

**SOCIO-CULTURAL BARRIERS TO ACCESS EFFECTIVE
HEALTH CARE FOR WOMEN WITH SELF REPORTED
SYMPTOMS OF REPRODUCTIVE TRACT INFECTION,
IN MYANMAR**

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M.A. (HEALTH SOCIAL SCIENCE)

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SAWACON PERAPUM, M.S. Honors**ABSTRACT**

Reproductive tract infections (RTIs) are infections that affect the reproductive tracts of women and men. They are a major source of morbidity among women and men and are responsible for the greatest number of healthy years lost to women of reproductive age in developing countries. The purpose of this study was to explore, through interviews and focus groups with village women, the women's social values, discourses on female body and RTI, which affect women's access to effective health care.

A qualitative research approach based on the ethnographic tradition was the core data collection technique in this study. A poststructuralist feminist framework and critical discourse analysis were applied to analyze the local language and meaning of reproductive tract infections (RTI), female body discourses, and narratives of women suffering self-reported symptoms of RTI without accessing effective health care.

This study found out that the main barriers to accessing effective health care were women's social value of being a 'good' woman, prevalent discourses on RTI, the female body, and the fact of women living away from the parental home. Many reasons found out for women not accessing effective health care for their RTI symptoms were their inability to go alone to the health center, to neglect society's discourses about being a 'good' woman, to talk to their husband and other family members about their symptoms, to have sexual health knowledge, to talk about their body matters and sexual health problems, to ask their husbands to use a condom for further prevention of disease transmission, and to face health personnel who always inquire about the personal history, occupation, and address of the working girls living in a dormitory. All of these inability are based upon society's discourses of RTI and female body.

Deconstruction of discourses against society's language and meaning related to being a 'good' woman, RTI, and the female body should be considered by health workers and women volunteers who are trying to improve women's health and social status. It is recommended that qualitative health social science researches concerning sexual behavior and sexual health knowledge of the husbands of rural women should be done, so that further preventive and curative measures can be put in place for sexual and reproductive health of rural women.

KEY WORDS: DISCOURSE/RTI/FEMALE BODY/HEALTH CARE/MYANMAR

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