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COMMUNITY PARTICIPATION IN
HEALTH DEVELOPMENT IN THAILAND

A thesis presented in fulfillment of the requirement
for the degree of Doctor of Philosophy
in Nursing at
Massey University

Nit Tassniyom
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ABSTRACT

This thesis is a chronicle of research into the implementation of community participation in health development in Thailand. Community participation is recognised as the key concept of primary health care. Participation in this study has been conceptualised as power. Therefore, to participate is to achieve power, and participation is a process of empowerment. The research participants were health workers employed at the subdistrict health centre, and village health volunteers. These participant groups were chosen because the researcher perceived that they were groups with relatively little power in the Thai health service.

The research involved the participants in a two stage process. The first stage was an examination of the concept of participation in relation to the community's experience with development projects. During this stage it became apparent to the researcher that the original concept of community participation was poorly understood by both participant groups. The second stage involved the use of participatory research to achieve community empowerment by supporting the participants in an analysis-action-reflection process. Dialogue, with equal respect between the researcher and participants, was the key method to encourage analysis of their existing situation in order to raise their awareness, the most important step of empowerment. Simultaneously, action research was also utilised to solve a selected health problem, dengue fever control. A comparison between the results of the implementation of action research processes and that of the participatory research processes utilised in this study revealed that participatory research better ensured community participation in health development.

The findings provide an understanding of the theoretical concept of community participation in health development, and its enaction by the use of an empowerment process. The utilisation of a new primary health care approach, whereby the community is empowered to be self reliant and solve its own health problems, would depend on the acceptance and application of the empowerment approach by health workers. The empowerment approach would need to be pivotal in the work of all health personnel, including the implementation of policies and routine practice.
Specifically, the empowerment approach has much to offer community health nursing and its adoption would support the World Health Organisation's recommendation that a problem-solving, process-oriented and community-based curriculum is necessary to adequately prepare these practitioners. The adoption of this approach would require expansion of the present curriculum to include not only public health science and nursing science concepts, but also those related to community development. The new curriculum would uniquely equip nurses to work in communities and this in turn would provide specialised knowledge for community health nursing, allowing it to be differentiated from other nursing specialties.
ACKNOWLEDGMENTS

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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>APHA</td>
<td>American Public Health Association</td>
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<tr>
<td>AR</td>
<td>Action research</td>
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<tr>
<td>BMN</td>
<td>Basic Minimum Needs</td>
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<td>CIH</td>
<td>Community involvement in health development</td>
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<tr>
<td>CP</td>
<td>Community participation</td>
</tr>
<tr>
<td>CPHC</td>
<td>Comprehensive primary health care</td>
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<tr>
<td>CPHCC</td>
<td>Community primary health care centre</td>
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<tr>
<td>CPT</td>
<td>Communist Party of Thailand</td>
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<tr>
<td>FAO</td>
<td>Food and Agriculture Organisation of the United Nations</td>
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<tr>
<td>IBRD</td>
<td>International Bank for Reconstruction and Development</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Office</td>
</tr>
<tr>
<td>MOPH</td>
<td>Ministry of Public Health</td>
</tr>
<tr>
<td>NESDB</td>
<td>National Economic and Social Development Board</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-government organisation</td>
</tr>
<tr>
<td>PAHO</td>
<td>Pan America Health Organisation</td>
</tr>
<tr>
<td>PAR</td>
<td>Participatory action research</td>
</tr>
<tr>
<td>PR</td>
<td>Participatory research</td>
</tr>
<tr>
<td>PHC</td>
<td>Primary health care</td>
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<tr>
<td>SPHC</td>
<td>Selective primary health care</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations International Children’s Emergency Fund</td>
</tr>
<tr>
<td>UNRISD</td>
<td>United Nations Research Institute for Social Development</td>
</tr>
<tr>
<td>VHC</td>
<td>Village health communicators</td>
</tr>
<tr>
<td>VHV</td>
<td>Village health volunteers</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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