B2C space also to increase their outreach.
- Co-branded promotional activities for existing client base can help in increasing awareness regarding geriatric health care and also can be a good way to enter this segment of healthcare.
- Technology being a core strength, AllizHealth can build web platforms and mobile applications where they can be aggregators of home healthcare services for the elderly. This will enable potential clients to search and select their providers easily and also will allow users to browse between a variety of providers and choose the provider that they are more comfortable with.
- Regular blogs published by AllizHealth can be used to disseminate useful information regarding healthcare needs and health problems of geriatric patients.

8. SUPPLEMENTARY

This section of the study comprises of the questionnaire that was circulated to the respondents. The questions in the survey are as follows:

Q.1 How old are you?

a. 18-25
b. 26-35
c. 36-45
d. 46-55
e. 56-65
f. 65+

Q.2 Are you or anyone in your family (including extended family) above the age of 60?

a. Yes
b. No

Q.3 What is your average monthly household income?

a. Rs.30,000-Rs.50,000
b. Rs.50,000-Rs.70,000
c. Rs.70,000-Rs.90,000
d. Rs. 90,000-Rs. 1,10,000
e. Rs. 1,10,000-Rs. 1,30,000
f. Rs. 1,30,000+

Q.4 Which of the following elderly health problems are you aware of? (Mark multiple options if applicable)

a. Arthritis
b. Osteoporosis
c. Alzheimer's Disease
d. Dementia
e. Falls
f. Others: Please Specify

Q.5 Which of the following problems do you feel elderly people need home care assistance for? (Mark multiple options if applicable)

a. Troubled hearing/Hearing loss
b. Low vision/Difficulty in seeing
c. Difficulty in eating

d. Difficulty in walking

e. Depression

f. Falls

g. Others: Please Specify

Q.6 According to you, how important do you feel it is to possess information regarding elderly health?

a. Not Important

b. Somewhat Unimportant

c. Neutral

d. Somewhat Important

e. Very Important

Q.7 Among the following sources, how likely are you to use them to obtain information on health problems of the elderly?Multiple options to be answered on a likelihood scale which is Very Likely, Somewhat Unlikely, Neutral, Somewhat Likely and Very Likely.

a. Internet (Social Media, Blogs, E-mailers, etc.)

b. Newspapers

c. Family Physician's Advice

d. Experience of Frind/Family/Relatives

e. Healthcare Magazines

f. Seminars on Elderly Health

g. Mobile Healthcare Apps

Q.8 Which of the following institutions are you more likely to use for elderly health care problems??Multiple options to be answered on a likelihood scale which is Very Likely, Somewhat Unlikely, Neutral, Somewhat Likely and Very Likely.

a. Private Hospitals

b. Clinics/Healthcare Centres

c. Nursing Homes

d. Government Healthcare Institutions

e. Home Healthcare Services

f. Rehabilitation Centers

Q.9 Are you currently using or have you ever used any home healthcare services for yourself or your family?Skip question 10 if your answer is No.

a. Yes

b. No

Q.10 If you discontinued using the home care services, which of the following factors do you feel are most likely to be a cause of the same?Multiple options to be answered on a likelihood scale which is Very Likely, Somewhat Unlikely, Neutral, Somewhat Likely and Very Likely.

a. Poor Customer Care Support

b. High Pricing of the Services

c. Limited Options of the Services

d. Incompetency of the Staff providing the Services

e. Unprofessionalism of the Staff

f. Outcome of the Services did not Match Expectations

Q.11 How likely are you to consider using some home care services for yourself or for someone else (senior or disabled member of your family, etc.) in the next 5 years?

a. Very Unlikely

b. Somewhat Unlikely

c. Neutral

d. Somewhat Likely

e. Very Likely

Q.12 According to you, what could be the probable reasons for not opting for home healthcare services?Multiple options to be answered on a probability scale which is Not Probable, Somewhat Improbable, Neutral, Somewhat Probable and Very Probable.

a. Reliability Issues

b. Accessibility of Home Care Services

c. Pricing of the Services

d. Trusting a Home Care Service Provider

e. Lack of Insurance Cover

Q.13 How did you/would you find your home healthcare service provider?(Mark multiple options if applicable)

a. E-mailers

b. Pop up advertisements while browsing the internet

c. Television advertisement

d. Doctor’s recommendation

e. Recommendation of friends/family/relatives

f. Newspaper

g. Billboards

h. Radio

i. Others: Please Specify

Q.14 Which of these following services have you/would you use?(Mark multiple options if applicable)

a. In-home nursing services

b. Physiotherapy/Rehabilitation

c. Medical equipment delivered at home

d. Medicines delivered at home

e. Post-operative home care

f. Companionship

g. Others: please specify

Q.15 If you would be looking for home care service for elderly people, what would be the important criteria to choose a company that provides home care services? Multiple options to be answered on an importance scale which is Not Important, Somewhat Unimportant, Neutral, Somewhat Important and Very Important.

a. Pricing of the Services

b. Location of the Provider

c. Tailored Services

d. 24 Hours Assistance

e. Competent Medical Staff

f. Recommendations of Friends/ Family/ Doctors

g. Online Reviews

Q.16 How much would you be willing to pay for in-home nursing care services?

a. Rs.200-Rs.400 per hour

b. Rs.400-Rs.600 per hour

c. Rs.600-Rs.800 per hour

d. Rs.800-Rs.1000 per hour

e. Rs.1000-Rs.1200 per hour

Q.17 What mode of payment would you prefer for these services?

a. Online pre-payment while booking the service

b. Online payment after availing the service

c. Cash payment after availing the service

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