

ANALYSIS OF DRUG PURCHASES AGAINST SELF-FINANCING ATP (ABILITY TO PAY) IN THE EAST BANJARMASIN COMMUNITY

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Abstract

The problem of health financing is the main key in a health system in various countries. Out of pocket expenditures are direct expenditures incurred by households for health services, including costs for consulting doctors, purchasing medicines, retribution for health services, alternative or traditional medicine, gratuities or payments in kind to health practitioners or health facilities.

Knowing ATP (Ability to pay) and the factors that influence the community in the East Banjarmasin region.

The research method used is an analytic observational method with a cross sectional design. This cross-sectional design was used to study the relationship between risk factors (independent), namely the costs incurred to buy drugs and effect factors (dependent), namely the ability to buy drugs, with variable measurements. This research was carried out in February 2021 with a research instrument in the form of a form sheet to look at the factors that influence ATP (Ability to pay) in the East Banjarmasin District.

The average expenditure for buying medicine for the respondents in this study was at most below IDR 50,000.00. This is line with the respondents ATP (Ability to pay) in this study which is under the national ATP (Ability to pay).

The average ATP (Ability to pay) for the people of the East Banjarmasin to buy medicine independently is IDR 90,000.00. Significant factors affect ATP (Ability to pay): marital status, education, expenses, sources of information, willingness to save money and amount of money saved.

Keywords: Ability to pay, expenditure, factors, income, self-medication.

Introduction

Health is a basic need that must be met by every citizen, so it is very important to maintain health. According to Law no. 36 of 2009 concerning Health states that "Health is a state of health, both physically, mentally, spiritually and socially which enables everyone to live a productive life socially and economically" (Law No. 36, 2009). According to the Ministry of Health (2013, cited by Setyawan, 2017) family health is one of the basic elements of family welfare which aims to achieve general welfare from national goals. High work productivity, the potential to utilize natural resources, freedom from the burden of medical and treatment costs for disease, having the opportunity and ability to learn and having the ability to compete independently and healthily will result in healthy human development.

The problem of health financing is the main key in a health system in various countries. Health costs that do not burden the population is the most important measure of a fair funding system (Iqbal et al, 2017). The fair funding aspect is intended as fair and equitable health funding. Research by Hidayat et al (2010, cited by Putra et al, 2014) argues that "To obtain a measure of a family's or community's ability to pay and willingness to pay for health services can be traced from the family's income or expenditure" (Putra et al, 2010).

Out of Pocket Expenditures are direct expenditures incurred by households for health services, including doctor consultation fees, purchasing medicines, health service levies, alternative and/or traditional medicine, gratuities or payments in kind to health practitioners or health facilities. Direct expenditure of funds by households to obtain significant health services can cause households to experience financial difficulties, because the large costs borne by the household will disrupt household finances for other needs (Tarigan and Tati, 2017). Sihombing and Thinni's research shows that out-of-pocket health financing or direct expenditure by households for health services can still burden the household's economic situation (Sihombing and Thinni, 2013).

According to WHO (2010, cited by Rahayuningrum et al, 2017) the average person spends 5-10% of their income in financing health services, while the poorest people can spend a third of their income. WHO also said that 100 million people could become poor due to financing their health services and 150 million people would face difficulties paying for health services. According to the 2013 South Kalimantan Riskesdas, the overall cost of out patient care for the population of South Kalimantan Province is 58.4%, which is still high, coming from out-of-pocket payments. Households that store medicines for self-medication consisting of hard medicines, over-the-counter medicines, antibiotics, traditional medicines and unidentified medicines are 55.5% (Riskesdes South Kalimantan, 2013). Based on the decision of the governor of South Kalimantan No. 188.44 / 0895 / KUM / 2019 concerning the 2020 Regency/City minimum wage in the South Kalimantan Province area for the city of Banjarmasin, which is IDR 2,918,226.70.

Based on the background that has been described, it is necessary to carry out research to examine ATP paying for medicines with "Analysis of Drug Purchases Against Self-Financing ATP (Ability to Pay) in the East Banjarmasin Community".

Method

The research method used is an analytical observational method with a cross sectional design. The research location is in East Banjarmasin District with a research time of 1 month (February) 2021. The research targets are heads of families in the community in East Banjarmasin District. The population in this study were heads of families in the East Banjarmasin region with a total of 36,464 heads of families based on aggregate population data for Banjarmasin City for semester 1 of 2019. In this study, sample data was obtained as many as 104 samples.

In this research, the instrument used was a form of formand the data collection technique was carried out by interviewing respondents.

Results

Respondent Demographic Data

Table 1. Data Respondent Demographics

Characteristics Respondent N=104	Amount Respondent (N)	Percentage (%)
Gender		
Man	88	84.6
Woman	16	15.4
Age		
18-29 years old	36	34.6
30-39 years old	44	42.3
≥40	24	23.1
Marital status		
Not married yet	16	15.4
Widow/Widower	4	0.1
Married	84	84.5
Lever of education		
High school/equivalent	64	61.4
3-year diploma	16	15.3
Bachelor	20	19.2
Postgraduate	4	0.1
Work		
Self-employed	28	26.9
Employee	76	73.1

Source: Kurniawan and Arih, 2011

Table 2. Income and Expenditures of Research Respondents

Characteristics Respondent N=104	Amount Respondent (N)	Percentage (%)
Income		
Above PMW	88	84.6
Below PMW	16	15.4
Expenditure		
On expenditure average per capita	80	76.9
Under expenditure average per capita	24	23.1

Source: Kurniawan and Arih, 2011

Table 3. Sources of Information, Types of Drugs, and Frequency of Drug Use

Characteristics Respondent N=104	Amount Respondent (N)	Percentage (%)
Source information drug		
Family/neighbors	56	53.8
Internet/social media	8	7.8
Advertisement	20	19.2
Health workers (Pharmacy, Health Centers, etc.)	20	19.2
Type of drug used		
Pain reliever and fever reducer	56	53.8
Antibiotics	4	3.8
Ulcer Medicine	12	11.6
Other drugs	32	30.8
How often to buy drug		
Once a month	72	69.2
2-3 times a month	20	19.2
≥ 4 times a month	12	11.6

Source: Kurniawan and Arih, 2011

Table 4. ATP (Ability to Pay)

Characteristics Respondent N=104	Amount Respondent (N)	Percentage (%)
Average expenditure in once very buy medicine		
< IDR 50,000.00	56	53.8
IDR 50,000.00 up to IDR 100,000.00	16	15.4
≥ IDR 100,000.00	32	30.8
Do storage money for buy medicine		
Yes	72	69.2
No	32	30.8
ATP (Ability to pay)		
< IDR 134,721.00	72	69.2
≥ IDR 134,721.00	32	30.8

Source: Sihombing and Thinni, 2013

Discussion

There are 12 factors assessed in this research regarding their influence on ATP (ability to pay). Of the 12 factors assessed, there are six factors that significantly influence ATP (ability to pay), namely marital status, education, expenses, sources of information, willingness to save money and the amount of money saved. Six other factors do not have a significant effect on ATP (ability to pay), namely age, gender, type of work, income, type of medicine owned and frequency of purchasing medicines in a month.

Marital status is one of the factors that has a significant influence on the respondents ATP (ability to pay). Respondents who are married are more likely to assess ATP (ability to pay). Circumstances and emotions are things that may influence, where married people not only think about

themselves but also think about their family if they are sick and unable to earn a living, while those who are still living alone or are widowed have less willpower regarding ATP (ability to pay).

Education is the second factor that influences respondents ATP (ability to pay), where respondents with higher education have higher ATP (ability to pay). This is in line with other studies where respondents with higher education are more concerned about their own health. Higher education also influences concern about saving money for the future.

The third factor is expenditure, where the greater the expenditure, the greater the ATP (ability to pay). This means that purchasing medicines is one of the things that respondents consider important. From the expenses incurred every month, the average respondent prepares funds to purchase medicines.

Research by Rose and Dewi, (2015) shows that the factors that influence an increase in patient WTP (willingness to pay) are family income, level of education and satisfaction with health services. Meanwhile, research results from Syahkila DKK, (2021) show that age, education, employment, number of family members, income and expenses do not have a significant effect on ATP (ability to pay). In this research, several other factors were added which are likely to have a significant influence on ATP (ability to pay).

Sources of information related to the drugs used also influence ATP (ability to pay). Information obtained from health workers will provide more appropriate information for treatment. Although information from family and neighbors is the information most often used by respondents in determining the type of drug to use.

Respondents who want to save money have a greater ATP (ability to pay) than those who don't save money. This shows that people who care about their health will be more willing to save money for medicinal purposes. ATP (ability to pay) is greatly influenced by the respondents financial situation, so that respondents who are ready to save money will have a higher level of ATP (ability to pay) regarding drug purchases.

The amount of money saved by respondents for the purpose of purchasing medicines greatly influences ATP (ability to pay). Respondents awareness of saving sufficient amounts of money will increase ATP (ability to pay). Further research needs to be done regarding the ideal amount of money saved by the public for purchasing medicines.

Table 4.5 Socio-Demographic and Economic Factors that Influence ATP (Ability to Pay)

No	Factor	F	Significance
1.	Age	0.050	0.951
2.	Gender	0.274	0.602
3.	Marital Status	5.722	0.004*
4.	Education	3.622	0.008*
5.	Work	3.801	0.054
6.	Income	1.813	0.181
7.	Expenditure	19.259	0.000*
8.	Source Information	14.871	0.000*
9.	Type of Medicine	2.564	0.059
10.	Frequency Buy	0.453	0.637
11.	Cost for self- Medication	13.652	0.000*
12.	Big Money saved	15.137	0.000*

Stored the average income of the East Banjarmasin area of IDR 3,401,923.08, these results show that the income of the people of East Banjarmasin is above the Provincial Minimum Wage (PMW). The survey results show that the lowest income is IDR 500,000.00 and the highest is IDR 7,000,000.00. An average income that is higher than the Provincial Minimum Wage (PMW) is an indication that the people of East Banjarmasin are able to save part of their income to purchase medicines.

The average expenditure of people in the East Banjarmasin area is IDR 2,230,769.23. The average expenditure of the people of East Banjarmasin is below their income, thus allowing people to save money. The lowest expenditure is IDR 500,000.00 and the largest is IDR 4,500,000.00. Average expenditure shows the cost of living required by the people of East Banjarmasin to meet their daily needs.

From the results of a survey conducted, the cost of purchasing medicines in the East Banjarmasin area independently was IDR 31,000.00, with the highest independent purchase cost being IDR 75,000.00 and the lowest being IDR 20,000.00. This shows that not all people in East Banjarmasin realize the importance of saving funds to purchase medicines in the future.

ATP (ability to pay) for people in the East Banjarmasin area to buy medicine independently for IDR 90,000.00. The lowest ATP (ability to pay) is IDR 50,000.00 and the highest is IDR 500,000.00. This shows that not all people in East Banjarmasin are aware that purchasing medicines independently is important and people must realize the importance of saving funds for the need to purchase medicines in the future.

Mulyanto, (2016) in his research shows that several factors that influence ATP (ability to pay) are marital status, income, number of families in one house, frequency of visits, number of visits to

other health facilities and payment method. This is in line with this research where marital status is a factor that significantly influences ATP (ability to pay). Apart from these factors, there are expenditure factors, education, sources of information, the amount of costs incurred for self-treatment and the amount of money saved for self-treatment. The income factor in this study does not have a significant effect on ATP (ability to pay), but expenditure is a factor that has a significant effect on ATP (ability to pay).

Sihombing and Nurul, (2013) in their research found that the results of patients medical expenditure for 1 month in this study were quite high with an average of IDR 236,278.00, and the majority were patients who had low ATP (ability to pay), namely between IDR 55,000.00 up to IDR 141,667.00. In this research, this is in line, because the ATP (ability to pay) is low, namely between IDR 50,000.00 up to IDR 500,000.00 with an average of IDR 90,000.00.

Conclusions

The average income of the people of East Banjarmasin is IDR 3,401,923.08. Average expenditure people of the East Banjarmasin region IDR 2,230,769.23. The cost of independently purchasing medicines in the East Banjarmasin area is IDR 31,000.00. ATP (ability to pay) for people in the East Banjarmasin area to buy medicine independently for IDR 90,000.00. With ATP (ability to pay) the lowest is IDR 50,000.00 and the highest is IDR 500,000.00. Marital status, education, expenses, sources of information, willingness to save money and the amount of money saved are factors that have a significant influence on ATP (ability to pay).

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