

CHAPTER VI

CONCLUSION AND RECOMMENDATION

6.1 Conclusion

Every year thousands of Myanmar people flee across the border to neighbouring countries especially into Thailand (Labor Migration in Greater Mekong-Sub-region, 2006). The presence of large number of registered Myanmar migrant people and twice the figure of them are unregistered migrants which are the most political as well as health concern for Thailand. Although Phang Nga Province had quite a lot of Myanmar migrant people, there was no baseline data on contraceptive used by Myanmar migrant. This study found a lot of opportunities and constraints in addressing the promoting contraceptive use and family planning knowledge of the Myanmar migrant women.

The data from this study was collected in Takuapa District and Kuraburi District in Phang Nga Province in February, 2008. The sample size for this study was 326 Myanmar migrant women of reproductive age who were neither pregnant nor menopause during the time of interview.

The main purpose of this study was to determine the prevalence of contraceptive usage and to identify the factors relating to the contraceptive use among Myanmar migrant women of reproductive age who were residing in Takuapa District and Kuraburi District in Phang Nga Province, Thailand.

The statistical package for social science (SPSS) were using for analysis of the data of this study. Chi-square test, Fisher Exact test and logistic regression were used for relationship between independent variables and current used of contraception.

The study reported that the prevalence of contraceptive use among Myanmar migrant women in Takuapa District and Kuraburi District in Phag Nga Province was 73.3%. The most common contraceptive methods were injectables and oral pill. The most common reasons why they preferred current methods were easily available, side effects of other methods and convenience to use. Regarding to the practicing contraception, majority of the married women discussed about family planning with their husbands/partners and more than half of them made the decision with their husbands/partners for using contraception.

All the respondents in this study were in the age range from 15 to 49 years and majority of the respondents were distributed in the age group of 20 to 39 years. Most of them were married and among the married women, 81.6% were culturally married. Among the married women, 51.8% have been married for 1-3 years, the duration of marriage was ranged from 3 months to 29 years and more than half of them had 1-3 children. Almost all of them were Buddhist and more than half of the women in this study came to Thailand with primary educational attainment from home country. More than half of the women were working in rubber garden, construction, etc while nearly half of them were housewives. In this study, total monthly family income ranged from 800 Baht to 20000 Baht although nearly half of them had income 2001-4000 Baht per month. More than half of the respondents in this study had been stayed in Thailand 1-3 years but two third of the women were staying as unregistered

migrant. Although they had been staying in Thailand for years, one third of them can not communicate at all and more than half of them can communicate only basically.

In terms of knowledge and attitude towards contraceptive methods and use, most of the women heard of contraceptive methods and half of them had moderate level of knowledge while nearly half of them had low level of knowledge about contraceptive methods and use. Although injection and oral pill were the most commonly used methods, the knowledge of these two methods were still low. More than two third of the respondents in this study had moderate level of attitude towards contraceptive methods and use.

In terms of accessibility, more than half of the current users rely on the private clinic and drug stores. Majority of the current users went to the source to get the contraception by walking or public vehicles. More than half of them stated that they resided near the source for getting contraception and majority of them said that it was convenience to go there. For cost of contraceptive methods, average cost was 187.55 Baht per month/dose and it was ranged from free of charge to 8000 baht. 16.7% of current users got contraception especially pill or injection for free of charge from NGO, 38.9% spent 1-50 Baht per month or per dose and 33.5% paid 51-100 Baht. Majority of them perceived that they could afford the cost of contraceptive method they used and most of them also satisfied the service they got.

The relationship between independent variables and current use of contraception is analyzed as bivariate analysis and multivariate analysis. In bivariate analysis, the result of this study found that there is significance difference between age, marital status, marital duration, education, occupation, number of living children,

knowledge towards contraceptive methods and use, perception on cost and current use of contraception.

In multivariate analysis, the significant variables in bivariate analysis are reexamined after controlling for other independent variables. The result of multivariate analysis reveals that age of the respondents, number of living children, knowledge towards contraception and perception on cost is significant after controlling other independent variables.

Concerning the need of the respondents towards family planning and contraception, the respondents reported that they need for provision of contraceptive with cheap price, more information on family planning and family planning clinics.

6.2 Recommendation

From this study, only 16.7% of current users get contraception free from NGO and more than half of current users rely on private clinic and drug stores were found out. It can be cost and make them to stop utilizing. Government services and NGOs should focus on encouraging and promoting use by giving contraception free frequently as that was the main need from this community.

As found from this study, there is a gap between use and knowledge of injectables and oral pill. So, provision of adequate information about variety of contraceptive methods is necessary in this community. For that matter, IEC materials should be produced and introduced in the community of Myanmar migrant.

For IEC material, simple manual in Myanmar language should be provided. In this manual, side effects, how to use and contraindication for each method should be

included. This manual should be distributed through leaders of Burmese community, drug stores and private clinic.

Majority of the married women discussed with their husband about family planning and more than half made decision by both partner. In decision making, the role of husband was not negligible. So, provision of knowledge regarding contraception should be given not only to the women but also to their husbands.

Since this study had limited by time constraint, the quantitative variables that were thought to affect the non use of contraception among Myanmar migrant women were chosen. However, in order to know more in-depth about the cultural beliefs and social norms whether it is related to the use of contraception or not, qualitative research should be carried out.

Although the use of condom as contraception was low in this study, the knowledge regarding condom as prevention of pregnancy and prevention of sexually transmitted diseases were high among Myanmar migrant women. Further study should be done concerning practicing condom for prevention of STDs among migrant community.

In this study, one fifth of migrant women had experience on abortion was found out. Abortion is still a problem in migrant community which can impact on health of women in terms of morbidity as well as mortality. Therefore, usage of contraception in women with unplanned pregnancy should be studied. Moreover, qualitative study on the topic of health seeking patterns and accessibility of health services in women who had abortion should be carried out.