

**AWARENESS ON SAFETY OF PURIFIED
HOUSEHOLD DRINKING WATER AMONG
RURAL POPULATION, THABAUNG TOWNSHIP
IN AYEYARWADDY REGION**

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ABSTRACT

Safety awareness on purified household drinking water was studied among rural area of Thabaung township, Ayeyarwaddy region. In September 2017, face-to-face interviews were conducted with pre-tested structured questionnaires. The number of 250 household members (age ≥ 18 years) in study area were selected by using simple random sampling. Mean Age of respondents was 42.18 years. Female respondents markedly exceeded than the males. Only 6.8% were graduated and 3.2% had completed the high school level. Half of respondents (49.2%) resided in flooded area. Most of respondents (80.4%) use improved source of drinking water (mainly from borehole, rainwater and protected well). In this study, there was only two percent of total respondents who drank bottled water. Filtration through cloth and boiling are common treatment methods for household drinking water (48%). Scores of knowledge and attitude were determined by cut-off point which was mid-point of highest possible score. They had good knowledge on improved source of drinking water (70%), safe distance for water source (86.4%), storage condition for drinking water (100%) and drinking with handled and clean cup (100%). However, most of the respondents were not aware of removal methods for arsenic-contamination in drinking water. Diseases caused by drinking contaminated water were known only by a few of respondents (<7%). Most respondents that were using unimproved water source (61.3%) agreed that their household drinking water source was safe. Most of them (70.4%) rely on health talk as main source of information. Test results showed that there was statistically significant association between knowledge and sociodemographic factors especially study area ($p < 0.001$), age ($p = 0.04$), occupation ($p = 0.028$) and flooding ($p = 0.016$). However, there was no statistically significant between attitude and sociodemographic factors. Therefore, it is more needed to be reinforced the knowledge on safety of purified household drinking water through health education session.