

4137918 SHSS/M: MAJOR: HEALTH SOCIAL SCIENCE; M.A. (HEALTH SOCIAL SCIENCES)

KEY WORDS : LEPROSY/ GENDER/ EXPLANATORY MODELS/ IMPACT/ MYANMAR.

KYI KYI SEIN: GENDER ANALYSIS ON SOCIOCULTURAL AND BEHAVIOURAL CONSEQUENCES OF LEPROSY IN MYANMAR. THESIS ADVISORS: ORATAI RAUYAJIN, Dr.P.H., PIMPAWUN BOONMONGKON, Ph.D., SUVAJEE GOOD, Ph.D., KYAW NYUNT SEIN, M.P.H. 217 p. ISBN 974-664-051-8

The intent of this study was to investigate gender issues in relation to leprosy. The main aim of the study was to explore the differences between men and women in conceptualization of and responses to leprosy and the consequences of leprosy from the social, cultural, psychological and economic dimensions.

The study was conducted in a selected township in Bago division, Myanmar. A cross-sectional qualitative research design was used as the main method. A quantitative analysis of leprosy records collected over the past ten years (1989-1998) was also employed to support the qualitative findings.

The study of leprosy records did not reveal any clues pointing to gender bias in case detection. According to the qualitative results, the majority of male and female leprosy patients held misconceptions about leprosy causes and transmission. Females tended to associate leprosy with certain foods and with their physiological processes of the reproductive system. In contrast, male leprosy patients viewed leprosy to be a consequence of sexual misconduct, and males were more likely than females to accept the biomedical concept of causation. Although both male and female patients perceived leprosy to be a curable disease, they showed ambiguous feelings regarding complete recovery from their illness. Both male and female patients had poor level of knowledge concerning the early symptoms of leprosy.

In regards to health seeking pattern, due to shame, females displayed a hesitancy to seek anti-leprosy treatment from western medicine practitioners after suspecting that they had leprosy. Males were more likely than females to be detected if the symptoms were on the back and chest, but they were in disadvantageous position to strictly follow the treatment schedule because of their occupations.

The physical consequences of leprosy between men and women were not different, as Myanmar women are also involved in economic activities. Males were less likely than females to give up their jobs permanently, as they are the principal breadwinners of the family. Most males expressed anxiety over economic insecurities and a sense of obligation to work. Furthermore, suicidal tendencies and attempts were higher among male patients than female patients. Both married male and female patients maintained their married life. Females had a high tendency to give up marriage prospects due to anxieties over marital stability and low self-worth. Both male and female patients with deformities displayed strong self-stigmatization.

Evaluation and intensification of health education activities is needed to provide knowledge of leprosy and to erase false beliefs. Counselling of the patients and holistic rehabilitation programmes which take into consideration of the different needs of men and women, are in urgent needs.