



## CHAPTER III

### RESEARCH METHODOLOGY

This study was survey research aimed to investigate the socio economic status, health seeking behaviors and the barriers of access to health service and the factors related with the barriers of access to health service of Shan migrant workers in San Phak Wan Sub – District, Hang Dong District, Chiang Mai Province. The data collected by questionnaire in 181 Shan migrant workers during March 2017. Data was analyzed by descriptive statistic and chi – square test relationship between socio demographic and barriers of access to health services.

#### Population and Samples

Population of this study was the Shan migrant workers from Tampon San Phak Wan Chiang Mai Province, Northern Thailand who work in varied industries to identify their various health seeking behaviors. The researcher went and met the community of Shan migrant worker. Who working in the San Pak Wan sub – district and interview with community leader? There were around 340 Shan migrant workers who stay and live in this area. The number was not officially because there was difficult to know exactly of Shan migrant worker in the municipality official website. So the researcher met community leader and got information by face to face interview with camp leader at Shan migrant workers site.

#### Sample Size

The sample size was collect data according to the theory of (Krejcie & Morgan 1970). This relationship between sample size and total population is illustrated. Therefore, according to the population size is 340 and the required sample size is 181 persons in this research.

There were five zone targeted villages in this study and sample from each zone as follow;

Zone 1 In New Concept camp there were 50 people of Shan migrant workers in working ages random pick up by researcher.

Zone 2 In Ton Ho Soi. 1 camp also were 55 people of Shan migrant workers in working ages random pick up by researcher.

Zone 3 Ho Phak lon Tont camp were 74 people of Shan migrant workers in working ages random pick up by researcher.

Zone 4 Kankanok View 10 camps were 52 people of Shan migrant workers in working ages random pick up by researcher.

Zone 5 The largest camp in the research Ban Khao Daeng is situated in Moo. 6 and there were 109 people of Shan migrant working ages random pick up by researcher.

#### **Inclusion Criteria**

1. Shan Ethnicity
2. 18 to 59 years old
3. Length of stay for  $\geq 3$  months
4. Able to understanding and communicate questionnaires

#### **Research Design and Instruments**

1. The instrument of the study was a set of structured questionnaire version in both English and Shan languages. It was divided into four main parts and will be conducted through face to face interviews between the researcher and the participants. Researcher met the community of Shan migrant worker who are working in the San Phak Wan districts and interview community leader. There will be 4 interviewers including the researcher and 3 assistants who could speak both Shan and Myanmar languages, were divided into 4 groups to interview of participants. Collected data put in a numerical order, double – check and key in the data.

2. Variable and Reliability Statistics. Before going to collected all data, the instrument were tasted for validity by three of expertise the name list shown in (Appendix A) and under the suggestion of them the researcher have to edited and approved. Then before going to collect the data of sample size try out with Shan migrant worker who living around nearby, who was

working and look like a similar as the sample group but not the sample group and the reliability statistics Alpha value for all instruments, was 0.875.

Questionnaire will be separate in four parts

Part I: Personal information of the participants were sought on demography, gender, age, religion, length of stay, marital status, family, legal and registration status, education, occupation, income, number of rest day per month.

Part II: Questions covered the health seeking behaviors of Shan migrant workers:

In part II, The agreement level of health seeking behaviors of Shan migrant workers when they got minor sickness or illness what are they doing for answer questioner.

5	means	Always
4	means	Often
3	means	Sometimes
2	means	Rare
1	means	Never

Part III: Questions covered the barriers in access to health services.

In part III The agreement level of the barriers in access to health services were definite with 5 = Strongly agree, 4 = Agree, 3 = Neutral, 2 = Disagree, 1 = Strongly disagree and the criteria means value for interpretations in the questioner of using the following scale.

4.12 – 5.00	means	Strongly agree
3.32 – 4.11	means	Agree
2.60 – 3.31	means	Neutral
1.80 – 2.59	means	Disagree
1.00 – 1.79	means	Strongly disagree

Part IV: the agreement level of the satisfactions of nurses, staffs, physician and service of health center and overall satisfactions of health service definite with 4 = Excellence, 3 = Good, 2 = Average, 1 = Poor and the criteria means value for interpretations in the questioner of using the following scale.

3.25 – 4.00	means	Excellence
2.50 – 3.24	means	Good
1.75 – 2.49	means	Average
1.00 – 1.74	means	Poor

The research team developed the survey questionnaires, which were reviewed for validity by three experts and supervisors see in the appendix A. Questions were developed, tested, and administered in Shan. Thus it was easy for the interviewers to clearly discuss each question with the interviewees. Questionnaire items were then translated to English for presenting the study findings.

### **Data Collection**

This study was A cross – sectional survey carried out in San Phak Wan sub – district Hang Dong district of Chiang Mai province, Northern Thailand, conducted from the migrant workers, population size was 181 person required sample size. Interviewers, the researcher and Interview assistants conducted face to face interviews with the Shan migrant workers in two languages: Shan and Myanmar language for clear and better understanding between the interviewers and the participants.

### **The Process of the Data Collection**

Researcher presented the process of the data collection as follows;

1. The letter of request for data collection in San Phak Wan sub – district Moo. 3 Ban Tao Pha Yu and Moo. 6, Ban Kho Deng, Hang Dong district, Chiang Mai province, Thailand. It will be submitted to the Dean of the Graduate School, Rajabhat Chiang Mai University for asking permission to collect data from the required participants.

2. The researcher was contact authorized person chief of municipality from San Phak Wan sub – district Moo. 3, Ban Tao Pha Yu and Moo. 6, Ban Kho Deng, Hang Dong district, Chiang Mai province in order to give a brief explanation about the research to the participants and invited to join who were interest in for participation. The researcher collected data from the participants through face to face interviews. Data were collected until the completion of targeted number of

participants. In cases of someone who can't read or write interview were used, general consent form was used and signed in all case of participation.

3. All the questionnaires were given a code and double checked before inputting the data. Once it was finished, it was then processed for statistical analysis by using computer package program.

#### **Data Analysis**

1. Socio economic data and personal information of the participants were sought on demography, gender, age, religion, length of stay, marital status, family, legal and registration status, education, occupation, income, number of rest day per month analysis with frequency and percentage value. The agreement level of health seeking behaviors of Shan migrant workers when they got minor sickness or illness what are they doing analysis with frequency and percentage. The agreement level of the barriers in access to health services were analysis with the criteria means value for interpretations scale. The agreement level of the satisfactions of nurse, staffs, Physician and service of health center and overall satisfactions of health service analysis with the criteria means value for interpretations scale

2. The factor affected between the socioeconomic data and the barriers in access to health services analysis by Chi – square test.