

**Thesis Title** The PHC Effectiveness of Chieng-mai Province  
in B. E. 2533

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## ABSTRACT

The objective of this research was to study the effectiveness of primary health care (PHC) activities in Chiang-mai, B.E. 2533 by evaluating self-managed PHC villages and basic minimum needs (BMN) for health activities. A total of 363 respondents from health centers, village committees, village health communicators (VHC), village health volunteers (VHV) and householders in six sampling villages of Chiang-mai were interviewed by using constructed questionnaires. The Pearson's product moment correlation coefficient at  $\alpha=0.05$  was used to analyze the data.

It was found the high coverage of basic public services. And the village income status was in the middle level. Most of them were buddhist, and had similar social status.

The implementation of PHC programme was found to be highly active in both district and tambon level. There were no differences between designated roles of health personnel at the district and tambon levels. Most of the routine responsibilities were in compliance with

there job descriptions.

Based on self-managed PHC village characteristics, two out of six villages were classified as the most developed village (category A). The rest , four villages were grouped in the least developed village (category C). The BMN scores for overall health activities were high, but only family planning activity was achieved its target. The average score on VHC's and VHV's knowledge, attitude and practice was at the middle level. However, their Knowledge was high while attitudes and practice's were in medium.

The evaluation of PHC effectiveness on both self-managed PHC villages and BMN for health activities was found to be 33.3 percent for category A village. Seven out of eleven items of the village BMN for health activities were in compliance with BMN criteria as of B.E. 2533.

The positive correlation was found between PHC activities at tambon level and the PHC effectiveness (self-managed PHC villages and the BMN for health) at  $p < 0.0005$ . Also the positive relationship between self-managed PHC villages and the village BMN for health was present at  $p < 0.0005$ .

It was suggested,from the study that improving the potential of personnel both at tambon and the community levels would help promote the provincial PHC programme, special concentration should be focussed on supervision, 10 elements of PHC services, and village organization development components ( manpower,finance and organization).