การศึกษานี้มีข้อ เพื่อแสดงถึงพฤติกรรมและปัจจัยที่มีผลกระทบต่อการพัฒนาสุขภาพของผู้พำค้าในเขตมณฑลย่างวุ้น ประเทศพม่า (HEALTH SEEKING BEHAVIORS AMONG MYANMAR MIGRANT WORKERS IN RANONG PROVINCE, THAILAND) อ.ที่ปรึกษาวิทยานิพนธ์หลัก: วร.ดร.สถิร شعبพานิช, 88 หน้า
This study was conducted to identify the health seeking behaviours and factors related to those behaviours among Myanmar migrant workers in Ranong Province, Thailand. The data was collected using a structured questionnaire to 388 Myanmar migrant workers during February 2009.

The majority of migrants were between 18 to 35 years of age. Around two thirds of them were males. The majority of migrants attained primary or middle school. 46.9% had been in Ranong for 1 to 5 years. 44.1% of the migrants had average net household income of 1,500 to 3,000 Baht per month. Around two third of the respondents were unregistered. 50% of the respondents can speak Thai language basically. 34.5% of the respondents had underlying health problems. Around half of the respondents were staying in the work compounds. The majority of the migrants had 1-5 people staying together in their house with only 1 room, 2 to 3 doors and windows and attached latrines. Most of them were working more than 8 hours a day for more than 5 days per week. Most of the respondents were satisfied with light and ventilation/dust conditions but some were not satisfied with sound and smell conditions in their workplace. Regarding accessibility, almost all of the migrants were accessible to the health care services and they were satisfied with the health centers they visited. But half of them stated they would go to the health centers only when their conditions get worse.

Buying drugs from a drug store is the most common health seeking behaviour for the perceived minor health problems while going to the health centers for major health problems. Among the health centers, private clinics were preferred more than Government hospital and NGO clinics.

Individual characteristics such as gender, occupation, registration status, place of resident and number of working days of the migrants were significantly associated with the going to the health centers with p-value <0.005. Regarding the accessibility to the healthcare services, there is a significant association between going to the health centers and presence of health insurance, time taken to travel to the health centers, consultation fees and opening time of the health center. There is a significant association between duration of stay in Ranong, occupation, registration status, presence of health insurance and the choice of Government or private health centers. Between the Government and private health centers, there is a significant difference in terms of consultation fees and waiting time between the two of them.