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Preferences for health-care facilities in urban China: a discrete choice experiment

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Abstract

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Background Robust evidence to understand the choice of health-care facility access level is important to support policy measures to address the problems of misuse of hospital-based services and the underuse of primary care services. We examined the importance of the facility attributes that influence this choice, and the trade-offs made by the general public between these attributes in urban China.

Methods We did discrete choice experiments in Shanghai, China, for perceived mild and severe disease scenarios. We defined and used seven facility attributes: total visit time, out-of-pocket cost per visit, medical skill, personal connections, medical equipment, transportation time, and facility size. We recruited respondents using a stratified cluster sampling method, according to a predefined sample quota in age and sex. Trade-offs made by respondents among the attributes were analysed using mixed logit models. Besides the analysis on the main effects, we did a prespecified analysis to examine disease severity and individual-difference variables. This study was approved by the Shanghai General Hospital Medical Ethical Review Committee. We obtained written informed consent from all participants.

Findings A total of 532 residents completed the experiment (mean age 48.5 years, SD 15.0; 275 (52%) were male respondents). In general, ranked from the largest to smallest relative importance score, the significant attributes were total visit time (25%), medical equipment (25%), medical skill (12%), personal connections (12%), out-of-pocket cost per visit (11%), facility size (9%), and transportation time (7%). When disease was severe, the respondents were more tolerant to longer waiting time than when the disease was minor, and they showed a stronger preference to visiting a facility, especially to facilities with better medical equipment and those that were larger in size. The respondents also showed a strong aversion to prolonged transportation time and poor medical skill.

Interpretation To the best of our knowledge, this is the first discrete choice experiment done in China on the choice process of health-care facilities. People attached high importance to medical equipment in general, and to facility size when the disease was more severe. These findings could inform policy making to increase the use of primary care by improving the access to medical equipment. It also suggests that the public exposure of quality indicators other than the external factors of health-care facilities might help patients' decision making.

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Contributors

YL and JvdK conceived the study. YL, EWdB-G, and JvdK designed the study. YL, SW, and LZ collected the data. YL, QK, EWdB-G, and JvdK analysed and interpreted the data. YL drafted the Abstract. All authors have seen and approved the final version of the Abstract for publication.

Declaration of interests

We declare no competing interests.