

Thesis Title Filariasis Risk Behaviors : A Study in a
Community of Nakhonsithammarat Province

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Abstract

The objectives of this study were to investigate risk behaviors and socio-cultural factors affecting filariasis transmission in a rural community of Nakhonsithammarat Province. The data was collected using qualitative methods including group interviews, indepth interviews, and participant observations. The administration of data collection last for four months. The sample was selected from key informants and villagers who were historically both symptomatic and asymptomatic for filariasis. Simultaneously, an twenty-four hours entomological study on mosquito biting habits was conducted by cooperation with Filariasis Center 11.

The result revealed that most people lack general knowledge of filariasis. Their beliefs the cause of filariasis were also incorrect. For example, they believe that mosquitoes are not the filariasis vectors. Although, the villagers were aware of the disease, but they

did not perceive themselves to be at risk for contracting filariasis, and because of this, disease prevention behavior was rarely seen.

The study of risk behaviors showed that some daily activities of the villagers increased the frequency of man-mosquito contacts. Some significant risk behaviors included going to swamp area at night, sleeping without a mosquito net, defecating in the shady areas or in the bushes before sun rise, collecting "Sakhoo Leaf" (local name) from Sakhoo plants, looking after the cows, pigs and agricultural products outside the house at night. Others daily activities at high risk include bathing after sun set, having dinner, watching television and relaxing after finishing work. In relation to preventive behaviors, the villagers use mosquito nets, smoke and fumigation.

The factors affecting filariasis risk behaviors of the people are defined at three levels ; community level, family level, and individual level. Community level factors include ecological, cultural beliefs, filariasis control, and the status of the disease. Family level factors encompass suggestions given by family members and family income. Individual level factors include knowledge, belief, and perceptions of filariasis, which are determined by some socio-economic characteristics of the villagers.

In order to control filariasis effectively, two-way communication methods of health education through group discussion and interaction should be promoted. High risk groups such as fishermen and women who earn their living by gathering "Sakhoo Leaf" are significant target groups for education. Also, household industries such as jewelry making and fishing ponds, as well as using sanitary bathroom facilities, should be promoted to reduce the frequency of man-mosquito contacts.