

**UNMET NEED OF INJECTABLE CONTRACEPTION AMONG
RURAL MYANMAR WOMEN**



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MA (HEALTH SOCIAL SCIENCE)

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ABSTRACT

Cultural and traditional beliefs and practices are deeply embedded among rural Myanmar women and exacerbate the unmet needs for injectable contraception. Socioeconomic factors are also constraints for rural women in access to birth spacing services. The concept of “cultural lag” and “social exchange theory” are utilized to explain how the cultural beliefs, social factors, and economic status of rural Myanmar women determine their acceptance of injectable contraception.

Data collection was conducted in a cluster of villages in Mandalay division, the central plain area of Myanmar, during July to October, 2007. Qualitative method was applied by using in-depth interviews, key informant interviews, focus group discussions, informal conversations and participant observation. Fourteen married fertile women of reproductive age were selected for in-depth interviews. Three health care providers, a husband, a mother-in-law, and a women’s group leader were also interviewed as key informants.

Strong cultural beliefs on the physiology of female reproductive functions are interconnected with the side effects of injectable contraception. Some local and superstitious beliefs and ignorance of some women hinder the adoption of contraception. The husband’s attitude towards contraception is a women’s issue in that it discourages the wife from using contraception including injectables. Socio-cultural values on having sons, traditional values on having many children, social norms of a large family and lack of communication between husband and wife are also contributing factors to the unmet need among rural women. Lower socioeconomic status of rural women hinders them from access to birth spacing services. Weak counselling skills of service providers contribute to the lack of acceptance of injectable contraception.

These findings suggest that birth spacing programmes should apply culturally sensitive strategies for rural women. Counselling skills and technical competency of birth spacing service providers should be improved by providing refresher courses and learning aid materials. Birth spacing services would be more accessible to the poor if social marketing systems operated in the study area.

KEYWORDS: INJECTABLE CONTRACEPTION / UNMET NEED / CULTURAL BELIEFS

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