

Background: Health seeking behavior among the older people remains as a big challenges in both developing and developed countries in the world. The authorities in the country have addressed the issue of older people and health services in several ways one being providing health services for free to all elderly people in the country; however these efforts have not changed the pattern on how older people are seeking health care services both in public and private health facilities. Objective: overall objective of this study was to investigate the determinants of health seeking behavior among the older people in Buzirayombo Division in Chato district Tanzania Methodology: The study employed cross-sectional descriptive study design where all elderly people in Buzirayombo division both male and female aged 60years and above were involved. Cluster sampling of the study population and non proportionate sampling was used to get 403 respondents. Semi-structured research administered questionnaire was used. SPSS was used to analyze data and ethical consideration was obtained before the study from various authorities and informed consent from the respondent.

Results: Majority of respondents were female 208 (51.6%), 34.2% aged 60-64. However being in paid employment for past 6 month and amount of income spent on healthcare services was statistically significant (OR 1.914, P-value 0.035 and 1.045, P-value 0.042 respectively). Furthermore Majority (55.3%) of respondent perceived their health status to be fair 83.9% with disabilities, 76.2% with depression and 55.8% not feeling loneliness. However perceived health status, presence of disabilities, traits of depression and feeling of loneliness was statistically significant affecting health seeking behavior among the elderly (OR 1.925, P-value 0.000. 0.420, P-value 0.002. 0.412, P-value 0.003 and OR 1.349 and P-value 0.0002 respectively).

However Majority 92.8% had never experienced discrimination when seeking healthcare, 90.8% never thought of not being important when seeking healthcare services and 66.7% accepted accessibility and availability promotes health seeking behavior. Beliefs, self image, taboos and socio-cultural factors were statistically significant influencing health seeking behavior among the elderly (OR 1.221, P-value 0.021, 1.386 P-value 0.046, 4.906 P-value 0.000 and 1.353 and P-value 0.048 respectively) Majority 56.6% of respondents were living with their spouse. However community support networks was statistically significant influencing health seeking behavior among the elderly in Buzirayombo division (OR 1.438, P-value 0.032, 1.299 P-value 0.043, 0.709 P-value 0.041, 1.513 P-value 0.003, 1.501 P-value 0.014 and 1.858 P-value 0.001 respectively). Conclusion: Majorities 75.2% of elderly were having bad health seeking behavior, this is a suggestive that elderly seeks healthcare services when they have either disability related illness and when there not feeling health. Recommendation: Government intervention that are targeting elderly"s and their health seeking behavior may play a big role in improving health seeking behavior among the elderly in Buzirayombo Division in Chato district Tanzania.