

FACTORS INDUCING ANXIETY AND DEPRESSION AMONG ADULT MYANMAR MIGRANT WORKERS: A CASE STUDY IN RATCHABURI PROVINCE, THAILAND

Aung Zaw Phy^{*}, Prathurong Hongsrangon, Htoo Htoo Kyaw Soe

College of Public Health Sciences, Chulalongkorn University, Bangkok 10330, Thailand

ABSTRACT: A cross-sectional study was carried out in Bann Leuk and Nongree sub-district, Ratchaburi province, Thailand in March, 2011. The main purposes of this study were to identify the prevalence distribution of anxiety and depression and to identify the association between socio-demographic and anxiety and depression among adult Myanmar migrant workers aged between 18 to 59 years who lived in Ratchaburi province, Thailand. This study was conducted with 300 samples by using a structured face-to-face interview questionnaire. The prevalence of anxiety in those migrants was 24.3 % moderate anxiety, 64.3% severe anxiety, 11.3% extreme anxiety and depression was 42.7% mild depression, 35.7% moderate depression, 16.7% severe depression. In bivariate analysis, living status and depression was also associated ($p < 0.05$). A strategy for the mental health for these groups should be seen as a strategic investment which will create many long term benefits for individuals, societies and health systems. Professions in mental health such as psychologists, psychiatric nurses and social workers, should receive special training for appropriate knowledge and skills relating to mental health of migrants.

Keywords: Anxiety, Depression, Migrant workers, Myanmar, Ratchaburi province

INTRODUCTION

Migration is becoming an important global phenomenon in contemporary world. The growth of migration and population mobility, international trade and communication technologies are shaping global health [1].

There are now about 192 million people living outside their place of birth, which is about three percent of the world's population. This means that roughly one of every thirty-five persons in the world is a migrant. Between 1965 and 1990, the number of international migrants increased by 45 million an annual growth rate of about 2.1 percent. The current annual growth rate is about 2.9 percent. Currently, the UN's official estimate remains at 175 million migrants globally [2].

The flow of migration in the region, in general, however, is not only determined by the current economic gap among countries, but also by historical reasons (including changes in the borders or occupation), demand and supply of both unskilled and skilled workers in certain sectors, gender division of labor in respective countries, access to education and other social services and political stability [3].

The number of migrant population in Thailand cannot be known with any precision and can only be calculated through rough estimation. According to data from Ministry of Labor, the total numbers of

registered workers and dependents from Cambodia, Laos and Myanmar are 5,284,920 [2]. Up to two-thirds of the total Myanmar migrants are in the highly productive age group between 15 and 59 years [3].

From the estimate of 5-6 million migrant workers in Thailand over 4 million migrants staying in Thailand are Myanmar [3]. Approximate 70.4% of Myanmar migrant workers are registered workers. Ratchaburi which is located in the central Thailand is one out of ten provinces where Myanmar migrants live. Population of Ratchaburi province accounts for 832,005 people. Out of them, 20,307 are registered Myanmar migrants, 16,070 migrants have work permit and registered camp population comes to 8,353 people. Nevertheless, there are 10,000 to 20,000 non-registered Myanmar migrants in Ratchaburi province [4].

Migration can positively and negatively impact on health outcomes. Migration itself is not a risk to health, only the conditions surrounding the migration can vulnerable to ill health [5]. So, the relationship between migrant status and mental health is complex and the psychological well-being of the migrant group is determined by a range of factors including the characteristics of migration, the new community and resettlement [6].

Therefore, the aims of this study were to determine prevalence distribution and characteristics of anxiety and depression among Myanmar migrant workers in Ratchaburi province, Thailand and to examine the relationship between the demographic

^{*} Correspondence to: Aung Zaw Phy^{*}
E-mail: azp.phyo@gmail.com

factors, socio-economic factors, educational background behavioral factors and the anxiety and depression among Myanmar migrant workers in Ratchaburi province, Thailand.

MATERIALS AND METHODS

A cross-sectional study was conducted at Bann Leuk and Nongree sub-districts, Ratchaburi province, Thailand in March 2011. The respondents were adult Myanmar migrant workers (aged 18- 59 years) both males and females who resided in the study site. Census sampling method was used with the inclusion criteria that respondents were adult Myanmar migrant workers aged between 18 - 59 years (both male and female), who could communicate in Burmese language and who were willing to participate in the study. Three hundred respondents were interviewed with structured interview questionnaire and ethical view protocol no. 147.1/53 which was approved by the Ethics Review Committee for Research Involving Human Research Subjects, Health Sciences Group, Chulalongkorn University, Bangkok, Thailand on 28th February, 2011. The structured face-to-face interview questionnaire was well validated by the experts with satisfactory reliability result. The respondents had to answer three parts of the questionnaire: demographic characteristics, test for anxiety (Zung's anxiety test) and test for depression (Zung's depression test) [7]. For data analysis, t-test and ANOVA was used to determine the relationship between demographic characteristics and anxiety and depression.

RESULTS

For demographic characteristics, the age of all participants were ranged from 19 to 52 years. The mean age of the participants was 29.33 years, median age was 28 years and SD was 6.985. Male were 55% and female 45%. More than half of participants were Myanmar (59.7%). Half of the participants (49.7%) had primary education, 22.7% able to read and write, 21.7% had middle school education. Most of them earned less than 5,000 Baht per month (77.3%). Only 17% earned 5,000-7,000 Baht per month and 5.7% earned more than 7,000 Baht per month.

Table 1 shows the prevalence of anxiety. 24.3% had mild-moderate anxiety, 64.3% marked-severe anxiety and 11.3% had extreme anxiety.

Table 1: Prevalence of Anxiety (n=300)

Anxiety	Number	%
Mild - Moderate anxiety	73	24.3
Marked - Severe anxiety	193	64.4
Extreme anxiety	34	11.3
Mean 65.73, SD 7.561		

Table 2 Prevalence of Depression (n=300)

Depression	Number	%
Normal range	12	4.0
Mildly depressed	128	42.6
Moderately depressed	110	36.7
Severely depressed	50	16.7

Table 3 Association between socio-economic factors and depression (n=300)

Socio-economic factors	n	Mean	t/F	p-value
Living status*				
Alone	51	57.76	4.077	0.018
With friends	89	61.55		
With family or relatives	160	60.79		
Occupation				
Full time	243	60.32	-0.848	-0.981
Temporary	57	61.30		
Income				
<5,000	232	60.57	0.284	0.776
=>5,000	68	60.26		

*ANOVA

Table 2 shows the prevalence of depression. Only 4% were in the normal range, 42.7% were mildly depressed, 36.7% were moderately depressed and 16.7% were severely depressed.

Table 3 shows the relationship of demographic characteristics of participants and depression. There was also significant association between living status and depression (p-value 0.018). People living alone were more likely to have depression than those living with friends or family members. Living alone and they facing problems, they have no one to share their difficulties and feelings with, and there is nobody to give them advice.

DISCUSSION

The study has shown that, more males than females suffer from anxiety and depression (55% males and 45% females). This is probably due to a man's role as a breadwinner in a family with many responsibilities or due to the natures of the job at construction sites and metal industries. Moreover, PHAMIT found that men are more likely to migrate than women [8].

Only 34 % of the respondents were married, 66% were single. This might be because they were working age and they came here for earning money. And more than 30% of married people suffered from mild to moderate anxiety, nearly 60% from marked to severe anxiety and more than 10% suffered from extreme anxiety. Over 20% of single people suffered from mild to moderate anxiety, nearly 68% marked to severe anxiety level and over 11% suffered from extreme anxiety.

Regarding living status from, more than half of respondents were living with their family or relatives. Only 17% of respondents were living alone. However, there was no statistically significant association between living status and anxiety. Nevertheless, there was significant association between living and depression (p-value 0.018). People living alone were more likely to suffer from depression than others living with friends or family members.

This study was done with the expectation that the information obtained could be used as baseline data for further studies. Supporting mental health conditions of these groups should be seen as a strategic investment creating many long term benefits for individuals, societies and health systems. Mental health services for migrants should be developed and operated in close collaboration with families, neighbors, friends, etc. The doctors and health assistants at health care center should give education to migrants, in this particular field, especially how to cope with stressful situations, how to maintain good relationship in the surrounding area, both being important components of good mental health.

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