HEALTH PROFILE OF FOREIGN WORKERS - LIFESTYLE HABITS / RISK BEHAVIOURS

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ABSTRACT: The majority of migrant workers studied in this survey were males Muslims from Bangladesh. The mean age was 30 and the majority were aged between 21–30 years. Although almost all of them had 7 – 13 years of schooling, the majority were working in the service industry. More than two thirds of the migrant workers were provided with various forms of housing by their employers. Majority of them stated that they had better amenities, such as piped drinking water and sanitary toilets, in Malaysia compared to those in their home countries. From their reports, it appears that the majority did not engage in risk behaviours such as, smoking, alcohol and drug abuse. (JUMMEC 2002; 1:59-61)

KEYWORDS: Lifestyle habits, Risk behaviors, Drug abuse, Smoking.

The migrant workers were asked about their lifestyle habits, with regards to cigarette smoking, alcohol and (non-prescribed) drug use, which would serve as indicators of risk behaviors that might compromise their health.

An overview of all these habits shows that slightly more than a quarter of the respondents were active smokers, another quarter were ex-smokers, and slightly lower than half of them were non-smokers (see Table 1). On the other hand, the majority reported that they never drank alcohol nor took non-prescribed drugs. Only 9 percent of the respondents had ever taken alcohol, whilst 8% or 1% of them reported that they were on non-prescribed drugs (see Tables 2 & 3). The latter reported using drugs, such as, amphetamine, cannabis, and sleeping pills.

However, drug tests were positive for about 3 percent of those who reported they had never used drugs. The majority that of these 23 respondents were from Bangladesh nationality, and most of them were detected to have used amphetamine and cannabis. On the other hand, drug test was negative for three respondents who reported to be currently on drugs.

It is interesting to note the prevalence of multiple risk behaviours among the migrant workers. The results revealed that there were three respondents who reported that they were engaged in all three risk behaviours: cigarette smoking, alcohol, and drug use. Thirteen percent of them smoked cigarettes and drank alcohol; while five of them smoked cigarettes and were on drugs. It was also found that of the three types of

Table 1. Cigarette Smoking

	Frequency	Percent
Active Smoker	219	27.38
Ex-Smoker	201	25.13
Non-smoker	380	47.5
	800	100

Table 2. Alcohol

	Frequency	Percent
Current	34	4.25
Past	41	5.13
Never	725	90.63
	800	100

Table 3. Drugs

	Frequency	Percent
Current	4	0.5
Past	4	0.5
Never	792	97.9
	800	99.9

risk behaviours, cigarette smoking seemed to be the most popular among the majority of migrant workers (see Table 4).

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With regards to smoking cigarettes by gender of migrant workers, 96 percent of the males ever smoked compared to about 4 percent of the females. The male : female proportion of active smokers and ex-smokers appeared rather similar – see Table 5.

Table 6 shows that the majority, or 45 percent, of migrant workers who smoked reported smoking between 1 to 9 cigarettes per day. It is pertinent to note that slightly less than a quarter of them could be referred to as heavy smokers, as they reported smoking 20 or more cigarettes a day. Heavy smokers are defined as persons who smoke 20 or more cigarettes per day (1). Almost half of the heavy smokers were from Bangladesh and the distribution of heavy smoking by nationality was statistically significant p < 0.01. About 80 percent of them were aged between 26 to 45 years; and almost all, except one, were males. The sole female heavy smoker was of Thai nationality aged 48 years. The profile of heavy smokers is shown in Tables 7, 8, and 9.

Discussion

The overall prevalence of cigarette smoking among this population of migrant workers is about 25 percent (28 percent for men and 9 percent for women). This appears high compared to the smoking prevalence among Malaysian adolescents (16.7 percent), according to a 1996 estimate by the Ministry of Health. Among medical students in Malaysia, the prevalence of smoking is 9 percent for men and none for women (2). It is interesting to note that in developing countries, 48 percent of men and 7 percent of women smoke (3). Thus, the percentage of males smoking prevalence in this migrant worker population is lower than that in developing countries, while the percentage of female smoking prevalence among the migrants is slightly higher.

The high smoking prevalence among the Bangladeshi workers is not surprising given the fact that Bangladesh ranked eighth in the world for smoking prevalence among men aged 15 years and above in 1997. This is the highest ranking in comparison to Indonesia which ranked twelve, to Thailand that ranked twenty-fifth, to Malaysia at thirty-ninth, and to Pakistan at seventy-ninth (3). There could have been under - reporting for both alcohol and illegal drug use by the respondents due to their sensitive nature of the subject matter.

The low prevalence of reported drug taking was verified, to some extent, by the drug test administered to the respondents in the survey. Other studies have shown that cigarette smoking is often closely associated, if not a precursor, of drug taking. This in turn has implications for the transmission of HIV/AIDS. This survey has also shown that drug use appeared to be associated with both cigarette smoking and alcohol.

Although only 65, or about 15 percent, of the migrant

Table 4. Multiple Risk Behaviors

	Frequency	Percent
Smoking only	355	81.61
Alcohol only	15	3.45
Smoking & Drugs	5	1.15
Smoking & Alcohol	57	13.1
All Risk Behaviours	3	0.69
	435	100

Table 5. Cigarette Smoking by Sex

	Active Smoker		Ex-smoker		Total	
	Frequency	%	Frequency	%	Frequency	%
Male	209	95	195	97	484	96
Female	10	5	6	3	16	4
	219	100	201	100	420	100

Table 6. Number of Cigarettes Smoked Per Day

	Frequency	Percent
9-Jan	189	45.0
19-Oct	133	31.7
20 & >	98	23.3
	420	100

Table 7. Heavy Smokers By Nationality

	Frequency	Percent
Bangladesh	47	47.9
Myanmar	26	26.53
Thailand	15	15.31
Pakistan	7	7.14
Indonesia	3	3.06
	98	100

Table 8. Heavy smokers b'y Age

	Frequency	Percent
<26	11	11.2
26 - 35	59	60.2
36 - 45	19	19.39
46 - 55	4	4.08
> 55	5	5.1
	98	100

Table 9. Heavy Smokers By Sex

	Frequency	Percent
Male	97	99
Female	1	1
Total	98	100

workers were found to have multiple risk behaviours, this may be a cause for concern. This is because of the known relationship between such risk behaviours and morbidity (e.g. lung cancer, respiratory, and cardiovascular diseases) and mortality. Here, risk behaviours can be compared with types of last illness reported.

However, there are some gaps in the data collection, which makes it difficult to assess the impact of these risk factors on the health of migrant workers and their effects on the local economy. For instance, data on initiation and duration of these habits; absenteeism from work and hospital admission related to risk behaviours, were not collected.

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