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Choice of health service providers among the forest goer population in Myanmar

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BACKGROUND



Forest goers in rural areas of Myanmar are at high risk of malaria infection, as they usually stay in the forest over multiple nights for work related activities. Our study explored health seeking behaviors of forest-goers in comparison to available health services in their vicinity in rural areas of Myanmar.

METHODS



- Cross-sectional cluster survey.
- 40 villages within 2 kilometers of the forest edge.
- Data collected in October 2019.

Choice modeling

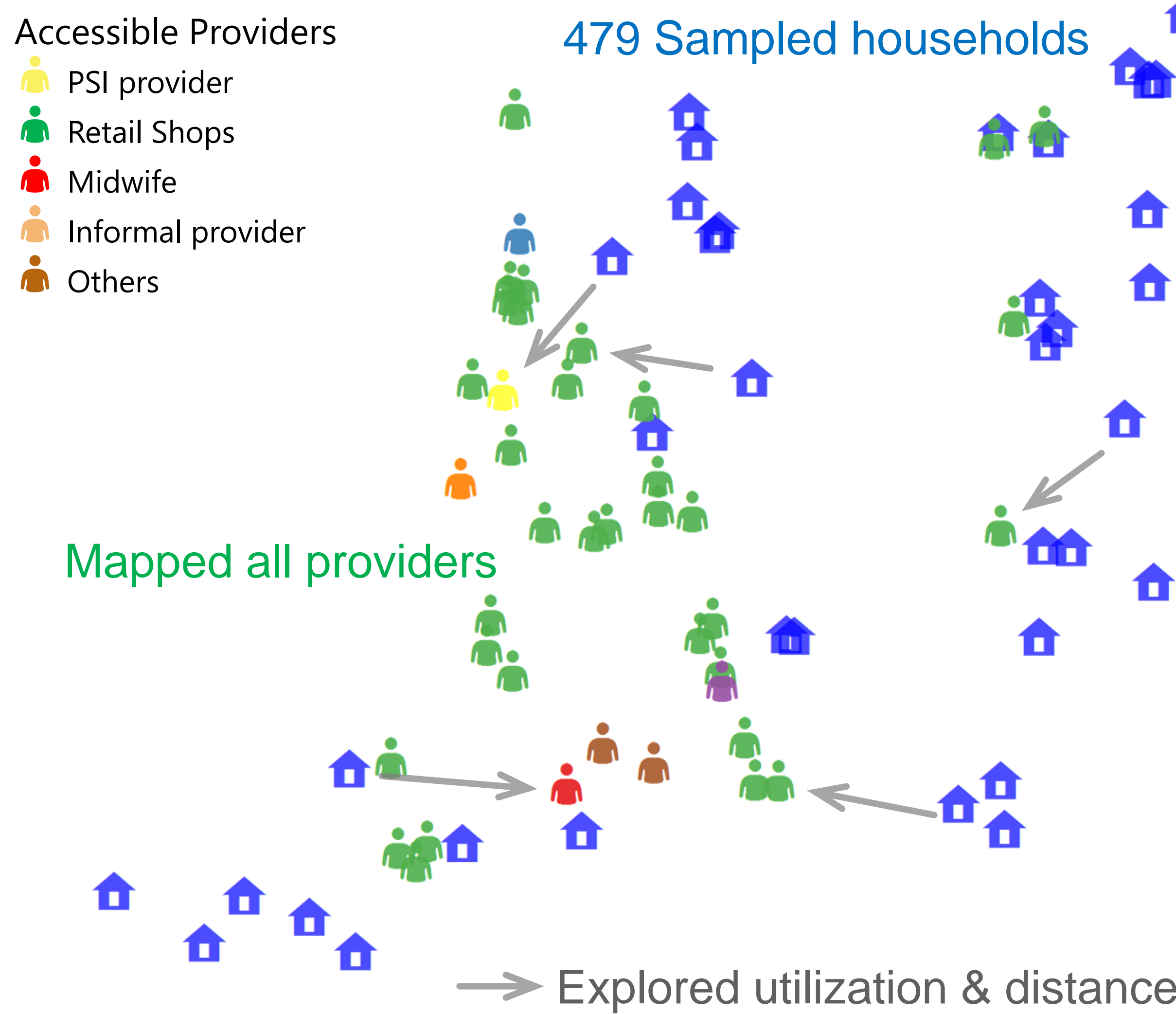
Generalized linear mixed effect regression model with logit link.

Analysis run in



Survey approach in a village

(PSI = Population Services International)



RESULTS

Forest goer households had access to different types of providers in their village.

91%

PSI-supported provider

47%

Private Semi-formal Providers

<10%

Public health facilities

Even so, forest goers did not always visit the providers in the village they had fever.

Fever

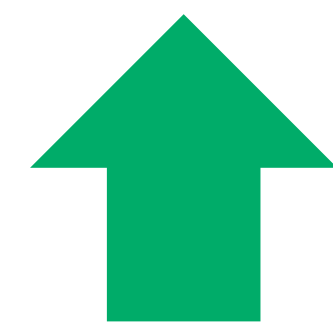
Visited Providers in Village (48%)

Stayed Home/ Self-medicated (37%)

Visited Providers outside Village (15%)

Regression Model Results

Forest goers were significantly more likely to choose nearby providers.

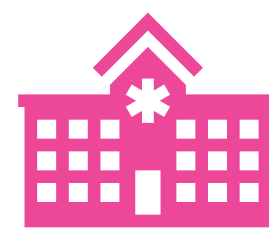


Odds increased by 6%



With each 1-minute reduction in walking time

Compared to private semi-formal providers, forest goers were significantly more likely to choose:

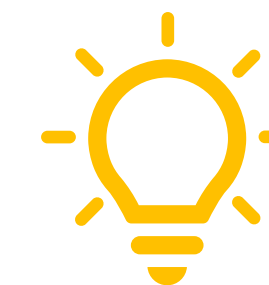


Public health facilities (Adjusted Odds Ratio 4.1, 95% Confidence Interval 2.3 - 7.3)



Volunteers/PSI-supported providers (Adjusted Odds Ratio 5.7, 95% Confidence Interval 3.7 – 8.7)

CONCLUSIONS



Our study approach enabled a deeper analysis on the choice of providers among forest goer population in rural areas of Myanmar.

Our findings highlighted the importance of access to qualified providers among the rural forest goer population, as they would choose qualified providers if available.

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