PREVALENCE AND DETERMINANTS OF ACCESS TO, PERCEPTIONS ON, AND PREFERENCES FOR, HIV-RELATED HEALTH EDUCATION AMONG MYANMAR MIGRANT WORKERS IN RANONG, THAILAND



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The main objective of the study was to assess the accessibility to, perceptions on, and preferences for, HIV-related health education among Myanmar migrant workers in Ranong Province, Thailand. A cross-sectional study design with structured questionnaire and an open-ended question was used, and 357 subjects were interviewed. Non-parametric tests and bivariate correlation were used for hypothesis testing.

In all, 245 workers (68.6%) had received HIV-related health education, and both males and females had very similar access. Longer length of stay in Ranong was associated with greater access, but youth (15-25 yr.) had less access than older subjects. There was no significant difference in access when comparing the high-risk occupational group with other occupations, but when fishery-related workers were excluded, high-risk workers had more frequent access than others. Regarding perceptions, only 6.2% agreed that they had adequate access, and only 11.6% were satisfied with level of access. However, all believed that HIV/AIDS is an important matter. All preferred participatory types of HIV-related education over nonparticipatory ones. This preference was significantly stronger in the high-risk group than in others. However, subjects also preferred some non-participatory methods, especially condoms and lubricants, cartoon/comic booklets, real-life photo story booklets, pamphlet/leaflets/ brochures, TV drama, and TV spots. The migrant workers strongly preferred to receive HIV-related health education in any place except government health centers and border gates. The majority of the supplementary qualitative information from the open-ended question reinforced the quantitative findings of the study.

It is expected that the results of this study would to be useful for the review and planning of health education, health promotion, development of information, education and communication (IEC) and training materials, and behavior change communication (BCC) interventions regarding HIV/AIDS prevention and control among Myanmar migrant workers in similar settings in Thailand and elsewhere.

Field of Study Health Systems Development	Student's signature_	200	
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LIST OF ABBREVIATIONS

AIDS Acquired Immuno-deficiency Syndrome

ANC Antenatal Care

BCC Behavior Change Communication

CBO Community-based Organization

CCSDPT Committee for Coordination of Services to Displaced Persons in

Thailand

CDC Centre of Disease Control

CIA Central Intelligence Agency

FHI Family Health International

GDP Gross Domestic Product

HDI Human Development Index

HE Health Education

HFC Hebrew for Christian

HIV Human Immuno-deficiency Virus

HSS HIV Sentinel Sero-Surveillance

IDU Injecting Drug User

IOM International Organization for Migration

ILO International Labor Organization

MMWR Morbidity and Mortality Weekly Report

MoPH Ministry of Public Health

MSM Man Who Have Sex With Man

NAP National AIDS Program

NGO Non-governmental Organization

NSO National Statistics Office

PE Peer Education

PHAMIT Prevention of HIV/AIDS Among Migrants in Thailand

PLHIV People Living With HIV

RH Reproductive Health

SHG Self-help Group

SG Service Girl (especially Karaoke Service Girl)

SMS Short Message Service

STD Sexually Transmitted Disease

STI Sexually Transmitted Infection

SW Sex Worker

TB Tuberculosis

UN United Nations

UNAIDS Joint United Nations Program on HIV/AIDS

UNDP United Nation Development Program

UNFPA United Nations Population Fund

UNHCR The Office of the United Nations High Commissioner for Refugees

UNICEF United Nations Children Fund

VCCT Voluntary Confidential Counseling and Testing

VCD Video CD

WHO World Health Organization

WVFT World Vision Foundation of Thailand