

Implications of socio-economic and environmental factors on child common illnesses and mortality among the hill tribes in Thailand

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ABSTRACT

The hill tribe population in Thailand is distributed widely in the mountainous area of province in the north, central and northeast regions. About 80% are confined to 5 northern provinces, Chiang Mai, Chiang Rai, Mae Hong Son, Tak and Nan. The Karen and H'mong constitute 61.7% of the total population. The present study was a long term prospective study on common illnesses and mortality of Karen and H'mong children. Data were compiled by village health volunteers working in the target Karen and H'mong communities in Mae Cham District, Chiang Mai Province between 1978-1990. The total population of the target Karen and H'mong communities were between 238-366 and 220-451 respectively. The curative treatment service covered all households with rate of service utilisation of adult to children age below 15 years similar to those in total community population. The illnesses of respiratory and gastrointestinal (GI) systems contributed between 80-90%. The respiratory system illnesses percentages were about 2-3 times the GI illnesses among the Karen but were comparable in the H'mong. Bronchitis and pneumonia appeared at about 5-20% of all respiratory system illnesses. Diarrhoea prevailed among the GI illnesses of both tribes but of greater extent among the H'mong than the Karen. Between 1978-1990, a total of 39 children died, 19 Karens and 20 H'mongs. Perinatal death, pneumonia and diarrhoea constituted the majority, 4, 4 and 5 cases for the Karen and 6, 6 and 5 cases for the H'mong respectively. Excluding perinatal death, 20 from 29 cases of the children died in the rainy season especially in July. The trend of death during the rainy seasons was still apparent whether the cases were classified by tribe or causes of death. The study demonstrated the prevalence of infectious diseases of the respiratory and GI systems which was not unexpected but clear difference in percentages distribution between the two tribes was also very apparent. The prevailing death during perinatal period and infections during the rainy season suggested the strong influence from the combination of natural, social and economic environment on the health risk of the hill tribe communities. The

findings certainly stressed the crucial role of multisectoral development in the improvement of community health beyond an independent health development.

Key words : Hill tribes, mortality, illnesses

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