Health Status and Social Determinants in Thailand Lucy Aranda, Desbelet Berhe, Veronica Thao Khon Kaen University

Women

- Access to reproductive health services is increasing, however, it is unevenly distributed across the country
- Fertility rates are declining, due to the high prevalence rate for contraceptive use. In 2009, 80% of women ages 15-49 are using contraceptives. In 2009, 80% of women ages 15-49 are using contraceptives
- Increased risk of HIV/AIDS- young adolescent girls due to unprotected sex
- Maternal mortality rate (2010): 48 per 100,000 live births
- Haemorrhage and sepsis, are one of the leading causes of death resulting from complications in pregnancy and delivery
- Rural and urban environments affect maternal mortality
- Reproductive Cancers

Type of Cancer	# Cases/yr	# Deaths/yr
Breast Cancer	12,566	4,427
Cervical Cancer	9,999	5,216

Children

- Diarrhea remains an important cause of morbidity and mortality among children in Thailand with more than 1 million cases reported in 2002
- Although the mortality rate has decreased, the morbidity rate has remained stable
- About 1/3 of reported cases of diarrhea occur in children less than 5 years old
- Of the stool samples taken from hospitalized children suffering from diarrhea, about 20-30% are also found to be positive for rotavirus
- Dengue hemorrhagic fever and dengue shock syndrome are the third most common causes for hospitalization of children in Thailand
- Disease used to be confined to large cities but is now higher in more rural than urban areas
- Age group most severely affected is those aged 5-9 years old

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Thailand Overview

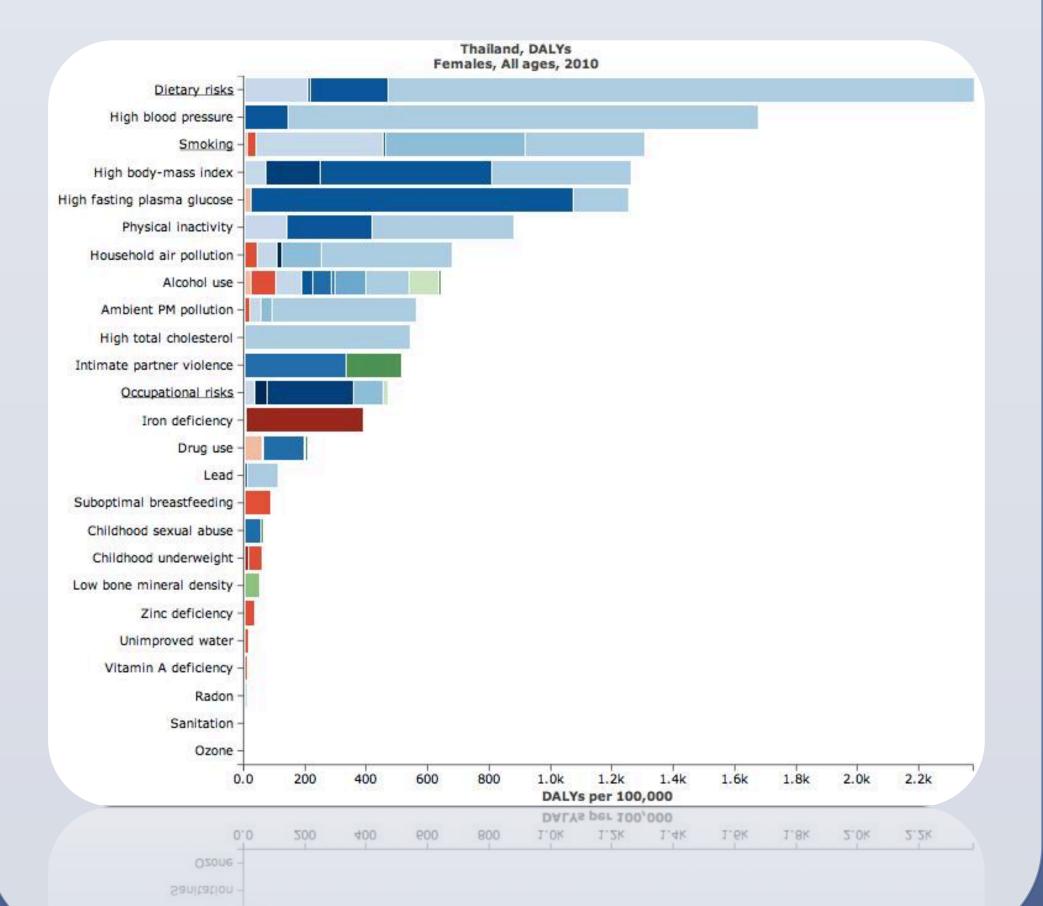
- Population: 69,892,000
- Per capita income: 7,640
- Life expectancy at birth women/ men: 77/70 years
- Infant mortality rate: 12/1000 live births

Population Reference Bureau World Population Data Sheet 2011



Main Health Problems

- Obesity
- Cancer
- Hypertension
- Diabetes
- HIV/AIDS
- Tuberculosis
- Dengue Fever
- Malaria
- Hepatitis



Social Determinants Men Environment: urban, rural • Condom use in men has risen in the past 20 Socioeconomic status years due to governmental campaigning efforts but still remains low across Thailand-> Leads to • Social status sexually transmitted diseases Ethnic background Leading causes of death in men are coronary Nationality diseases, lower respiratory infections, strokes Refugee/ Immigrant status and lung cancer • Level of education • High risk factors for these health complications Physical access to health care among Thai men include smoking, alcohol use, • Systematic access to health dietary risks, high blood pressure and occupational risks care • Health insurance Minorities, Refugees, & • Limited Healthcare providers Immigrants Cultural and Language Barriers Inequity of utilization of health care services • Gender Discrimination against ethnic minorities in • Poverty health care system Lack of health insurance among ethnic minorities Geographic and physical barriers that prevent access to health centers Limited health care providers available in villages Cultural, religious, language barriers between ethnic minorities and larger Thai society • Poor quality of health care Females from highland regions susceptible to sex work, STI/ STD, and HIV/AIDS Thailand, DALYs Males, All ages, 2010 • High susceptibility health problems due to Smoking -Alcohol use varying education levels and varying levels of High blood pressure access to primary health care High fasting plasma gluco High body-mass ind • Psychological problems (depression, anxiety, Household air pollution Ambient PM pollution distress, abuse) resulting from displacement, Physical inactivity High total cholestero violence and exploitation Suboptimal breastfeeding • Health effects associated with the challenge of Low bone mineral density social adjustment resulting from resettlement in Childhood underweight Childhood sexual abuse Zinc deficiency new countries Unimproved water Sources Celentano, DD. (1996). Epidemiologic Risk Factors for Incident Sexually Transmitted Diseases in Young Thai Men. Retrieved from Chareonsook, O., Foy, HM., Teeraratkul, A., Sularug, N. (1999). Changing Epidemiology of Dengue Hemorrhagic Fever in Thailand. Retrieved from Vitamin A deficiency Epidemiology and Burden of Rotavirus Diarrhea in Thailand. Retrieved from Kosulwat, V. (2002). The Nutrition and Health Transition in Thailand. Retrieved from Sanitation

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Intimate partner violence

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