

Kathy Pan, sticks and pummelling: Burmese women's fertility management

Suzanne Belton
PhD Scholar and midwife

Supervisor Dr Andrea Whittaker
Key Centre for Women's Health in Society
University of Melbourne, Australia



s.belton@pgrad.unimelb.edu.au

Context

- Focus on Burmese non-camp refugees and migrant workers in a border province of Thailand
- Invited by Dr Cynthia Maung, Karen refugee doctor
- 145 thousand Burmese refugees in Thailand
- 1 million+ Burmese migrant workers in Thailand
- SPDC oppressive military regime with poor human rights record



Research Objectives

- To describe the issues of fertility, unwanted pregnancy and abortion in Burmese women living in Thailand outside of camps
- To document the methods which Burmese women use to regulate fertility
- To analyse the causes and consider prevention strategies for unsafe abortion



Migrant workers arrested by Thai police 2002

Photo: Inge Sterk

Research methods

How?

- Participant /observation
- Retrospective records review
- Feedback discussions
- Semi structured interviews
- Focus groups

Who and what?

- Women (43) and husbands (10)
- Health workers (18)
- Lay midwives/ abortionists (20)
- Community members & activities



A lay midwife with her daughter and two grandchildren 2002

Married, working women with children

- Quarter of abortions induced from records but on interview over one third
- 10% of women under 20 years of age
- 28% gravida 5+
- 35% of women have no living children
- 12% of women have 4 or more living children
- 19% of women illiterate
- 14% of women disclose domestic violence
- 81% in paid workforce

•2001	•Refugee Clinic	•Thai Public Hospital	•Total
•Maternal Death	•Referred one woman who later died →	•10	•14 •(+Hmong women)
•Births	•563	•782	•1,345
•Post abortion care	•467	•360	•827

Methods used to control fertility, end pregnancy or 'unblock' menstruation

- Oral medicine – Western and Burmese
- Food or drink
- Action & Touch – pummelling and violence
- Insertion of objects into genitals – sticks, cotton buds and chicken quills



Kathy Pan and abortion sticks (se-yo)

And more methods...



1) Medicine and referral in the market



2) Lay midwife 'lifts' and massages womb



3) Lay midwife demonstrates how to expel semen after sex

Why women abort themselves

- Poverty
- Need to keep job in Thailand - threatened by boss
- Domestic violence – beaten by husband, threatened
- Relationship problem
- Pressure from friends or relatives
- Does not want any more children
- Youngest child still too young
- Contraceptive accident

Post abortion family planning

Method of contraception	Thai Public Hospital 17 women	Mae Tao Clinic 26 women
Nothing offered	13	0
Tubal ligation	3	9
Condom	0	7
Depo injection	0	7
Woman declines	1	2
Not needed	0	1

- Thai hospital does not offer a range of temporary methods to women
- There are language and cultural barriers to quality care
- MTC offers in-patient counselling and education

Program and policy suggestions

- Burmese women working in Thailand should be offered culturally appropriate and accessible family planning services and information
- Lay midwives should be offered information about unsafe abortion/PAC and included in social marketing type FP projects
- Referral systems between Burmese and Thai health systems and communities should be strengthened
- Maternal mortality should be reviewed by Burmese, Thai and the relevant NGOs

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