

**KNOWLEDGE, ATTITUDE AND EXTENT OF UTILIZATION OF
PHILHEALTH PRIMARY CARE BENEFIT 1 (PCB 1) PACKAGE
AMONG INDIGENTS AND LGU SPONSORED MEMBERS
IN ILOILO CITY**

by

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ABSTRACT

This descriptive-relational study was conducted to determine the knowledge, attitude towards, and utilization of the benefits and privileges of the PhilHealth Primary Care Benefit 1 (PCB1) Package among the indigents and LGU sponsored members in Iloilo City and the relationship between these variables. Specifically it tried to determine the socio-demographic profile of the respondents as to their age, sex, civil status, educational attainment, average monthly family income and the distance of their residence from the District Health Center; as well as their knowledge, attitude and utilization of the benefits and privileges of the Primary Care Benefit 1 (PCB1) Package. It also sought to determine the relationship between the respondents' socio-demographic profile and their knowledge of Primary Care Benefit 1 (PCB1) Package, attitude towards it, between the level of knowledge and attitude, between the level of knowledge and utilization, and between their attitude and utilization of the benefits and privileges of the PCB 1 Package. Moreover, it also tried to determine the relationship between the level of knowledge and utilization of their benefits and privileges when the attitude is controlled.

The study involved 397 respondents from the different districts in Iloilo City. With the use of a structured interview schedule the data were gathered through face to face interview. Data analysis involved the use of both descriptive and inferential statistical tools. Findings of this study revealed that majority of the respondents were 35-47 years old, male, married, and have attained high school education. They were earning an average monthly income of PhP 5,000.00 to PhP 10,000.00 and they reside 1km to 3kms away from any of the District Health Centers in Iloilo City. The indigents and LGU sponsored program members had a high level of knowledge about the benefits and privileges of the PhilHealth's PCB 1 Package. Their attitudes towards the benefits and privileges of the PCB 1 Package was highly favorable which indicates that they recognized the value and the efficacy of the PhilHealth package program. The data on extent of utilization of the benefits and privileges of the package, however was poor despite their high level of knowledge and highly favorable attitude towards the PhilHealth Primary Care Benefit 1 Package. Only educational attainment was found to be related to level of knowledge about the benefits and privileges of PCB 1 Package. Age, sex, civil status, average monthly income and distance of their place of residence from the district health center were not. Only sex has a significant bearing on the attitude of the indigents and LGU sponsored members towards the benefits and privileges of the PCB1 Package. Furthermore, only the distance of their place of residence from the district health centers was found to have no significant bearing on the respondents' extent of utilization of their benefits and privileges of the PCB 1 Package.

The attitude of the indigents and LGU sponsored members towards the benefits and privileges towards the PCB 1 Package was also found to have no significant impact

on the utilization of their benefits and privileges. Moreover, level of knowledge of the indigents and LGU sponsored members did not also affect their extent of utilization of the benefits and privileges of the PCB 1 Package. Similar findings was noted between the level of knowledge and extent of utilization of their benefits and privileges both for those with highly favorable attitude and those with favorable attitude towards the PCB 1 Package.

Recommendations focused on the need for a wider dissemination and communication of the provisions in the PhilHealth Primary Care Benefit 1 (PCB1) Package, so that a wider audience in the community, especially the target clientele the indigents and LGU sponsored members themselves, will be more aware of the package. This will allow them to participate and avail the services. Moreover, they can also motivate other indigents and LGU sponsored members to avail of the benefits and privileges provided for them. The PhilHealth together with Local Government Unit should identify areas of weakness in the information dissemination and implementation of the benefits and privileges of the program. Furthermore, PhilHealth together with the Local Government Unit should coordinate with each other to monitor and continuously check the implementation of the Primary Care Benefit 1 (PCB1) Package. This is vital to make sure that the District Health Center and their Health Care Providers are cognizant of their responsibilities in providing the target clients their benefits and privileges as what they deserve.