

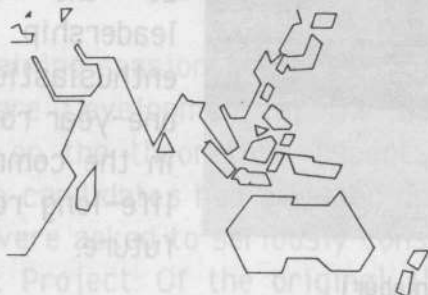
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# AMDA NEWSLETTER

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## RESEARCH AND DEVELOPMENT IN PRIMARY HEALTH CARE

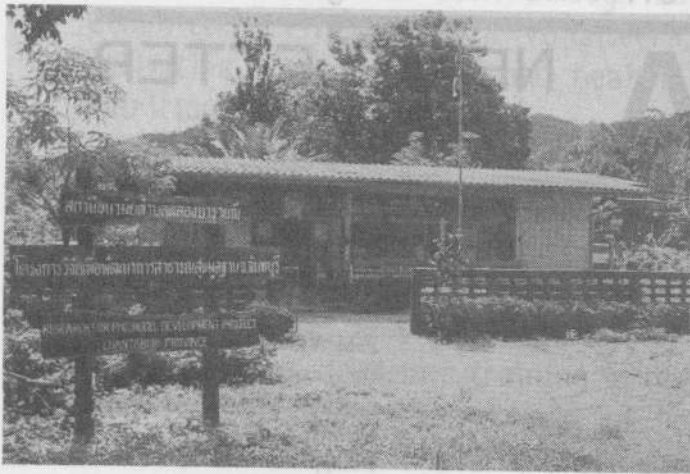
### AN IDEAL PROJECT BY ATC/PHC - THAILAND



Asean Training Centre for Primary Health Care Development  
Mahidol University, Salaya Campus; 25/5 Puthaminthon 4, Salaya  
Nakhonchaisri, Nakhonpathom, Thailand

In 1984, the ASEAN Training Centre for Primary Health Care Development, in cooperation with the Ministry of Public Health and the Japanese Government initiated a unique research and development program in primary health care.

Chantaburi Model Development Project not only seeks to improve the primary health care activities of the area's



A field station in Chantaburi

scattered rural communities, it also trains young men and women as Graduate Health Volunteers (GHV). In this way, we can develop new models for primary health care and at the same time potential leadership is tapped to prepare enthusiastic and capable youths for one-year roles as health volunteers in the community as well as their life-long roles to shape Thailand's future.

### Objectives of the Research Project:

1. Leadership training of Graduate Health Volunteers (GHV).
2. Model development in primary health care and community development through the training of Graduate Health Volunteers.
3. To study and develop a model to strengthen maternal and child health and essential medical care activities in primary health care.

### RESEARCH AREAS AND MODELS:

Research areas are classified into eight models utilizing 15 Graduate health Volunteers (GHVs) in 24 tambons. The fields to be studied are: maternal and child health (MCH), essential medical care (EMC), the health care fund (HCF), primary health care (PHC) and community development (CD).

### SELECTION, TRAINING AND EVALUATION OF GHVs

Selection: Volunteers were recruited through newspaper advertising and university bulletins appealing to individuals who had completed their Bachelor's degree. Potential leaders were looked for, from all parts of Thailand with a variety of backgrounds (political science, English, education, geography, communications, sociology, economics, etc.) who were interested in health and development. In response to this initial campaign, 675 applications in 1985 and 1,024 applications in 1986 were received.

This year, a brief orientation reduced the number of people to 760 who took a written examination. Their curiosity was tested about community development and health, their understanding of the importance of health on human beings, and their co-curricular involvement in activities such as clubs, hobbies, public speaking and other indications of potential leadership.

The number of possible Volunteers was now at 150. Since it was important to screen them for a great interest in health and development and at the same time better understand their strong leadership in other disciplines, each of these young men and women were personally interviewed.

From this selection process, 15 candidates and 25 alternates were chosen to attend the first three-week training course.

Training: The initial training session was held at the ASEAN Training Centre for Primary Health Care Development at the Salaya Campus of Mahidol University. It focused on the theoretical aspects of primary health care. Following this, all the candidates had a better understanding of health and development and they were asked to seriously consider their commitment to the Model Development Project. Of the original 15 chosen for the job, 12 decided to stay on and three alternates were selected for the vacant positions.

Next, went on a one-week study tour to several provinces in the northeast where successful community-oriented activities were witnessed. After this everyone moved to Chantaburi Province for the remainder of the training schedule. Following formal introductions by the officials in the area, the GHVs received two weeks of MCH instruction and they spent one week at their future sites. They also had one week of training in the Community Hospital to learn emergency treatment, primary care and the referral system.



The Maternal and Child Health Clinic ( MCH )  
providing technical supervision

Field Placement: The Volunteers were given realistic job previews for each model area and as a group they decided who would prefer a particular situation. They are working full time at their sites from July 1986 to March 1987.

Each GHV will receive a monthly salary to cover living expenses and a motorcycle to reach out to the people in the scattered homes.

Evaluation: Progress will be monitored by the research teams and the Operation Manager. The effect of the GHV in each community is measured by:

- 1) his or her leadership role;
- 2) a final written report; and
- 3) his or her impact on the community.

The last one can be seen through both process indicators ( the Village Committee, Village Health Volunteers, Village Health Communicators and activities in the village) and health indicators ( infant mortality rates, nutrition, birth weight, etc. ).

#### EXPECTATIONS OF GHVs AND MODELS:

The Volunteers will be working very closely with the village people, local health personnel and the research team. Through the GHV's knowledge of social science, academic training in health and development and interaction with the people and researchers, we hope to come up with new models for primary health care. These innovative models will be creative and practical ways to meet the needs of the people at the grassroots level.

At the same time, the GHVs will learn more about themselves and their communities. While persevering in his or her "voluntary spirit", each GHV must cope with a new environment, learn new customs, combat loneliness and deal with his or her own strengths and weaknesses. Moreover, they have to improve their ability to get along with the community and find ways to apply their knowledge to solve the peoples' health problems. It is believed that



through the project, these individuals will truly learn about health and development, gain greater self-confidence, become more aware and alert members of society and move on to become future leaders in health and their own respective careers.

Three members of AMDA Japan visited ATC/PHC as a part of this year's field study and investigated the community medicine and primary health care set ups of Thailand.

A Graduate Health Volunteer interviewing villagers

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#### **ASIAN MEDICAL STUDENTS' ASSOCIATION (AMSA) BRINGS INTERNATIONAL NEWS LETTER**

"AMSA NEWS", the first news letter came out in the month of July with good contents and look. The publication of this letter fulfilled the long felt need of a media to inform the activities of AMSA to its members in Asian Countries.