

Social capital and TB prevention practices

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Abstract

The purpose of this thesis was to explore the association between social capital and tuberculosis (TB) prevention practices in the North Shoa Zone of Amhara National Regional State, Ethiopia. The concept of social capital is inspired by Pierre Bourdieu's theory of practice which was first published in French in 1972 (Bourdieu 1972:1-2). Bourdieu recognises that individuals' behaviour is influenced by culture and objective structures that exist within their society. However, this thesis focuses on behaviours that determine the use of social capital vis-à-vis healthcare practices specifically (e.g. Fine 2008:57-58). A qualitative research design involving a social network analysis (SNA) approach was employed to explore the role of social capital in TB prevention practices. A purposive sampling technique was used to select healthcare providers, TB patients and local healers as participants. Interviews, field observations and documentary (policy and strategy) reviews were used as means to gather data from the participants. The study indicates that the biomedical approach designed to prevent TB does not take into account perceptions of various stakeholders (e.g., TB patients, care providers, traditional healers) regarding TB prevention practices. Training of healthcare providers does not factor in partnering with social actors in any way that is conducive to a community-based ethos of prevention. The study also indicates that the biomedical TB prevention practices are being impeded by TB patients' and communities' negative perceptions of the healthcare system and (on the other hand) their positive perceptions of long-standing local traditional TB treatment practices. The findings showed that the biomedical TB prevention practices were greatly hampered by sociocultural factors including age and gender (i.e. being old or being female), and by TB patients' (and their family members) extremely low level

of education and income and poor housing and living conditions. The study found that female and aged TB patients suffered such difficult life conditions because of abject poverty that they were forced to live in destitution within their social networks (family members and neighbours). It was also found that TB patients' lives were characterized by social isolation and stigmatisation. The study suggests that in order for the biomedical approach to TB prevention to be effective, it should be based on the notion of social capital as argued in the theory of Critical Medical Anthropology (CMA).



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