Abstract

In this study, the longitudinal survey data on “The health and living status of the elderly in Taiwan” collected by Bureau of Health Promotion in 1989, 1993, 1996, 1999, and 2003 will be used to investigate the health utilization behaviors of the elderly in Taiwan. The investigation relies on introducing a concept “household-based convoy” into the Andersen’s health utilization model to achieve the following three purposes:

1. Policy implications
   In this study, Andersen model will be used to analyze three types of health utilization behaviors including regularity of medicine taking, the use of overall health examination, and numbers of clinic visit. The concept of household-based convoy is added to Andersen model in order to reflect an informal support system. We suppose that the inclusion of the convoy concept will enable us to point out which member of an informal support system is most influential in increasing the elderly’ health utilization behaviors. Health department may use the information about informal social support to promote the health status of the elderly.

2. Methodological implications
   Andersen model has been criticized for having a relatively low explaining ability. In this study, we would like to know whether the household-based convoy has the ability to increase the model’s explanation power.

3. Theoretical implications
   Theoretically, the household-based convoy is assumed to be a dynamic concept. Its members are supposed to be different in different life-course stages. Using the data mentioned above, we are enabled to examine whether the household-based convoy of the elderly will change in life-course stages. Moreover, it is also interesting to examine whether the change may affect the health utilization behaviors of the elderly.

Key words: social support, household-based convoy, medical utilization, elderly