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INTRODUCTION
Relied on the theories of The Behavioural Model, Health Belief Model, Healthcare Utilization Model, and Concept of Access, possible predictors of a healthcare-seeking behaviour are including three sets of individual characteristics: (1) predisposing factors, such as gender and individual’s socioeconomic status (SES); (2) enabling factors, such as person’s wealth and health insurance ownership; and (3) need factors, such as complexity, burden on lifestyle, and illness severity perception.

Sleman District has been chosen as study setting because of several strategic aspects include urban-rural characteristics, relatively higher life expectancy than other regions, and good transportation accessibility. All data used in this paper derived from the HDSS-Sleman second wave (2016).

OBJECTIVES
2. Long term: help the decision maker to understand about this concern and regarding this to evaluate and provide action and policy for a better health service practice through a variety of aspects.

METHODS
Secondary data derived from standardised interview and questionnaire were analysed. Each head of the household in 216 clusters was asked regarding their family sociodemographic background, health status, and care-seeking behaviour pattern.

RESULTS
Some important findings:

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<th>HDSS-SLEMAN WAVE 2 PARTICIPANT’S CHARACTERISTIC N = 19,593</th>
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<td>Care-seeking E 6,985</td>
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About 6 out of 10 people practiced healthcare-seeking behaviour in their illness case. Eligible participants were selected: 11,516 remain. Bivariate analysis was applied using Pearson-chi square technic. Multivariate analysis was done using logistic regression.

ANOMALIES OF CARE-SEEKING TRENDS REGARDING SOME FACTORS (P< .005)

CONCLUSION
It has been confirmed that care-seeking behaviour upon Sleman District’s population depends on their individual characteristics. Further studies are needed to see whether interpersonal factors, such as social and community support, policy and customs might play an important role in influencing population’s seeking behaviour.

REFERENCES

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