Intention to Enroll in Community-Based Health Insurance and Associated Factors Among Households of Janamora District, North Gondar Zone, Northwest Ethiopia, 2023

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INTRODUCTION AND OBJECTIVE

Globally, different countries are trying to provide financial protection from the costs of using health services since about 44 million households are exposed to disastrous healthcare-related expenses. The utilization of health care CONCLUSIONS services is higher in community-based health insuranceinsured households than in uninsured households. A small number of people are enrolled in low- and middle-income countries including Ethiopia.

Objective: To assess the prevalence and determinants of intention to enroll in health insurance among households living in Janamora district, Northwest Ethiopia, 2023

METHODS

A community-based cross-sectional study was conducted from March 27, 2023, to April 20, 2023. Systematic random sampling techniques and intervieweradministered data collection were used. Data were entered into Epi Data version 3.1 and exported to Stata version 14 for analysis. A binary logistic regression was used. A p-value less than 0.25 in the bivariable was entered into multivariable logistic regression. In multi variable regression variables at α p-value, less than 0.05 with a 95% confidence interval were declared as significant variables.

RESULTS

The prevalence intent to enroll in the health insurance scheme was 81.70% with 95%CI=78.49%, 84.50%). Good Knowledge [AOR=2.05, [95%CI=2.05, 3.94],favorable attitude [AOR=2.74, [95%CI=2.33, 4.57], presences of social capital [AOR=8.22, [95%CI=3.81,12.46], explain about community-based health insurances(CBHI) is payment for Government tax[AOR=0.32, [95%CI=0.11, 0.90], presences of chronic illness [AOR=4.00, [95%CI=1.29,12.33] Community-based.

and being ill in past [AOR=3.40, [95%CI=1.60, 7.19] were significantly associated with intention to enroll to Communitybased.

A high proportion of households have an intention to enroll variables knowledge, attitude, socia capital, explanations of CBH chronic illness, and illness in the past were significantly associated

Recommendations

To local health managers:

shall better to extend and the implementation **CBH** of scheme having and good knowledge through differen media.

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shall better to extend and the **CBH** implementation of scheme having and good knowledge through differen media.

To health professionals: shall better to teach the patient to be member notice and presences of care when the come to health facilities.

To researchers:

shall better to study with wide geographical area

	<u>Variable</u>	Intention to	enroll	With 95%CI	
		No	yes	COR	AOR
	Educational status			1	1
	Can't read &write	41(35.96)	162(31.7		
			6)		
	Can read &write	19(16.67)	115(22.5 5)	1.50(0.84, 2.77	1.38(0.55, 3.44)
	Primary school	29(25.44)	161(31.5	1.40(0.83, 2.37)	0.95(0.41, 2.16)
			7)		
ds	Secondary	7(6.48)	47(13.94	1.69(0.71, 4.03)	1.09 (0.72, 3.42)
10	College \$above	18(15.79)	25(4.90)	0.35(0.17, 0.75)	0.33(0.08, 1.23)
es	Income				
al	<20,000	95(83.33)	429(84.1	1	1
-	20,000-49,000	8(7.05)	17(3.33)	0.47(0.19, 1.12	0.61(0.13, 2.69)
1,	>50,000	11(9.65)	64(12.55	1.20(0.65, 2.53)	2.61(0.86, 7.91)
ne)		
J.	Household	6(2.63)	35(7.47)	1	1
<i>p</i> i	status				
	Child Husband	82(74.56)	372(72.3	0.70(0.10, 1.13)	0.44(0.05,3.67)
	Truspanu	,	5)	. , , , ,	
	Wife	7(2.63)	14(3.53)	0.34(0.08,2.58)	0.26(0.045,12.7 3)
	Relative	19(20.18)	80(16.67	0.29(0.08, 1.03)	0.41(0.04, 3.64)
e	Presences of				
TT	children	81(72.97)	307(60.2 0)	1	1
11	No		O)		
1	Yes	30(27.03)	203(39.8	1.78(1.13, 2.81)	1.16(0.55, 2.42)
d	Decision maker		0)		
-4	Husband	96(82.46)	448(87.8	1	1
Il	Wife	20(17.54)	4) 82(12.16	0.65(0.37, 1.12)	2.16(0.55, 6.80)
	Wile	20(17.3.))	0.00(0.07, 1.11)	2.25(0.55) 0.65)
	Family size	43(81.58)	453(88.8	1	1
	<u><5</u>	+3(01.30)	2)	•	•
	>5	21(18.42)	57(11.18	0.55(0.32, 0.96)	1.53(0.50, 4.65)
	Social capital)		
ie	No	71(62.28)	44(8.63)	1	1
11	Yes	43(37.72)	466(91.3 7)	8.48(1.72, 9.75)	8.22(3.81,12.46)
11	explain CBHI		,		
d	Prepayment for	77/67 54)	405/70 4	1	1
u	health serves	77(67.54)	405(79.4 1)	1	1
nt	Free health delivery	6(5.26)	45(8.82)	1.42(0.58,3.45)	0.88(0.25, 3.13)
AU	paying tax for Gov't	31(27.19)	60(11.76	0.36(0.22, 0.60)	0.32(0.11, 0.90)
	Knowledge				
	poor	33(61.40)	70(21.56	1	1
er	Good	81 (38.60)	440(79.4	2.56(1.72, 4.53)	2.05(1.20, 3.94)
	Attitude		3)		
e	Un favorable	21(18.42)	31(6.08)	1	1
	Neutral	10(8.77)	27(5.29)	1.82(0.73, 4.55)	1.65(0.43, 6.30)
e	Favorable	83(72.81)	452(88.6 3)	3.69(2.02, 6.73)	2.74(2.33, 4.57)
	Chronic illness				
y	No	105(9.11)	388(76.0 8)	1	1
	Yes	9(7.89)	122(23.9	4.66(1.80, 7.46)	4.00(1.29,12.33)
			2)		
	Illness in the past No	76(66.67)	131(25.6	1	1
		()	9)		
	Yes	38(33.33)	379(74.3	5.78(3.73, 8.95)	3.40(1.60, 7.19)
le	Medical expenses		1)		
	No	58(50.87)	140(27.4	1	1
	Yes	56(49.12)	5) 370(72.5	2.73(1.50,4.07)	1.89(0.91, 3.93)
		5(10.12)	370(72.3 4)		(3.31)

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