

Thesis Title Health-seeking Behavior and Role-shift among
 Filariasis Patients : A Case Study in a Village
 of Nakhon Si Thammarat Province

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ABSTRACT

This research was a qualitative study with the following objectives:

1. To study the health-seeking behaviour and role-shift among filariasis patients
2. To examine the indigeneous definition of filariasis as well as its etiology.

The study was conducted in a village of Nakhon Si Thammarat province which was considered to be endemic areas of the Malayan filariasis. Thirty five patients as the stages of lymphadenitis and elephantiasis were selected as sample agroups. The study had been done within a period of two consecutive months: during March and April 1989. The data were collected through anthropological methods (observation, indepth and group interviews) together with household surveys.

It is found that local glossary for filariasis is "Teen Tho". The people in the village studied divided symptoms of filariasis into three major categories which were: mild lymphadenitis, severe and chronic lymphadenitis and elephantiasis. Beliefs in filariasis causation varies. Some reported of filariasis as a genetically transmitted disease. Several people believed that drinking water from swamp forest was the cause of filarial infection. However, they did not believe that filarial infection be spread by close-contact of people who resided in the same household. They did believe that the disease could be spread by touching the skin of patients suffering from filarial fever or contacting with such patients' lymph. Only few knew about mosquito vectors as the cause of filariasis.

The health-seeking behaviour found in this study were the self-treatment by using traditional medicines, buying the medicine from drugstore and obtaining western medicines from health centres. The most popular behaviour was self-medication since antibiotic and analgesic drugs were available at the village shops.

The health-seeking behaviour differed relatively according to symptom definition, severity previous experiences, local beliefs, suggestions from family members and social network. Filariasis patients who had been advised by health personnel accepted treatment by Diethylcarbamazine and believed in its efficacy. They also expected that this treatment programme would benefit them by having no more elephantiasis and chronic lymphadenitis. Some filariasis patients refused treatment by Diethylcarbamazine as they did not have faith in its efficacy, expect some allergy, or did not receive correct information from health personnel.

The role-shift in filariasis patients would be in their careers and social life. At the stage of lymphadenitis, it would temporarily affect their careers but not their social life. However, severe and chronic lymphadenitis may result in changing of careers permanently. The patients with elephantiasis may have to change both careers and social life as the symptoms shown particularly in the patients with complications of skin. It could be summarized that the role-shift in filariasis patients related to: impact of the symptoms on their physical abilities; frequency and chronicity of the disease; the skin irritation; and people's beliefs in spreading of the disease.

The study revealed that filariasis patients and people in the community still have unreasonable and incorrect knowledge about filariasis. This caused difficulties in filariasis control and treatment programme in the community. The problems encountered should be tackled by providing sufficient health education to people in the community particularly filariasis patients. Also, languages used in the instruction should be simple and easy to perceive. Furthermore, most patients still undergo incorrect treatment in their health seeking behaviour. This problem should be solved by the organization concerned. That is, the ministry of Public Health should put more emphasis on their health personnel in playing more roles in filariasis treatment including prescription of Diethylcarbamazine and follow-up activities. There should be an establishment of filariasis volunteers in community. These volunteers should come from model filariasis patients who had succeeded undergoing the treatment as they would be the best persons who could advise current patients rightly and most suitably by using the volunteers own experiences.