

# Women's Health-Care Practices Migrant Workers of Myanmar in a Southern Province, Thailand

Daycho Khaenamkhaew<sup>1\*</sup>

<sup>1</sup>Nakhon Si Thammarat Rajabhat University, Thailand

\*email: Daycho\_kha@nstru.ac.th

## ABSTRACT

This study was quantitative in nature. Its goal is to investigate workers' health-care behavior. Transnational women of Myanmar origin A questionnaire were used to collect data from 119 Myanmar women migrants for the study. The frequency, percentage, mean, and standard deviation of the data were analyzed. The study's findings showed that: The health-care behavior of migrant women of Myanmar nationality was discovered. Overall, the situation is excellent. They got the greatest degree of attention and medical treatment, followed by high amounts of physical activity for optimal health. There is exercise that is suited for people of all ages. High-level stress relief can be achieved through a variety of means. And the item with the lowest mean is Obtain a high degree of expertise and comprehension of health management problems.

## Keywords

Women's Health-Care Practices; Migrant Workers of Myanmar

## Introduction

Thailand has a vast economy with a strong pace of growth. However, there is a labor shortage on the workplace. Unwanted responsibilities such as arduous, unclean, and even dangerous employment. This allows firms to bring in a large number of migrant workers from neighboring countries to compensate for Thailand's worker shortfall. This led in the influx of migrant workers from countries such as Myanmar, Laos, and Cambodia to Thailand in the form of employing migrant workers. The cause for increased movement of migrant workers, particularly during the AEC's introduction [1, 2].

Many migrant workers come to work in the provinces of the south, and the government has put in place mechanisms to allow migrant workers to stay in the state and work. In the positions that are available, there are competent employees who work and solve difficulties. Semi-skilled employees might be workers in the production line who use basic skills, whereas unskilled employees are lower-level employees who do not require expertise and merely work on instructions from their employers. Myanmar migrant workers, in particular, come to live as part of the Thai community. Which cannot ignore the influence on health and the creation of systems to address distinct health issues. Migrant Workers' Health Behaviors in Thailand, it may be a major health issue for migrant workers, and the right to be unaware of the health insurance system poses a risk to migrant employees who become unwell [3, 4].

Even women migrant workers of Burmese origin may not be taking care of their health as well as they should. Because it focuses on working, health care and exercise have little effect on health, thus it is critical for the community to encourage health. Local government groups and government agencies are actively involved in promoting [5, 6], With the formulating policies or answers to health concerns among Myanmar women from various cultures, in order to define a course and create an integrated solution to the problem [4].

Based on the preceding significance Researchers are keen to investigate: Women's Health-Care Practices Migrant Workers of Myanmar in a Southern Thailand Province. What is the health care behavior of women migrant workers of Myanmar nationality, according to the study question? Identifying a viewpoint on health care behavioral levels and obtaining helpful information on developing health services for Myanmar women migrant workers in the southern regions.

## Methodology

This study is quantitative. The study was carried out between May 2018 and July 2019. Thailand's southern provinces: The both population and the sample are women workers worker of Myanmar origin the sample was

determined using the Cochran sample size calculation because the precise female population was unknown [7], Can adjust the 95 % confidence level to 5%. To enable data processing, 73 workers are needed to collect samples. The researcher used 119 samples, all of which were found to be compliant. Sampling without relying on unintentional random chance [8]. The research equipment was Questionnaires derived from the study's studied materials and associated research by the researcher There are actions to do in order to create, such as studying concepts and theories concerning healthcare services. Relevant materials and research findings on women migrant workers of Myanmar origin from the book. Then, to cover the content and objectives, create a conceptual framework. Then, using the conceptual framework, develop a questionnaire. And the query construction method's theories are the respondents' basic information included their age range, skills, and work abilities. Thailand working experience Income per month and marital status. The poll and is a closed-ended question on the problem (1) proper exercise for the age range of women migrant workers of Myanmar nationals. (2) got medical treatment (3) participated in sports for good health (4) gained knowledge and comprehension of health management circumstances (5) Use a variety of strategies to relieve stress. A score of 5 means most agree, 4 means high, 3 means moderate, 2 means low, and 1 means least agree. The interpretation of mean scores is most agree = 4.51 - 5.00, high = 3.51 – 4.50, medium agree = 2.51 - 3.50, less agree = 1.51 - 2.50, and least agree = 1.00 - 1.50 [9], When the questionnaire was completed successfully, the tool's quality was evaluated by giving the completed questionnaire to the experts. And modified for an adequate number of 5 people to develop assessing the quality of the tools in terms of content and question form. Perform testing on the data collecting tools. By re-presenting the questionnaire, the instrument was tested (Try-out) on 30 participants to determine the instrument's confidence using the Alpha Cronbach Coefficient technique, and the coefficient was 0.775 [8]. Cronbach's alpha should not be less than 0.7 [10]. In addition, the amended questionnaire will be double-checked. In addition, a detailed questionnaire will be published. To be distributed to a larger real-world sample. Rephrase Obtaining Information, the researcher has asked approval of a letter asking permission to gather research data. The researcher will next present a letter seeking permission to gather information from the institution. Permission to gather research data is offered to enterprises / employers of Myanmar workers. the researchers will gather data by sending questionnaires to the sample through 119 Myanmar translators and receiving 119 surveys back, accounted for completely. Data analysis of respondents' general information included age, skills, workforce, and work experience in Thailand. Monthly earnings Marital status, as well as analysis and interpretation of statistics such as percentages and the use of tables for explanation, and the health-care behavior of woman migrant workers of Myanmar origin. Study and analyze data such as mean and standard deviation, and take use of annotation tables.

## Result

### 1. Respondents' general information. The findings of the study are as follows:

**Table 1:** Respondents' general information

<b>Respondents' general information</b>	<b>Number</b>	<b>Percentage</b>
1. Age group (years)		
36 – 45	53	44.54
46 – 55	21	17.65
26 – 35	20	16.81
56 – 65	15	12.60
18 - 25	6	5.04
More than 66	4	3.36
2. Professionalism in the workplace		
Low-skilled work	71	59.67
Semi-skilled work	38	31.93
Expertise in work	10	8.40
3. Explore Thailand (years)		
less than 10	70	58.82

<b>Respondents' general information</b>	<b>Number</b>	<b>Percentage</b>
10 to 20	46	38.66
more than 20	3	2.52
<b>4. Monthly earnings (baht)</b>		
5,001 – 10,000	103	86.56
10,001 – 15,000	8	6.72
less than 5,001	5	4.20
more than 15,001	3	2.52
<b>5. Marital Status</b>		
Single	105	88.24
Married	8	6.72
Separated	5	4.20
Divorced	1	0.84

That according Table 1: the general information of the respondents revealed that the majority of woman migrant workers with Myanmar nationality are aged 36-45 years, with 53 people (44.54 percent), having a lower education level than a bachelor's degree, and 117 people (98.32 percent), being unskilled workers, numbering 71 (59.67 percent), knowledge Working in Thailand for less than 10 years, 70 individuals (58.82 percent), monthly income of 5,001 - 10,000 baht, 103 people (86.56 percent), and being single, 105 people (88.24 percent).

## 2. Women migrant workers of Myanmar nationality's health-care habits. The study's findings are as follows:

**Table 2:** shows the standard deviation and degree of health care behavior of women migrant workers of Myanmar origin.

<b>Women migrant workers of Myanmar nationality's health-care habits</b>	<b>Level of health-care behavior</b>		
	<b>Mean</b>	<b>S.D.</b>	<b>Results must be interpreted</b>
1. Received medical attention and treatment	4.53	0.73	most
2. Participate in sports for excellent health.	4.18	1.03	high
3. There are workouts suitable for the age range.	3.72	1.02	high
4. Use a variety of stress-relieving techniques.	3.68	0.98	high
5. Increase your knowledge and awareness of health management problems.	3.64	1.14	high
<b>Total</b>	<b>3.95</b>	<b>0.98</b>	<b>high</b>

That according Table 2: the health care behaviors of migrant women of Burmese nationality were generally high (Mean = 3.95, SD = 0.98). They got the greatest degree of care and therapy (mean = 4.53, SD = 0.73), followed by high levels of sport for good health (mean = 4.18, SD = 1.03), There was a high level of adequate exercise for the age range (mean = 3.72, SD = 1.02), a high level of stress release with different techniques (mean = 3.68, SD = 0.98), The smallest mean is Learn about health management scenarios and have a better grasp of them, high level (mean = 3.64, SD = 1.14)

## Conclusion

Overall, the health-care behavior of woman migrant workers of Myanmar nationality was high. They got the greatest degree of care and treatment (mean = 4.53, SD = 0.73), followed by high amounts of physical activity for good health (mean = 4.18, SD = 1.03). There was a high degree of activity that was age-appropriate (mean = 3.72, SD = 1.02). The different techniques of stress release were effective (mean = 3.68, SD = 0.98) and the one with the lowest mean was. Learn about health management scenarios and have a better grasp of them. High level (mean = 3.64, SD = 1.14). The health-care behavior of women migrants from Myanmar was found to be outstanding. In contrast, Phromprasit [11], Petchrak&Somboonmak [2], Songtab&Thongsamsee [3], all reached similar results that "moderate". This is because women migrant workers of Myanmar nationality are more focused on health management as "women" than men. Learn about health management scenarios and have a better grasp of them. Very

good Because of the receipt of basic benefits and medical treatment This is consistent with the findings of the [12], which indicated that the average usage of health services was high based on the right of treatment of migrant workers registered in health insurance. There is a high level of interest in participating in sports for good health. This contradicts the findings of the Kheawvichai et al [13], which showed that sports participation and interest were moderate. There is a high level of physical exercise that is age-appropriate and maintains the body healthy. This is consistent with Phattharadet [14], which found that adequate exercise was at a high level. Because of a favorable attitude toward regular exercise. For high-level stress relief through a variety of approaches This is consistent with Thonglong [15], which indicated that stress-relieving activities such as planting trees, rearing animals, listening to the radio, and watching television assist to relax tension. Acquire in-depth knowledge and comprehension of health management scenarios. This is similar with the findings of a research by Leeyutathanon et al. [16], which suggests that boosting health management and health status awareness at a high level is beneficial. Because they now have a better grasp of how to maintain their own health.

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