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TAMBOL ADMINISTRATIVE ORGANIZATION

APINUM HOIKAEW : DECISION MAKING OF DISTRICT HEALTH WORKERS TO TRANSFER TO TAMBOL ADMINISTRATIVE ORGANIZATION, NAKORN SRI THAMARAJ PROVINCE. THESIS ADVISORS ; NAWARAT SUWANNAPONG, PH.D, CHAWEEWAN BOONSUYA, M.S.P.H.(BIOS), SURACHART NA NONGKAI, MA., SATIT PAIPRASERT, M.P.H. 149 p. ISBN 974 – 662 – 692 - 2

The government policy of administrative decentralization to local organizations. Impacts on district health workers who must transfer to tambol administrative organizations. This research aimed to explain the decision making of district health workers who must either agree or refuse to transfer to Tambol Administrative Organization (TAO) and to analyse of the relationships between the decision to transfer and workers' characteristics, knowledge about TAOs, perception of incentive and their job values. The sample was 614 district health workers from 221 health centers. The data was collected by using questionnaires during 1– 15 January 1999.

The result showed that most of district health workers were females. Most of them were 20-29 years old and most were married. The majority of them held under bachelor degrees. Most held the position of junior health worker, and had less than 10 years of work experience. Regarding the decision making of district health workers to transfer to TAO, 23.3% agreed to transfer. It was found that knowledge about TAO was in a low level, and incentive perception and job value were in the moderate level. Age, education level, position, knowledge decentralization, authority, incentive perception, achievement, recognition, advancement, job value in practice, in service and in bureaucracy have significant effect at level  $< 0.05$ . The factors influencing decision making were education, decentralization of knowledge, incentive perception, achievement, and job value in bureaucracy. The four factors could explain variation 11.0% in decision making. The staff should train district health workers about knowledge of TAO with the support of a hand book which has descriptions of activities to encourage coordination between health centers and TAO. Follow up of district health workers performance should also be conducted, jointly with TAO.