

SELF-EFFICACY, PERCEPTION OF DISEASE, PERCEPTION OF HEALTH SERVICE AMONG NON-ADHERENCE TB PATIENTS LIVING IN SLUM AREAS OF HLAING THAR YAR TOWNSHIP, YANGON, MYANMAR

SAW THANDAR SYN 5638076 SHHS/M

M.A. (HEALTH SOCIAL SCIENCE)

THESIS ADVISORY COMMITTEE: SUREE KANJANAWONG, Ph.D.,
PENCHEN SHERER, Ph.D., DARUNEE PHUKAO, Ph.D.

ABSTRACT

Tuberculosis (TB) is a major public health problem in Myanmar. Myanmar belongs to the global list of 22 high TB burden countries along with having a major MDR-TB problem and is also one of the 41 countries with a substantial TB/HIV problem. Trying to understand the health behaviors, related to a particular group of people, is important for addressing their health problems and needs and to improve their health status. This study aimed 1) to describe the socioeconomic factors of non-adherent TB patients and 2) to understand their self-efficacy, perception of TB disease, and perception of the health service.

This research is an explanatory qualitative research study and it was conducted in Hlaing Thar Yar Township, Yangon, Myanmar over a period of four months. In-depth data was obtained through 12 purposively selected non-adherent TB patients for in-depth interviews, 7 key-informant interviews, and participant observations. The field data was saturated during the final interviews of patients. After that, the data was translated into English and analysed by using a manual data master sheet.

The findings showed that 1) non-adherent TB patients perceive TB as a common illness, an infectious disease that can be transmitted by air, a disease that requires following a medical prescription, and a disease that has social, financial, and physical impacts on them. However, most of them do not perceive TB as a curable disease; 2) they perceive available health services as unavailable, inaccessible to them, and insensitive to their socioeconomic and cultural contexts; and 3) non-adherent TB patients who are restarting or planning to restart their treatments, as newly categorized patients, have high self-efficacy. Patients who haven't restarted or who have no desire to restart their treatment have low or poor self-efficacy. By providing affective and efficient health education about the potential side-effects of anti-TB drugs, experiences during treatment, and the outcomes of improper treatment along with reassessment of health education, facilitating procedures for receiving treatment for TB patients, and treatment adherence of TB patients who are living in the township might be improved.

KEY WORDS: NON-ADHERENCE/ TUBERCULOSIS (TB) PATIENT/
PERCEPTION/ SELF-EFFICACY/ SOCIOECONOMIC

115 pages