

ASEAN人造りプロジェクト
タイ国プライマリー・ヘルス・ケア
訓練センター計画打合せ調査報告書

昭和59年12月

国際協力事業団

ASEAN人造りプロジェクト
タイ国プライマリー・ヘルス・ケア
訓練センター計画打合せ調査報告書

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昭和59年12月

国際協力事業団

国際協力事業団	
受入 月日 '85. 5. 31	122
登録No. 11511	98
	MCF

は し が き

国際協力事業団は、本プロジェクトについて昭和56年6月、第1次予備調査、同年11月、第2次予備調査、昭和57年3月、事前調査、そして昭和57年9月、実施協議調査団を派遣し、討議議事録(R/D)を締結し、同年10月1日よりプロジェクト方式技術協力を実施してきている。

本プロジェクトは、タイ国のみならず各国についても共通の最重要課題の一つであるプライマリーヘルス・ケアの向上を図るため、地域住民の健康の保護・増進を担当する指導員・普及員等を訓練・養成し、あわせてプライマリーヘルス・ケア推進のための手法の開発を目的とした調査研究活動を行っている。また、アセアン5カ国を対象とした国際セミナーも初年度より実施している。当事業団はプロジェクト運営上の諸問題につき、関係者と協議するために橋本正己埼玉県立衛生短期大学学長を団長とする計画打合せ調査団を昭和58年10月に派遣した。本報告書はその調査結果をとりまとめたものである。

ここに計画打合せ調査団各位、並に、調査団派遣に協力を賜った関係機関の各位に対し深甚なる謝意を表する次第であります。

昭和59年12月

国際協力事業団

理事 中 平 立

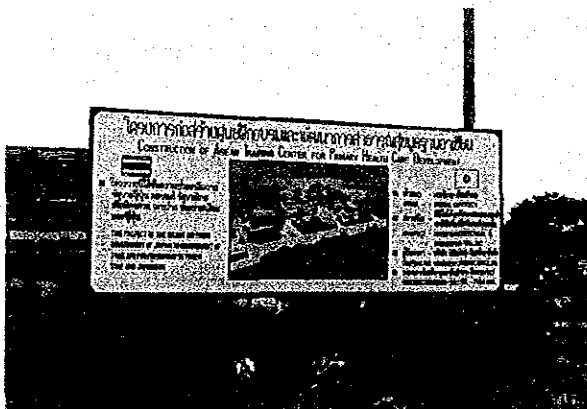


チョンブリ地区でのプライマリー・ヘルス・
ケア集会

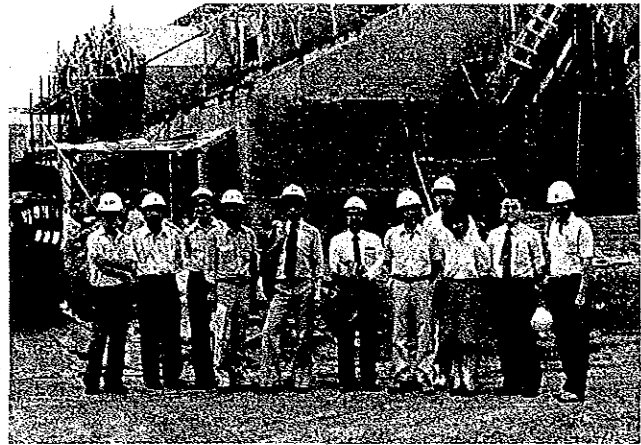
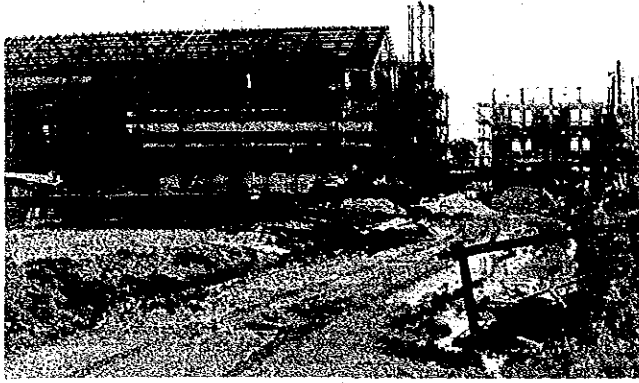
右から橋本団長、ナット部長







サラヤキャンパス建設現場



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I 調査団の構成と調査日程

1. 調査団の構成

団長：橋本正己

埼玉県立衛生短期大学長

団員：豊川裕之

東京大学医学部助教授（疫学）

団員：松本信雄

東京大学医学部助教授（公衆衛生）

団員：谷崎奏明

外務省経済協力局技術協力第2課首席事務官（技術協力）

団員：近藤芳久

国際協力事業団医療協力部医療協力課 参事

2. 調査日程

58/10/23(回) 16:10 成田発(TG741)

20:20 バンコック着

10/24(月)

JICA事務所及び大使館職員と打合せ、DTEC局次長表敬、マヒドン大学学長表敬 ※①

10/25(火)

マヒドン大学にてプロジェクト関係者との打合せ。

(タイ側から、本年度の事業計画に関する一般的な報告があり、「Proposed Schedule」に沿って、事業を進めたい意向を表明した。これに対して、日本側は、単年度主義の枠内における予算制度の仕組みについて、特に、予算要求の手順及び方法について、概略説明を行った。また、タイ側は、「PROPOSED SCHEDULE」に対して日本側が格別の反対意見を出さなかったとして、これに合意したと判断し、この線に沿って予算措置を求めたが、要請金額に対する示達額が極めて、少額であるとして、その実現方を強く希望した。日本側は、タイ側のガイド・ラインを充分考慮して、本邦における予算要求に反映させることを約束した。) ※②

10/26(水) 07:00 バンコック発

09:00 バタヤ着

(チョンブリ県のプライマリー・ヘルス・ケア・デヴェロブメントに関する集会にオブザーバーとして本件調査団が参加した。県知事及びナット・マヒドン大学学長を初め、2~300名の関係者が、列席し、盛況であった。橋本団長は、調査団を代表して、祝辞を述べた。PHC

カウンターパートであるORAPIN研究部長及びAnchern 研究部長ほか数名のスタッフに、日本の予算要求・実施の実情を、具体的な例を取上げ、説明を行った。)

橋本団長は、10月27日帰国のため、バンコック向け出発。 ※③

10/27(木) サラヤ・キャンパス所在のPHC訓練センター建設現場視察、橋本団長は、JL462にて帰国。

(建設工事は、急ピッチで進行中、本センター建設の関係者及びカウンターパートに案内され、施設の今後の利用方針及び方法について討議した。)

本件プロジェクトの実施に関する予算上の諸問題を討議し、今後の技術協力に対する予算措置の見通しについて、タイ側の納得を得ることにあつたが、日本側は、更にミニッツを締結することによる効果を考慮し、急拠ミニッツ案を作成し、事前に団員間の了解を取付け、28日の会議の議題に取上げることとした。 ※④

10/28(金) マヒドン大学にて、プロジェクト関係者との打合せ。 ※⑤
ミニッツ協議内容を大使館及びJICA事務所へ報告。

(別添のミニッツ)に従って、各条項毎に、双方で意見を交換し、このミニッツに準拠して、署名交換することを約束した。その夜、調査団主催のレセプションの席上、双方が、これに署名・交換する手筈であった。ナット学長が、午前中の会議に出席していなかったことにより、タイ側は、原則的に、これに合意しているものの一部条項につき、署名する段階になって異論を打出してきた。折衝は、難行したが、激しい討論の結果、Annex II-3に3字挿入したことと、Annex III-2に16字削除して、これに署名交換することが、できた。)

調査団主催のレセプション

10/29(土) 10:40 バンコック発 TG600
21:25 成田着

※① Oct. 24

※② D. T. E. C

Mr. Kasem Unesuvan 次長

Mahidol University

Dr. Natth Bhamarapravati 総長

Prof. Dr. Pravase Wasi 副総長

Dr. Krasae Chanaongse (ATC/PHC局長)

Dr. Mali Thaineau (ATC/PHC顧問)

Dr. Anchern Isarangkulna Ayuha (ATC/PHC国内訓練部長)

Dr. Orapin Singhadeje (ATC/PHC研究部長)

Dr. Santhat Sermsri (ATC/PHC事務長)

Miss Sasi thorn Santiwongsakul (ATC/PHC庶務係長)

Miss Watchari Mungkandi (A T C / P H C 事務員)

Miss Waraporn Srisupan (" ")

Miss Boonmi Watianamon (" ")

※③ Oct. 26

Dr. Anchern Isarangkulna Ayuiha (A T C / P H C 国内訓練部長)

Dr. Orapin Singhadeje (" 研究部長)

Dr. Santhat Sermsri (" 事務長)

Miss Waraporn Srisupan (" 研究員)

※④ Oct. 27

Dr. Santhat Sermsri (A T C / P H C 事務局長)

Miss Sasithorn Santiwongsakul (" 庶務係長)

※⑤ Oct. 28

Dr. Krasae Chanawongse (A T C / P H C 局長)

Dr. Mali Thelneau (" 顧問)

Dr. Anchern Isarangkulna Ayudha (" 国内訓練部長)

Dr. Orapin Singhadaj (" 研究部長)

Dr. Santhat Sarusri (" 事務長)

Miss Watchari Nungkandi (" 事務員)

Miss Boomi Wattananon (" 研究員)

II 総括的所見

1. 今回の調査団は、昭和58年3月Bangkokで開催された第1回ASEAN PHC Consultative Meetingの際の、当方とMachidol大学当事者との合意に基づき、8月15日より1週間の訪タイを目標として準備中のところ、直前になってタイ側より延期方の申し入れがあり、その後の数次に亘る調整の結果、漸く10月23日(日)より1週間の訪タイが決定したものである。
2. 本件については、昭和58年7月26日の本プロジェクト国内委員会の席上、本プロジェクトの専門家として6月21日より7月24日までBangkokに赴いた百井一郎氏の詳細に亘る本プロジェクトの現状報告の中で強く指摘されたとおり、昭和58会計年度、すなわち技術協力の第2年目における日本側よりの令達予算が、タイ側の予期に対していちじるしく少額である、という問題がある。調査団受け入れ時期の突然の変更も、この問題がらみのことと察せられた。
3. この問題は、日・タイ間の会計年度、予算編成の考え方と手順、予算執行の諸手続等に大きな差異が存在するため、本プロジェクトにおける技術協力の正式発足の前から、懸念されていたところであり、これまでも本プロジェクトの調査団の報告、国内委員会等において、再三指摘したことである。特に日本の予算の単年度の制度、また前年度の実績に基づく新年度予算の査定、次年度予算要求に必要な事務手続とタイミングなどについては、タイ側の認識との間に大きなギャップの存在することは明らかであり、今回の調査団としては、これらの点について十分に説明をし、今後の技術協力に対する予算措置の見通しについて、タイ側の納得を得ることが、最大の任務であると考えられた。
4. 以上のような経緯で、今回の訪タイについては、小生としても旅行日を除き正味3日間はBangkok滞在のリミットとなり、甚だ不本意であったが、幸いに団員の方々がその後も協議を行い、またJICA事務当局、本プロジェクト調査員などの協力を得て、今後の進め方についての双方合意のminutesを作成することができたことは、幸いであった。
5. 各論的事項については、それぞれ担当の団員の報告にゆずり、ここでは小生Bangkok滞在中を中心として、以下に若干の総括的な所見について述べる。
 - (1) 第1日目の午後及び第2日目の午前・午後を通じて、Machidol大学の学長オフィスの会議室で、ナット学長出席の下に行われた協議では、日本側の技術協力の予算のしくみ等の説明に時間を費したが、タイ側のいう本プロジェクトのいわゆるmaster planの意味について論議が集中し、小生としても日本の単年度会計制度等とも絡んで、政府の中期の開発計画等もすべてGuide line 的であることを説明し、本プロジェクトについてのタイ側のいわゆるmaster Planもguide line の域を出るものではないことを強調した。
 - (2) 第3日目には、PHCのRegional Training ProgramのひとつとしてChonburiで

開催された地方研修会に出席した。この研修会は13のProvincesをカバーするもので、100人余の出席者があり、その構成が狭義の保健関係者のみでなく、農村開発、教育等また大学教員をも含むものであり、講師による講義の後の出席者による討議にも、この点が反映し、PHCにふさわしい討議が活発になされていたことが印象的であった。

なおこの研修会には、Chonburi ProvinceのGovernorはもとより、保健大臣自身が出席されていたことも、日本において長年同様の場に関係してきた小生にとって、PHC推進に対する保健省の積極的な姿勢が示されているように思われた。

(3) 第1日ナット学長のProgress reportでは、本年度(タイ会計年)ATC/PHCのfull-time職員20名が確保された由であり、協議の席上にもDr. Anchern, Dr. Orapin, Mr. Santhaiから新任の幹部職員が出席して、活発な討議が行われた。しかし半面、これまでこの種の協議に参加していたMachidol大学スタッフや保健省のスタッフの姿がみえないことは、多少考えさせられた。

(4) このプロジェクトに対する日本側の長期専門家として、昭和58年6月より長谷川謙氏(業務調整・2年)、また8月より小林基弘氏(健康教育・1年)がBangkokに赴任し、特に当初に述べたような日・タイ間の考え方のギャップの下で、長谷川調整員の努力は高く評価され、また小林専門家も新しい環境になじんで本来の活動も緒についた感を受けた。したがって、今日の重要な課題は本プロジェクトのChief advisorの人選であり、昭和58年9月赴任を予定されていた百井一郎氏が病に倒れたことは誠に残念であるが、早急に適任者を選定すべきである。また、以上の他随時短期の若干の専門家を派遣して、本プロジェクトについてタイ側の人材との相互理解を深めることが、当面重要と考えられる。

6. 昭和59年3月末のATC/PHCの建築落成に伴って、4月以降本プロジェクトの技術協力は、いよいよ本格的な段階に入ることとなるが、すでに述べたように今後の実施計画については、特に教育・研究、モデリング等の予算問題をめぐって、日・タイ間の理解には未だかなりの差があることは否定できず、この点についてさらに当方としては努力する必要がある。しかし、今回の調査、協議において痛感させられたことは、本プロジェクトについてタイ側は、machidol大学、保健省ともにやる気満々である、ということであり、日本側としてもあらゆる面で誠心誠意これに対応すべきであると思料する。(橋本 正己)

III プロジェクトの実施状況

1. 人材養成計画とその実施の状況

(1) 概要

マヒドン大学長、Dr. ナットによれば、このプロジェクトの予算は20%がマヒドン大学に、80%が保健省に振り当てられている。この保健省に割当てられている予算の大半を占める費用が養成計画(Training Projects)である。

養成計画の責任者としてDr. アンチャン(マヒドン大学助教授、女性、Dr. ナットと同級生)が兼務している。

養成計画は国内コースと国際セミナーに分けられるが、国際セミナーは年1回の割合でASEAN五ヶ国のPHC専門家/担当者が会合し、協議・研究を行うものであり、研究計画と重複する性格のものである。

2. 国内人材養成計画

(1) 昭和57、58年度の実績

国内人材養成計画は別表1に示すごとく、実施され、昭和57年度・58年度は6回実施された。受講者総数は200名(実際に参加した人数は194名)であり、総日数は44日、総人日数は1,268である。

第1回、第2回：各県の責任者を対象とする。

第3回：東北地方(コン・ケン周辺)のPHC責任者を対象とする。

第4回：マハサラカム県(技術援助計画によって看護学校が設立されたところ)の中堅層人材を対象とする。

第5回：北部タイ(チェンマイ近辺)の保健所、軍隊、保健婦養成施設の責任者を対象とする。

第6回：南部タイで同上の責任者を対象とする。

上述のように、概ねPHCにおける中堅層の人材を中心に養成・再教育がなされた。

(2) タイ側の養成計画に対する評価

参加者に対して、コース終了時にアンケート調査(Post-test)を実施しており、それによると各コースは5段階評価法(1点~5点)で全体として4.27±0.40という高い評価を受けている。

また、当該アンケート調査は"取り上げられたテーマ"、"講師の説明"、"グループ討議の成果"、"野外トレーニングの成果"、および"コース運営"等についても調査しており、そのいずれにおいても高い評点を得ている。

これらの結果にもとづいて、タイ国側では一応の評価が得られたとしている。

(3) 日本側からの評価

各コースとも、目標設置、カリキュラム、資源 (resources for training)、評価等をきちんとステップを踏んで設置しており、名目と実際の乖離が若干あるとしても、十分に評価できるものである。

昭和58年度は更に充実したものが行われているようであり、サラヤ・キャンパスにセンターが建設されたならば一層充実したトレーニングを実施する可能性がある判断される。

(4) 養成計画・日程の予定

Dr. アンチャンは各年次の養成コースの設定を予定し、別表2に示すような計画表を作製した。各年次とも、これに準拠して実施される。タイ国と日本国の予算年次のズレを克服して立案されたものである。"sample"としてあるごとく、若干の変更はあるもののこの案が基本となることを諒承した。

5. 括 め

名目と内実の乖離が若干あることを感じ取ることができたが、人材養成計画は軌道にのつたと判断される。サラヤのPHC人材養成センターの完成後は教育機材を活用して、更に充実されることが期待できる。

別表1 研修の実績表

TITLE	TRAINING COURSE I 第(I)回	TRAINING COURSE II 第(II)回	TRAINING COURSE III 第(III)回	TRAINING COURSE IV 第(IV)回	TRAINING COURSE V 第(V)回	TRAINING COURSE VI 第(VI)回
	PRIMARY HEALTH CARE DEVELOPMENT	TECHNIQUE OF DEVELOPING LEADER FOR RURAL DEVELOPMENT	TECHNIQUE OF DEVELOPING LEADER FOR RURAL DEVELOPMENT	COOPERATIVES AND PRIMARY HEALTH CARE DEVELOPMENT	ROLE OF TEACHING STAFF IN HEALTH PERSONNEL PRODUCING INSTITUTES ON PRIMARY HEALTH CARE DEVELOPMENT	ROLE OF TEACHING STAFF IN HEALTH PERSONNEL PRODUCING INSTITUTES ON PRIMARY HEALTH CARE DEVELOPMENT
DATE	October, 25-29 1982 5日間	December 6-17 1982 12日間	January 3-14 1983 12日間	February 7-11 1983 5日間	March 14-18 1983 5日間	March 21-25 1983 5日間
NUMBER OF PARTICIPANTS	30	29	17	54	32	38
			cu Khon Kaen の中のDrs, Nurs, etc.	Mahasarakham 県 (看護学校の所在地)	北部タイ六県 Health Center Armies Public Health College の幹部	南部タイ六県 計200 (194)

Training Program in 1980 - example -

別表2

	4	5	6	7	8	9	10	11	12	1	2	3
Training Program												
1. National Training Course	1st	2nd	3rd	4th	5th	6th	7th	8th	9th			
2. International Training Seminar												1st
3. Review & Evaluation												
4. Report making												
5. Settlement of accounts												
6. To submit the documents for the settlements of accounts to JICA												
7. to prepare the schedule for next year												
8. To submit the proposed schedule for next year including calculation of expenditures to JICA.												

2. 研究プログラムについて

(1) Director of Researchに Dr. Orapin が選任された。

(Annex 1 Curriculum vitae 参照)

(2) Member of Research Comitter は以下の8名により構成される。

Member of Research Committee

1. Dr. Debhanom	Faculty of Public Health
2. Dr. Chote	Faculty of Public Health
3. Dr. Pricha	Primary Health Care Office
4. Dr. Samlee	Ministry of Public Health
5. Dr. Swing	Faculty of Public Health
6. Dr. Santad	Faculty of Social Sciences
7. Dr. Orapin	Faculty of Public Health
8. Dr. Kraisid	Ramathibodi Hospital/Institute of Nutrition

(3) 研究計画審査基準

CRITERIA FOR SELECTING RESEARCH PROPOSALS

1. Relevance of research to primary health care in community.
2. Scientific merits of the research design
3. Appropriateness of budget
4. Capability of principal investigators

すなわち、①PHCに関する現実性、②計画が科学的であること、③予算の至適性・実行可能性、④研究者の能力を規準として審査される。なお、研究者の構成については、Ministry of Public Health 関係者として中央より1名、地方より1名の合計2名を選び、これに大学関係者1名を加えることを原則としている。これは、research projectを通じ既存・現有の各方面よりのman powerを動員し、相互間の協調を進めることを意図するものである。

なお、個々のresearch proposalは、以下の関係枠組に沿って検討される。

Term of Reference (Frame work) for
Situation Analysis of each PHC Activity

Objective: To obtain situation of each PHC activity for future implementation.

Investigator: Successful people in working/teaching from

- Ministry of Public Health -- { Rural } research team
- { Central }
- Mahidol University

Duration : 6-9 months

Frame work

1. Introduction
2. Review of previous strategies, approaches, development in each PHC activity.
3. Current or present situation
 - Objective or goal of PHC activity
 - Strategies
 - Coverage: Population, areas
 - Community participation
 - Training
 - What has been done in the field (rural area)?
(Implementation)
 - Support from government/Private sectors/International
Agencies
 - Previous evaluation (if available)
 - pitfall/strength, - indicators
4. Suggestion for future implementation
 - Strategies, approaches
 - Process
 - Organization
 - Linkage with others - PHC activities, rural development
project
5. Conclusion
6. References

(4) 研究経過：1982年度分として申請された48研究計画より審査・選考された21の研究テーマ・研究者名・研究費・研究終了予定日などはAnnex2にみられる通りである。これらのうち、7研究計画については1983年10月中旬に研究経果の報告がなされ、討議が加えられたという。

1983年度分は、Annex3のごとくであり、36の研究計画申請より21が選ばれている。

なお、研究計画については、Ministry of Public Health 関連分野との契約・請負

にもとづく研究計画は遂次その数を限定しつつ、一般公募を増す方向で考えていく方針が示めされた。

(5) 研究実施に関する年度計画の改更

タイ国においては、会計年度が10月にはじまり9月に終わる。この点、日本における4月にはじまり3月に終る会計年度とのずれがあり、予算の執行面で不便を生じ、計画進行の妨げとなりひいては日・タイ相互間における誤解の因となっていた。しかし、長谷川調整員ならびに今回の使節団による日本における予算編成の手順についての詳細な説明により、タイ国としても、研究計画申請→審査→予算執行→研究実施→報告などの一連の事項を、日本の会計年度に合わせて立案することになり、その年間計画の案が検討された(Annex 4)。このような努力は、今後の援助計画を促進するものといえよう。

(6) モデル開発研究計画について

(Plan for Model Development)

モデル開発研究について、タイ側より新たな資金の交付の可能性について打診があったが、日本側は既存の研究のカテゴリーに含まれるものとの考えを示し、了承された。しかし、Primary Health Care Training Center Project において、ASEAN 諸国間の国際的訓練計画がタイ側においてもっとも関心をもたれ、重要視されている一方では、このProject の担手が大学であるということから研究および今回提示されたモデル開発研究の推進もまた大きな関心が払われていることも事実である。

すなわち、議事録(minutes)にみられるよう、タイ側の強い要望により、可能な限り1984年に発足させることの一文が明記されるにいたっている。

モデル開発計画案の要約

モデル開発計画案

ATC/PHC

1984~1986

目 的 :

1. sub-district におけるPHC開発の接近・戦略の開発
2. sub-district におけるPHC活動を指持する積極的な機構の発展
3. PHC開発に関し、政府・非政府関係者間の積極的な協力の推進

モデル開発の性格・意図:

まず第一年度研究計画として、PHC開発のための適当なモデルを展開させる。このモデルは、異なる分野間の協力と住民自身によってPHC活動の運用を強調するコミュニティによる準備・研究講習会を通じ設定される。

試験的研究は以下の領域にて実施される。

- ① sub-district Level

② 農村地方における 4 region

1 region は、3つの sub-district(経済的に貧困、部分的に貧困、経済上うまくいっているところ) を含む。

都市部における 3つの コミュニティ (上記と同様、経済的に段階づけられる)

③ 限定される region は、RTC/PHC のある プロビンスが優先される。

モデル開発に関する接近法 :

ATC/PHC は、sub-district における自己管理モデルの設定を推進し、それにより活動状況を強化し、或る種の問題に対する解答に関する媒介変数を考察し、PHC 開発に関する自己管理活動を推進する。

対象地区は、農村地区・都市地区に経済的貧富を規準に三ヶ所を選定する。

PHC 開発・推進の度合のみならずそれぞれの村およびその住民の特徴に関する資料が収集され、農村部・都市部のコミュニティにおける将来的な PHC 開発についての基本的な情報を提供することを目的とした分析・解釈される。

いずれにしても、モデルは実際の・実践的に開発されるべきで、適用性の低い、はじめのつかない試験研究であってはならない。

また、action-oriented 研究の成果をモデルの開発に活用する。そして、とくに①異なるセクター間の結合、②モデルの実効性、③モデルの再度の適用可能性と自己確立を眼目として展開する。

なお、当初は政府ならびに関連機関により契約・請負を基盤にモデル開発を進める。

(Annex 5)。

(7) 今後の問題

研究の実施に当り、とくに農村地区を対象とした data の収集を考えると、収集された data についてその信頼性・妥当性など data の出所を明らかにし分析に耐えるものであるか自ら吟味出来る質の高い調査技術をもった調査担当者が得られるのか否かいささかの不安がある。したがってこの意味からも " 人づくり計画 " が推進される必要がある。

さらにタイ国の公衆衛生行政組織につきその体系をうかがうと一言でいえば縦割りで異なる部門間の coordination cooperation はきわめて困難であるという。

例えば PHC に関連して Province・District レベルでの組織体系をみると (Annex 5)
Governor → District Health Officer → ^{Health center} Midwife center という Ministry of Interior の Authority Line と Provincial Public Health Officer → District Health Officer という Ministry of Public Health 系の Supervision Line の二系列が存在している。このような点は PHC への行政的対応という意味から時には問題が生じかねない。

例えば Maha Sarakham の Governor は将来計画について Provincial Hospital の拡

張と充実のみを強調し、住民の self-reliance、self-determination に関しては全く関心を示さなかった。このような場合 PHC について積極的な行政的展開は期待できない。

以上の問題はタイ国自身の問題であり、タイ国主導方式で解決されなければならない。

ここで研修計画に目を向けると各種の部門より各種のレベルの者の研修への参加が望まれ、なかでも将来計画を考えるとときにはとくに若い人々の研修に力を入れることが重要であるといえる。

なお、ATC/PHC センターも 1984 年 3 月をもって竣工の運びとなった。この間、1983 年度におけるタイ国側より支出されたセンター関連の諸費用につき調査の結果、次の表に示される費目で合計 3,530,100 Bahts の支出がなされていることが明らかとなった。

Managerial budget for ATC/PHC in 1983

1. Salary	693,800	Bahts
for governmental officials		
permanent staffs		
temporary staffs (26)		
chauffeur		
2. Supply for honorarium, overtime	804,100	
3. Office equipment	1,902,200	
4. Support for PHC research	130,000	
<hr/>		
Total	3,530,100	

Annex: Accomodation appliance (electricity, water etc.)
is being supported by the head quarter of university.

FACULTY OF PUBLIC HEALTH
MAHIDOL UNIVERSITYCURRICULUM VITAE

Name: Orapin (Srisuchart) Singhadej

Date and Place of Birth: April 14, 1942, Bangkok, THAILAND

Citizenship: THAI

Marital Status: Married

Education: M.D. : Siriraj Medical School, Mahidol University,
Thailand, 1965

Diploma in Postgraduate course of Chincial Paediatric Mahidol
University, Thailand, 1967

M.P.H. : (Population Dynamics and Family Health)
Johns Hopkins University, U.S.A, June 1970.

Dr.P.H.: (Population Dynamics and Family Planning Administration),
Johns Hopkins University, U.S.A., May 1977.

Languages: Read, Write and Speak Thai and English

Read and Write French

Professional Experiences:

1965-1966 Internship, Siriraj Medical School, Bangkok, Thailand

1966-1968 Pediatric resident, Siriraj Medical School, Thailand

1968-1969 MCH instructor and researcher, Faculty of Public Health
and The Population and Social Research Institute
Mahidol University, Bangkok, Thailand

1970-1974 Lecturer and researcher, MCH Department, Faculty of
Public Health, Mahidol University, Bangkok, Thailand

Consultant to the Municipality Health Division (Family
Planning Program)

1970-1974 Director MCH and Family Planning Service Center,
Faculty of Public Health, Mahidol University, Bangkok.

1973 Short term consultant (1 month) to the World Health
Organization, Geneva on the Study of Registration and
the outcome of pregnancy in Thailand

1975-1977 Studied in Johns Hopkins University

June-July 1977 Jointed The Thai-American Team for the second evaluation
of the National Family planning Program of Thailand,
which was funded by The USAID.

May-June 1979 Joined of the third evaluation of the NFPP.

- 1978 Assistant Professor of MCH Dept, Faculty of Public Health Mahidol University.
- 1978-1980 Consultant to the Promotion of Breast Feeding project of the Ministry of Public Health, Thailand
- Jan-June 1981 Visiting Assistant professor of International Health and Family Planning
The School of Public Health University of Hawaii at Manoa, U.S.A.
- 1982 Associate Professor of MCH Dept
Faculty of public Health, Mahidol University

Research :

1. "The Outcome of pregnancy in a suburb of Bangkok 1968-1969."
2. KAP Survey of F.P. Among Women in the municipality area, Bangkok, 1972.
3. Perinatal mortality correlates with Birth and Neonatal Death Registration in Nakorn-Rajsimma Province, Thailand, (1972-1973).
4. KAP Survey of Immunization of pre-School Children in Bangkok Metropolis (1978).
5. Study of Impact of Contraceptive Practice on Fertility Pattern among Military and Police Families in Bangkok compare with the population in a remote area, (1979-1980).
6. Impact of Contraceptive practice on Child Spacing of Urban and rural Thai women 1979.
7. Factors affecting a duration between first and second birth of Rural Thai women, 1981.
8. Introducing Primary Health Care Concept to Bangkok Low Socio-Economical Population Through a Community Volunteer Program 1981-1982.

Publication:

1. Singhadej, O. et al, "Knowledge and Attitudes of the parents and the coverage of DPT Immunization in the Pre-School Children of Bangkok, 1978"
Journal of Thai Public Health Association,
Vol 12, No. 1, January 1982 pp. 21-37
2. Singhadej, O., T, Keller & J. Palmore, "Impact of Contraceptive Practice on Child Spacing; A Life Table Analysis of Birth Intervals of Urban and Rural Thai Women, 1979."
Journal of Thai Association for Voluntary Sterilization,
Vol. III, No. 1, December 1981, pp.57-74.

3. Singhadej O, et al "Causes of under birth and neonatal death registration in Soong-Nern District, Northeastern Thailand", Newsletter of The Institute for Population, Research, Chulalongkorn Univ, No. 25, June 1982.
4. Singhadej, O et al, "Introducing Primary Health Care Concept to Bangkok Low Socio-Economical Population Through a Community Volunteer Program 1981-1982", Journal of Thai Medical Association, Vol. 66, Suppl. 1, June 1983.
5. Sangsingkco, V. and O. Singhadej "The Story of ASIN (Association for Strengthening Information on National Family Planning Program) Published by Thai Association for Voluntary Sterilization (TAVS) & ASIN, Printed by Amarin Press, 1982, pp.55-79.

List of Approved Research Projects of ATC/PHC SERIES 1/2525
1982

Code No.	Name of Researchers	Project Title	Approved Budget (Baht)	Expected date of finish
RES/1/2525/01	Dr. Rujira Mangkalasiri Department of Social Medicine, Maharaj Hospital, Nakornrajsima.	Nutrition Management in Densely Populated Urban and Suburb Communities	31,200	July 1983
RES/1/2525/02	Dr. Anan Menarujfi Director of Ban Pai Community Hospital, Khon Kaen Province	Study on the Role of Village Health Communicators in Health Education	35,300	October 1983
RES/1/2525/03	Dr. Paichit Pawabutr Provincial Public Health Officer of Nakornrajsima Province.	A Study of Methods and Approaches for Effective Community Participa- tion in Primary Health Care	36,000	December 1983
RES/1/2525/04	Assoc. Prof. Dr. Orathai Sakdiswadi Departments of Medicine Faculty of Medicine Ramathibodi Hospital	Evaluation Study of the Impact of VHV's and VHC's Performance on Health Status of the Population	36,000	December 1983

Code No.	Name of Researchers	Project Title	Approved Budget (Baht)	Expected Date of finish
RES/1/2525/05	Mr. Chafrat Patanachareon Health Planning Division, Ministry of Public Health.	Preliminary Study on the Role of Tambol Doctors in Primary Health Care	36,000	August 1983
RES/1/2525/06	Dr. Tongchai Termpasith Director of Technical and Health Service Promotion Office, Nongkhai Province.	Comparative Study on the Effect- iveness of Training and follow- up of Village Health Communi- cators in Nongkhai Province.	36,000	December 1983
RES/1/2525/07	Dr. Samreung Yangkratoke Director of Soongnem District Hospital .	The Role of Community Hospital in Primary Health Care	36,000	December 1983
RES/1/2525/08	Dr. Uthane Jaranasri Provincial Public Health Officer of Kalasin Province.	Utilization of MCH Services by Married Women of Reproductive Age in Kalasin Province According to PHC Projects.	36,000	October 1983
RES/1/2525/09	Dr. Thana Earkarna Provincial Public Health Officer of Samuthsakorn Province	Provincial Health Information system Development and Provision of Primary Health Care Services through Health Volunteer System.	36,000	December 1983

Code No.	Name of Researchers	Project Title	Approved Budget (Baht)	Expected Date of finish
RES/1/2525/10	Dr. Soonthorn Tongkorn Provincial Public Health Officer of Nakhonsawan Province.	Study of Role Acceptance in Association with Role Performance Among VHV's in PHC Project of Nakhonsawan Province.	36,000	December 1983
RES/1/2525/11	Dr. Pricha Deesawadi Director, Office of Primary Health Care.	Collection and Analysis of Research Information of PHC Activities.	45,000	February 1984
RES/1/2525/12	Dr. Sa-nguan Hittayaron- pong Dr. Chawallit Santikittrung- ruang. Mrs. Vena Veravajaya Ms. Pattanee Vinitchakul	Situation Analysis of Food & Nutrition element in PHC Activities	45,000	December 1983
RES/1/2525/13	Mr. Pitak Sirivatana- thanon. Mr. Prateep Siripo Mr. Pulsak Pumviset Assoc. Prof. Udon Kompayak.	Situation Analysis of Safe Water Supply and Basic Sanitation element in PHC Activities.	45,000	December 1983

Code No.	Name of Researchers	Project Title	Approved Budget (Baht)	Expected Date of finish
RES/1/2525/14	Dr. Banyat Atiburanagarn Mr. Chamong Aimsomboon Assist. Prof. Boonyong Kiewkamka.	Situation Analysis of Health Education element in PHC Activities.	45,000	December 1983
RES/1/2525/15	Dr. Vallop Thaineua Assoc. Prof. Dr. Orapin Singhadej . Ms. Uthai Sirivattanan.	Situation Analysis of MCH & Family Planning element in PHC Activities	45,000	December 1983
RES/1/2525/16	Mr. Somporn Uthisampankul Mr. Kitti Pitaknitinan Assist. Prof. Romsai Klasoontorn.	Situation Analysis of Essential Drugs element in PHC Activities	45,000	November 1983
RES/1/2525/17	Dr. Swadi Ramabutr. Mr. Chamroon Thammakrang Assist. Prof. Pornpan Boonyarattapan.	Situation Analysis of Immunization and control of Locally Endemic Diseases in PHC Activities.	45,000	November 1983

Code No.	Name of Researchers	Project Title	Approved Budget (Baht)	Expected Date of finish
RES/1/2525/18	Mr. Sompong Chandharakun Dr. Wiputh Poolcharoen Dr. Somkiet Archananupaph	Situation Analysis of the Treatment of Minor Ailments and Simple Wound in PHC Activities.	45,000	January 1984
RES/1/2525/19	Dr. Thanu Chatthananon Dr. Amphorn Otakul Dr. Supattana Dechatiwongse Na Ayudhaya	Situation Analysis of Mental Health element in PHC Activities.	45,000	February 1984
RES/1/2525/20	Dr. Udon Tumkosit Dr. Radar Kasetsuwan	Situation Analysis of Dental Health element in PHC Activities	45,000	December 1983
RES/1/2525/21	Dr. Crapin Singhadej Dr. Somlee Pleinbang-chang Dr. Kraissidhi Tontierin	Screening Follow up Promulgation of research projects	128,000 172,797 +	March 1984

Annex 3.

List of approved research projects

ATC/PHC

Series 2/2526

1983

<u>Code No.</u>	<u>Title & Principle investigator</u>	<u>Budget</u> (Baht)
RES/2/2526/01	Health Education for Expanding Immunization by Village Health Volunteers & Communicators. Dr. Prachaub Sompong Director, Health Education Division Ministry of Public Health	49,600
RES/2/2526/02	The Effectiveness of the Wire Broadcasting in Nutrition and Health Education: A Case Study of a village in Ubol Rajathani Province. Ms. Karnikar Omunae Department of Public Relation, Institute of Nutrition, Mahidol University	46,500
RES/2/2526/03	Comparative Study of Health Education Through Mass and Individual Communication. Dr. Paungpol Patrakorn Provincial Public Health officer of Petchaboon Province.	45,000
RES/2/2526/04	Outcome of Primary Orientation for VHV & VHC in PHC program of Kabinburi District, Prachinburi Province. Dr. Somsak Narischat Director of Kabinburi Hospital Prachinburi Province.	38,000

<u>Code No.</u>	<u>Title & Principle investigator</u>	<u>Budget</u> (Baht)
RES/2/2526/05	The Effect of Fat Supplementation on Nutritional Status of Pre-school Children in Rural Southern of Thailand. Ms. Sauvanit Ong-Roongruang Department of Community Medicine, Faculty of Medicine, Prince of Songkla University.	45,000
RES/2/2526/06	A study on Excreta Disposal by Twin Chamber Digesters with Sand-bed. Mr. Chaiwath Anantarungsee Sanitation Centre Region I , Praputtabat district, Saraburi Province.	45,000
RES/2/2526/07	An Identification of Simple Indicators for Use in PCM Surveillance at the Local Level. Dr. Mandhana Prateepasaen Department of Nutrition, Faculty of Public Health, Mahidol University.	60,000
RES/2/2526/08	The Study of Alternative Nutritional Supplementary Programme. Dr. Chairatana Taechatrisak Medical office Crown prince of Dansi-Hospital Loei Hospital.	36,000
RES/2/2526/09	Current Situation of Selected Profile of Thai Mothers and Children in the Poverty Area of Amphur Doi-Saket, Chiang Mai Province. Ms. Suntaree Panutat. Assistant Professor, Department of Nursing, Faculty of Medicine, Ramathibodi Hospital.	47,000

<u>Code No.</u>	<u>Title & Principle investigator</u>	<u>Budget (Baht)</u>
RES/2/2526/10	The Cost-Effectiveness of Contra- ceptive Methods in Rural Communities. Mrs. Kusol Soonthornthada Assistant Professor, Institute for population and Social Research Mahidol University.	74,900
RES/2/2526/11	The Campaign of Basic Immuniza- tion Program in Ratchaburi Province. Dr. Pramate Chayinda Head of Ratchaburi province health officer, Ratchaburi province.	45,000
RES/2/2526/12	Expanded Immunization Program in Bang-La-Moong District, Cholburi Province. Dr. Apichart Maekmasin Director of Banglamang hospital, Cholburi Province.	44,640
RES/2/2526/13	Directed PHC Concept to the People through the National Broadcasting. Dr. Supat Wanichakarn Department of Medicine, Faculty of Medicine Siriraj Hospital, Mahidol University.	49,800
RES/2/2526/14	Impact of Mobile Health Unit on PHC in Urban Slum of Bangkok. Dr. Prapat Phisalpong Head of the Department of Preventive and Social Medicine Rajavithi Hosnital.	56,000

<u>Code No.</u>	<u>Title & Principle investigator</u>	<u>Budget (Baht)</u>
RES/2/2526/15	A Study of Referral System Through Primary Health Care in Nakorn- Rajsima Province. Dr. Vichai Kattiyawithayakoon Director community Hospital, Chakaraj District, Nakornrajsima Province.	52,350
RES/2/2526/16	Pilot Production and Distribution of Essential Drugs at Local VS. Central Level. Mr. Somporn Utissampanthakul Pharmacist of Prakhonchai Hospital Prakhonchai District, Busirm Province.	35,200
RES/2/2526/17	Pilot Production and Distribution of Anti-flatulents at Local VS. Central Level. Ms. Nanthana Pruekkumvong Assistant Profersor, Department of Pharmacy, Faculty of Phamacy, Mahidol University.	41,000
RES/2/2526/18	Surveillance of Common Endemic Diseases in Nakorn-Pathom Province. Dr. Pleng Thongsom; Provincial Public Health officer of Nakorn Pathom Province.	38,000
RES/2/2526/19	Primary Health Inspection at Village Level of Sri-sakate Province. Dr. Boonying Wat-Kaew Provincial Public Health officer of Sri-sakate Province.	51,300

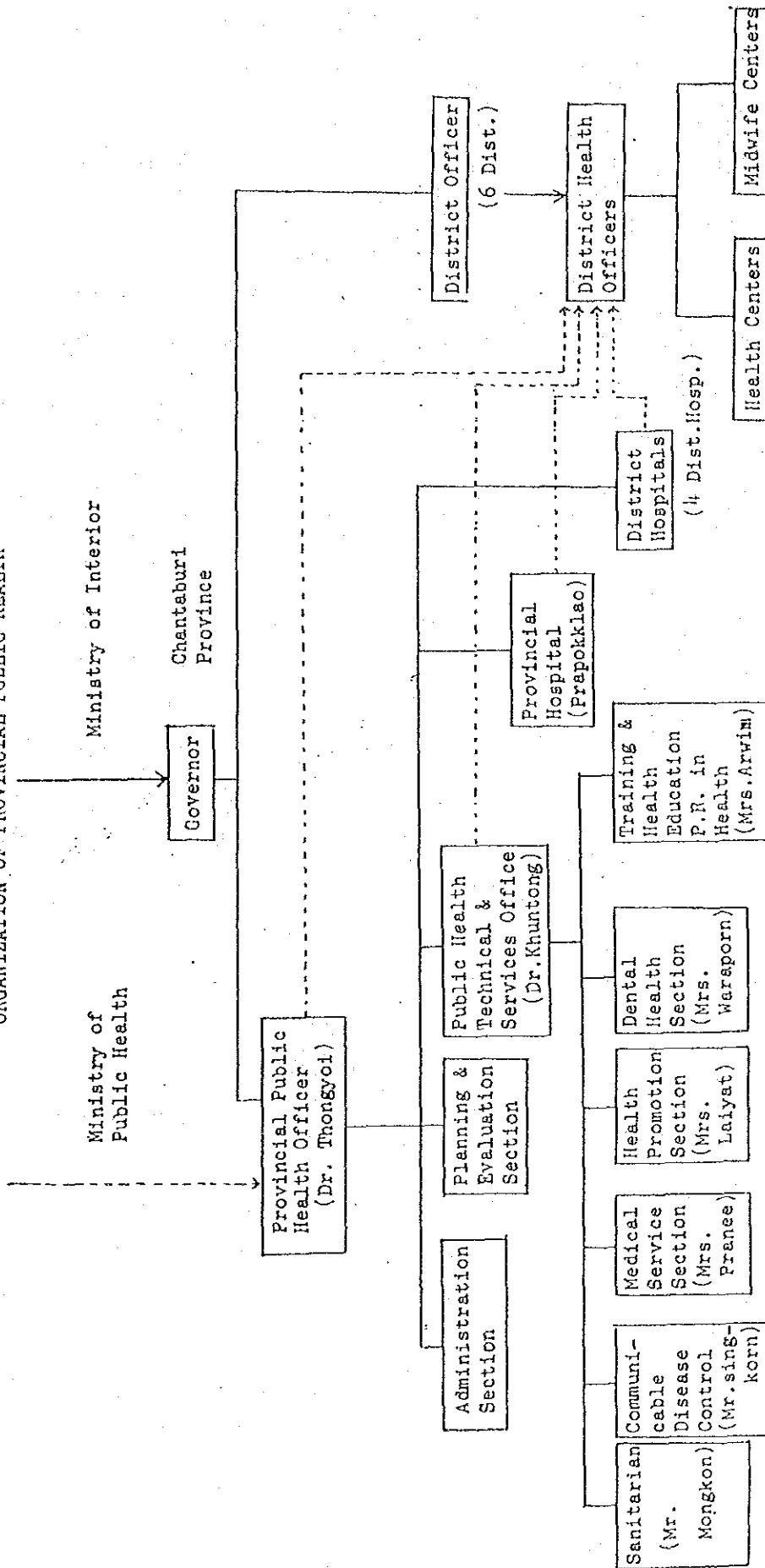
<u>Code No.</u>	<u>Title & Principle investigator</u>	<u>Budget</u> (Baht)
RES/2/2526/20	Appropriate Model and Technology of Common Intestinal Worms Control in Haadyai Villages. Dr. Dilok Pauvnanh Head of Department of Social Medicine, Haadyai Hospital.	65,000
RES/2/2526/21	Monitoring of the Community Mental Health Services in Nakornrajsima Province. Dr. Supol Rujirpipat Director of Korat Psychiatric-hospital Nakornrajsima Province.	35,748

	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH
<u>ATC/PHC</u>												
<u>ACTIVITIES OF RESEARCH</u>												
<u>DIVISION IN 1982-1983</u>												
1. Design the suggested research areas.			→									
2. Lay out the rules and regulations for research implementation.						→						
3. Announce research fund series 1/2525 1/1982								→				
4. Screening the research proposals requested for funding									→			
5. Meeting on revision of research design and budget.											→	
6. Approval of 20 research projects: series 1/2525 1/1982												→

	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH
<u>ATC/PHC</u>												
<u>ACTIVITIES OF RESEARCH</u>												
<u>DIVISION IN 1983-1984</u>												
1. Meeting among researchers of situation analysis of PHC activities.	→											
2. Announce research fund series 2/2526 1983		→										
3. Screening the proposals by research committee and outside readers					→							
4. Revise research design and budget.							→					
5. Approve 20 research projects.								→				
6. Seminar on presentation of research results.									→			
7. Announce research fund series 3/2527 1984										→		
8. Screening the proposals by committee and outside readers.											→	
9. Revise research design and budget.												→
10. Approve research projects series 3/2527 1984												→

11. Planning and consultative meeting on model development.	APRIL
	MAY
	JUNE
	JULY
	AUGUST
	SEPTEMBER
	OCTOBER
	NOVEMBER
	DECEMBER
	JANUARY
	FEBRUARY
	MARCH

ORGANIZATION OF PROVINCIAL PUBLIC HEALTH



— Authority Line

- - - - - Supervision Line

IV プロジェクト実施上の問題点

1. ローカル・コスト負担

各種活動に対するわが方のローカルコスト負担に対する調査団出発前の基本方針は以下の通り。

1. タイ側の主張

- ① 58年度の本プロジェクトに対するわが方予算(3,800万円)が少額である。(1ヶ国当たり40億円が割当てられており30億円は建物、10億円が技術協力(5年間)であれば年2億円は割当てられるべきだ)。
- ② 57年度(6ヶ月間)は必ずしも計画どおりにいかなかったが精一杯努力した点を評価してほしい。
- ③ 研究及びモデル開発事業(60課題)に3,000万円程度確保したい。

2. タイ側主張に対する対応

- ① 鈴木総理が約束した1億ドルについては約束どおり実現できるようわれわれも努力している。しかし、最近のわが国の財政事情の悪化からこれが必ずしも容易でないことを理解してほしい。

本年度のタイ人造りセンターに対する予算は、合計3,800万円で内訳は(教育)・訓練事業に2,200万円、研究・モデル開発事業に1,000万円、機材供与に600万円を考えている。本プロジェクトは「人造り」が中心となるのでわれわれとしても貴国の実施する訓練コースに深い関心をもっており、それに対してできる限りの援助を与えたいと考えている。しかし、年2億円という額は現時点では予算総額が4億円であり、貴国への割当ては困難であるが、明年度以降予算を増額していく予定なので徐々にそれに近い額になっていくであろう。

- ② 57年度の実績はわが方が確保した予算の半分も使われていないということで、わが方としても財政当局に対して昨年以上の増額を要求しにくい立場にあり困っている。本年度、事業がスムーズに行けば、来年度からは増額するよう努力したい。
- ③ 研究・モデル開発事業については、60課題について研究者を募集中と聞いているが、財政当局を説明するには、それぞれの課題についてより詳しい説明資料が必要であるので、長谷川調整員とも十分打合せの上後日提出していただきたい。3,000万円は無理だとしても、若干の上積みを考えたい。

タイ側の基本的姿勢として、本プロジェクトは、日本の総理大臣が、提唱した案件であり、技術協力分として、日本側が2億円/年[㊤]を拠出することを守れないのは、何如なのか、守れ

㊤ プロジェクトとして40億無償資金協力は30億、技術協力は10億とし、協力期間が5年であるので年間2億円となる。

ない筈はないと理解している。従って、タイ側は、これを根拠に、毎年の事業計画に合わせて、PHC訓練活動を策定し実施したい意向であり、本プロジェクトに対する予算額を前広に通知するよう強く要望している。

一方、日本の立場からは、予算額を提示するには、当然のことながら各種の事業計画（事業目的のみならず、経費については、正確な積算根拠を伴うものの）を提出することになるが、タイ側は、上述の如く、日本政府が提唱した案件であることを楯にローカル・コスト負担額の大枠提示を繰り返し要求している。かかる状況を打開するためには、わが国の予算制度上の制約もあろうが、大まかな協力期間中の援助額を提示するとともに、タイ側に対しては、独自の予算措置を促すように努めることが必要である。

2. その他

① 大学と保健省の連携

プロジェクトを開始するにあたり、タイ側は、諮問機関として、コーディネーティング・コミティを設置することになったと聞き及んでいたが、2年を経過した現在でも、これが、設置されていない。その上、元来、本プロジェクト運営には、保健省と協力する立前を、マヒドン大学が、半ば独占的に、事業計画を運営することになり、保健省の協力を十分に得られていない。

② チーフ・アドバイザーの早期派遣

昭和58年6月よりの調整員と同年8月よりの衛生教育専門家を派遣中であるが、プロジェクト全体計画の立案の助言ができるチーフ・アドバイザーを早期に人選し、派遣する必要がある。

資 料

資料 1. MINUTES

THE MINUTES BETWEEN THE JAPANESE CONSULTATIVE SURVEY TEAM AND THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF THE KINGDOM OF THAILAND ON THE JAPANESE TECHNICAL COOPERATION FOR THE PRIMARY HEALTH CARE TRAINING CENTER PROJECT

The Japanese Consultative Survey Team (hereinafter referred to as "the Team") organized by the Japan International Cooperation Agency (hereinafter referred to as "the JICA") and headed by Dr. Masami Hashimoto, visited Thailand from October 23 to 29, 1983 for the purpose of consulting the implementation constraints of the technical cooperation concerning the Primary Health Care Training Center Project, the ASEAN Human Resources Development Project in the Kingdom of Thailand.

During its stay in the Kingdom of Thailand, the Team exchanged views and had a series of discussions with the Thai authorities concerned in respect of desirable measures to be taken by both governments for the successful implementation of the technical cooperation programme for the above-mentioned Project.

As a result of the discussions, the Team and the Thai authorities concerned agree with reference to sign the Minutes as attached in separate papers.

Bangkok, October 28, 1983.

for. Hiroyuki Toyokawa

Dr. Masami HASHIMOTO,
Head
Japanese Consultative Survey Team

Verasae Chanaewong

for Prof. Natth BHAMARAPRAVATI,
Project Director,
Rector of Mahidol University.

ANNEX I PROPOSED SCHEDULES OF THE ATC/PHC PROJECT

Regarding the proposed schedules of the ATC/PHC Project, the Team has taken it as a guideline of the Project. It shall be specified timely taking into account the budgetary system.

1. The proposed schedule of the ATC/PHC activities

Activities	Oct. 82	April 83	April 84	April 85	April 86
1. National Training *	30 persons x 6 courses (2 week/course)	30 persons x 12 courses (2week/course)	30 persons x 12 courses (30 days/course)	30 persons x 12 courses (30 days/course)	30 persons x 12 courses (30 days/course)
2. International Training	-	-	10 persons x 1 course (90 days)	10 persons x 1 course (90 days)	10 persons x 1 course (90 days)
3. International Seminar **	15 persons x 1 seminar (5 days)	(20 - 25) x 1 (10 days)	(20 - 25) x 1 (10 days)	(20 - 25) x 1 (10 days)	(20 - 25) x 1 (10 days)
4. Research ***	- Documentation - Research - Situational Analysis - Field surveys	- 60 research projects on contractual basis (50,000 ₪ each)	- 60 research projects on contractual basis (50,000 ₪ each)	- 60 research projects on contractual basis (50,000 ₪ each)	- 60 research projects on contractual basis (50,000 ₪ each)

- Methods and Approaches for effective community participation	- Training module	- Management and coordination of PHC activities	- Supervision and continuing education for volunteer	- Documentation research	- Field survey & situational analysis
				5 modelling sites :	4 in rural and 1 in urban
					(700,000 ₪ per site)

5. PHC Model ***

Development

ANNEX II TRAINING PROGRAMME

1. In the fiscal 1982, the training courses were conducted in addition to the ASEAN Consultative Seminar on the Primary Health Care Training Center Project for the member countries, each of which summaries was printed in English, and met a mutual appraisal for the high level curricula, well disciplined organization, and the like.
2. Eight training courses and one international consultative seminar have been/will be conducted in the fiscal year of 1983.
3. The Thai authorities concerned, explained the training programme for the fiscal year 1984. The explanation was taken note by the Team.

*including international
✓ training course
C. 1984*

Hiroaki Toyokawa

ANNEX III RESEARCH PROGRAMME

1. A request including the detailed items with a budgetary calculation basis shall be timely submitted to the JICA prior to the commencement of a new fiscal year.
2. The model development fund shall be integrated within the category of the research programme, and shall be provided on the basis of the Thai's budgetary request for the fiscal 1985. *Hiroaki Toyokawa*
Basal
3. After the explanation about the Model Development Programme by the Thai authorities concerned, the Team and the Thai authorities concerned came to conclusion to begin it as soon as possible, possibly in 1984.

ANNEX IV EQUIPMENT

An annual request for equipment shall be made corresponding to the step-by-step target of the Project and submitted to the JICA at the end of March each year.

ANNEX V COUNTERPARTS

The PIC counterparts shall be selected to place any required posts on the implementational process of the Project and shall dedicate themselves to the assigned responsibilities in accordance with the Thai laws & regulations.

ANNEX VI CONCLUSION

In spite of the differences of the budgetary system, the Thai side and the Team arrived at the thorough understanding and agreed to observe the items of the Minutes.

(I) ASEAN INTERNATIONAL SEMINAR

1. PURPOSE:

- (1) To assess current situation of country specific primary health care plan of action in various areas of activity
- (2) To review strategies and mechanism for technical cooperation among developing countries in primary health care development
- (3) To formulate an effective mechanism and institutional framework for the ATC/PHC to facilitate regional collaboration in health development

2. AGENDA

- (1) Opening of the Seminar
- (2) Election of the chairman
- (3) Adoption of the Agenda
- (4) Situation analysis on ATC/PHC
- (5) Presentation of country reports
- (6) Group discussion
- (7) Conclusion and recommendation
- (8) Closing of the Seminar

240203 Silaya
from: Santit
translation by Hallye

Information and Documentation Division: Responsibilities and Roles of the Division include the followings:

1. Making a one year and five year development and operational plans of the Division.
2. Collecting information and documentation including paper, figures, books, statistics, research reports and other data related in PHC. These data are from educational institutes and other government offices, as well as from all the ASEAN member countries.
3. Establishing an evaluation work of the ATC/PHC activities.
4. Making a report showing PHC statistics within Thailand and in the ASEAN member nations.
5. Developing measures or techniques of PHC development in national and village levels.
6. Demonstrating knowledge and data in PHC for further development of PHC.
7. Working as a center of information and documentation in PHC for all the ASEAN member countries as well as agencies related in PHC.



ASEAN TRAINING CENTRE FOR PRIMARY HEALTH CARE DEVELOPMENT
420/1 RAJWITR RD, PHAYATHAI, BANGKOK 10400, THAILAND
TELEPHONE: 2810113 CABLE: PUBHEALTH

January 25, 1984

Mr. Akira Kasai
Resident Representative
Bangkok Office
Japan International Cooperation Agency
c/o Embassy of Japan
New Petchaburi Road, Bangkok

Dear Mr. Kasai,

Subject : Second International Consultative Meeting
on Primary Health Care Development
Pattaya City, Thailand : 6-8 March 1984

The ASEAN Training Center for Primary Health Care Development (ATC/PHC), Thailand, in cooperation of the Government of Japan has the great pleasure to inform you that the Second International Consultative Meeting on Primary Health Care Development will be held at Pattaya City, Thailand, from 6 to 8 March 1984.

This meeting is seen as an activity to encourage and promote technical cooperation among ASEAN member countries in the area of primary health care development. The theme of the consultation encompasses the assess of current situations of country specific primary health care and the practical formulation of an avenue and frame work for the Center to facilitate regional collaboration in health development.

We have invited two senior level officials who have helped develop their nation's primary health care from each ASEAN country, one from the Ministry of Health and the other from a health-oriented university. Altogether there will be approximately 12 participants from the six ASEAN member countries.

In this connection, it gives me pleasure to invite you and representatives from Japan to participate in this meeting. Particularly in the inauguration on Tuesday, March 6, 1984 from 9.30 - 10.15 a.m, we would appreciate it if the group leader of the Japanese representatives would give an address in honor of the meeting. I should be grateful to receive the the names of these representatives together with the curriculum vitae (the attached forms) at your first convenience.

Enclosed for your information and consideration ,please find the Information Bulletin about this meeting.

On behalf of the Organizing Committee, I would like to thank you in anticipation for your kind cooperation in this matter.

Sincerely yours,



Krasae Chanawongse, M.D., Dr.P.H.
Director

Encl : as stated

cc : Mr. Ken Hasegawa

ASEAN Training Centre for Primary Health Care
Development (ATC/PHC)
Second International Consultative Meeting on
the ASEAN Training Centre for Primary Health Care Development
Pattaya, Thailand
6-8 March 1984

INFORMATION BULLETIN

The ASEAN Training Centre for Primary Health Care Development is a part of technical support of the Japanese Government extended to 5 ASEAN countries under the Human Resources Development Project. The Centre functions under joint auspices of Mahidol University and the Ministry of Public Health. The general objectives of the Centre are to develop updated training facilities and technologies to meet the training needs in the area of primary health care of Thailand as well as other ASEAN countries, to conduct primary health care research and development activities in effort to identify the appropriate models for primary health care development in both rural and urban settings, to formulate training programmes in accordance with research findings, and finally to share experience and information with a view to promoting the development of primary health care among ASEAN member countries.

As a regional training centre, the ASEAN Training Centre for Primary Health Care Development will attempt to serve as a focal point for the development of primary health care network in ASEAN region in the context of technical cooperation among developing countries (TCDC). A regional consultation that constructive recommendations and suggestions concluded would be gratefully beneficial to the achievement of the common accessible health for all by the year 2000.

The First Regional Consultation was held during 28-31 March 1983 at the Bangkok Palace, Bangkok. The delegates were two senior officials from each ASEAN country; one from the Ministry of Health and the other from the health oriented university, who have been fully involved in primary health care development in their countries. In addition, there was a number of advisors and observers from Japan, other related sectors, and international

organizations. The consultation was aimed at formulating recommendations and guidelines for the future role of the ATC/PHC in promoting and facilitating collaborative activities among ASEAN countries specifically in training and research programme.

In response to the recommendations made in the first regional consultation and in formulation of a practical collaborative plan and mechanism in health development by regional collaboration, the Second International Consultation is scheduled to be held accordingly. As all ASEAN countries have committed themselves to the achievement of "Health for ALL by the Year 2000", it is essential that a regional technical cooperation should be strengthened for mutual benefit of all ASEAN member countries.

1. Objectives of the Consultation

This Consultation is an activity to encourage technical cooperation in the areas of primary health care development. To support the operation, the ATC/PHC is trying to develop its role as a focal point to best accommodate this cooperation. Active participation of ASEAN countries in the consultation is deemed highly essential to the organizational and managerial effort in establishing a collaborative plan that is feasible and appropriate to the region. The arrangement of the meeting would challenge the thinking of participants and enable them to conclude the meeting with stimulating approaches and determination to build up a regional collaboration.

The objectives of the consultation are as follows:

1. to assess current situation of country specific primary health care plan of action in various areas of activity;
2. to review strategies and mechanism for technical cooperation among developing countries in primary health care development ;
3. to formulate an effective mechanism and institutional framework for the ATC/PHC to facilitate regional collaboration in health development.

2. Date and Venue of Consultation

The Consultation will be held from 6-8 March, 1984 at the Grand Palace Hotel, Pattaya, Choburi Province,

3. Participants and Observers

Each ASEAN country is invited to nominate two representatives, one from the Ministry of Health and the other from the health - oriented University, to participate in the meeting. Representatives from the Government of Japan

and observers from both national and international organizations with similar orientation are also invited.

4. Working Language

The working language will be English.

5. Travel Arrangements and Visas

An entry visa for Thailand is not required by ASEAN participants. Most nationalities are permitted for a stay of up to 15 days. In case that a visa is necessary, please communicate with the Royal Thai Embassy or Consulate.

Participants are requested to arrive in Bangkok by the evening of March 4, 1984 or the morning of March 5, 1984. Transport will be provided from Bangkok to Pattaya where the meeting will take place on the afternoon of March 5, 1984

Upon finalizing the travel schedule, participants should advise the ATC/PHC in Bangkok of the date, flight number, and arrival time so that arrangements could be made for them to be met at the airport. Transport will be provided on arrival and return as well as for all other official functions in Bangkok and Pattaya.

6. Vaccinations

Vaccinations and inoculations are not necessary. Only residents from contaminated areas declared by the World Health Organization are required to show their valid certificate of health.

7. Accommodation

For participants arriving on the evening of March 4, 1984 accommodation will be reserved for one night's stay at a hotel in Bangkok.

From the period of March 5-9, 1984 the Grand Palace Hotel will be reserved at a special room rate for all participants and observers of the meeting.

8. Currency

In Thailand, the unit of currency is the Baht. One US dollar currently

equals about 23 baht.

There are no restrictions on the import of other currencies or other forms of money such as travellers' cheques, drafts or letters of credit.

Travellers' cheques or foreign currency may be changed at the hotel or any bank.

9. General Information

By reason of its geographical location and its topography, Thailand has a variety of climates largely dependant upon the monsoons and the elevation above sea level. There are no well - defined seasons. The average temperature is 27.7°c and the average annual rainfall is about 1,458.2 mm. The relative annual humidity averages 78.0 per cent.

Hightweight casual clothing is recommended, preferably cotton.

Electric current throughout the country is 220 - 230 volts AC, 50 cycles. Transformers should be brought for equipment of other voltages.

10. Contacting Address

ASEAN Traning Centre for Primary Health Care Development
Mahidol University
25/5 Phutthamonthon 4
Salaya, Nakornchaisri
Nakornpathom, Thailand

Telephone : 4132931 - 5 ext 73

Provisional Agenda

1. Opening of the Meeting
 2. Election of Chairman, Vice-Chairman and Rapporteurs
 3. Adoption of Agenda
 4. Situation Analysis of the ATC/PHC
 5. Presentation of Country Reports
 6. Group Discussion
 7. Conclusions and Recommendation
Adoption of the Report
 8. Closing of the Meeting.
-



ศูนย์ฝึกอบรมและพัฒนาการสาธารณสุขมูลฐานอาเซียน
420/1 ถนนราชวิถี พญาไท กรุงเทพมหานคร 10400 โทร. 2810113

ASEAN TRAINING CENTRE FOR PRIMARY HEALTH CARE DEVELOPMENT
420/1 RAJVITHI RD, PHYATHAI, BANGKOK 10400, THAILAND; TELEPHONE: 2810113 CABLE: PUBHEALTH

PROPOSED PROGRAMME OF THE MEETING

Tuesday 6 March 1984 :

- 08.30 - 09.30 Registration
- INAUGURATION SESSION
- 09.30 - 10.15 Inauguration Address by H.E. Mr. Marut Bunnak
Minister of Public Health
- Address by Dr. Amorn Nondasuta
Permanent Secretary for Public Health
Ministry of Public Health
- Address by Representative of the Japanese Government
- Address by Chairman of the ASEAN Expert Group on Health
and Nutrition
- Welcome Address by Prof. Dr. Natth Bhamarapravati
Rector of Mahidol University
- 10.15 - 10.30 Break
- PLENARY SESSION
- 10.30 - 11.00 Business Arrangement :
- Election of the Chairman, Vice Chairman and Rapporteur
 - Adoption of Agenda
- 11.00 - 12.00 Situation Analysis of the ASEAN Training Center for
Primary Health Care Development : Past, Present and Future
- 12.00 - 13.30 Lunch
- PLENARY SESSION
- 13.30 - 15.30 Country Report Presentation and Discussion
- Brunei
 - Indonesia
 - Malaysia
 - Philippines
- 15.30 - 15.45 Break

15.45 - 17.15 Country Report Presentation and Discussion (continued) :
- Singapore
- Japan
- Thailand
18.30 Reception

Wednesday 7 March 1984 :

PLENARY SESSION

09.00 - 10.15 Formation of Three Working Groups to Discuss on :
1) The Formulation of International Training Program
in Primary Health Care : Issues, Types and Levels
2) Development of International Consultative Meetings
on Health.
3) A Mechanism to Support a Regional Collaboration in
Primary Health Care.
10.15 - 10.30 Break
10.30 - 12.00 Group Discussion on item 1,2 and 3
12.00 - 13.30 Lunch
13.30 - 15.30 Group Discussion (continued)
15.30 - 15.45 Break
15.45 - 17.00 Preparation of Group Discussion Report

Thursday 8 March 1984 :

PLENARY SESSION

09.00 - 12.00 Presentation and Discussion on Reports of the
Discussion Groups
12.00 - 13.30 Lunch
13.30 - 14.30 Preparation of the Final Report of the Consultation
14.30 - 15.00 Closing Ceremony



ASEAN TRAINING CENTRE FOR PRIMARY HEALTH CARE DEVELOPMENT
420/1 RAJWITHI RD. PHRATHAI, BANGKOK 10400, THAILAND
TELEPHONE: 2510113 CABLE: PUBHEALTH

PARTICIPANT INFORMATION

1. NAME : _____
Surname First Name Other Names

2. Date of birth :
Date Month Year

3. Sex : Male Female

4. Nationality : _____

5. Religion : _____

6. Full postal address :

(a) Home address : _____ Telephone number : _____

(b) Official address : _____ Telephone number : _____

_____ Cable address : _____

7. Professional education

8. Professional Title : Present and Past

The Third International Consultative Meeting on
Primary Health Care Development
September 10 - 14 , 1984

BACKGROUND

The Third International Consultative Meeting on Primary Health Care Development is a part of the ATC/PHC's annual operational programme. The purpose of the organization is to promote technical cooperation among ASEAN countries in the area of primary health care.

The first meeting was organized on March 28-31, 1983. The objectives were to review and discuss strategies and mechanisms for technical cooperation among ASEAN countries, and to formulate recommendations and guidelines for the future role of the ATC/PHC in promoting and facilitating collaborative activities specifically in training and research for primary health care development.

The second meeting is scheduled to be held during March 6-8, 1984 at Pattaya city, Thailand. The objectives of this meeting are to review strategies and mechanism for technical cooperation in primary health care development, and to formulate an effective mechanism and institutional framework for the ATC/PHC to facilitate regional collaboration in health development.

In continuation of the first two meeting, the Third International Consultative Meeting is planned to be organized on September 10 - 14, 1984.

ORGANIZORS

The ASEAN Training Centre for Primary Health Care Development, Mahidol university and the Ministry of Public Health .

SPONSOR

The Government of Japan

PARTICIPANTS

OBSERVERS

There are approximately 20 participants from 6 ASEAN countries and Japan. Observers from other governmental sectors and foreign organization with similar orientation are also invited to attend the meeting. Altogether there will be 40 - 50 participants and observers.

OBJECTIVES

The specific objectives of the meeting are as follows:

- a) to assess the current situation in primary health care development of each ASEAN country,
- b) to review the success and constraint of regional technical cooperation in primary health care training, research and development,
- c) to develop selective approach to primary health care development,
- d) to review areas in which the ATC/PHC can effectively serve the region in the area of primary health care.

ORGANIZATION OF
THE MEETING

Plenary sessions, panel sessions, and group discussion are included in this consultative meeting. Country individual report on primary health care with special emphasis on various approaches to primary health care development will be also presented in order to familiarize participants with the actual primary health care program and implementation, a field observation to KHON Kaen where the Regional Training Centre is located will be arranged.

Proposed Expenditure for International Seminar 1984

1. Air Fare - Economy Class	₱ 148,180
2. Allowance	₱ 120,800
3. Honorarium	₱ 34,000
4. Seminar Management	₱ <u>92,424</u>
Grand Total	₱ <u>395,404</u>

Break - Down Cost

1. Air Fare - Economy

1.1 Jakarta - Bangkok - Jakarta (P 17,530/person)	P 35,060
P 17,530 x 2 persons	
1.2 Manila - Bangkok - Manila (P 17,770/person)	P 35,540
P 17,770 x 2 persons	
1.3 Kuala Lumpur - Bangkok - Kuala Lumpur (P 8,350/person)	P 16,700
P 8,350 x 2 persons	
1.4 Singapore - Bangkok - Singapore (P 10,600/person)	P 21,200
P 10,600 x 2 persons	
1.5 Bandaseri - Bangkok - Bandaseri (P 10,840/person)	P 21,680
P 10,840 x 2 persons	
1.6 Bangkok - Khon Kaen - Bangkok (P 1,500/person)	P 18,000
P 1,500 x 12 persons	
sub-total	P <u>148,180</u>

2. Allowance

2.1 Participants from ASEAN countries (P 1,200/person/day)	P 100,800
P 1,200 x 12 persons x 7 days	
2.2 Special instructors during observation (P 400/person/day)	P 20,000
P 400 x 25 persons x 2 days	
sub-total	P <u>120,800</u>

3. Honorarium

3.1 Special instructors (P 200 /hr./person)	P 24,000
P 200 x 3 hrs. x 40 persons	
3.2 Clerks (P 400/person/day)	P 6,000
P 400 x 3 persons x 5 days	
3.3 Typists (P 400/person/day)	P 4,000
P 400 x 2 persons x 5 days	
sub-total	P <u>34,000</u>

4. Seminar Management

4.1 Materials for seminar (฿ 600/set)	฿ 30,000	
1 set : file	฿ 150	
technical report	฿ 200	
stationary	฿ 100	
A/V materials	฿ <u>150</u>	
	฿ 600 x 50 sets	
4.2 Gasoline during field observation	฿ 8,424	
From Bangkok -- Khon Kaen -- Bangkok		
600 km. (5km./l) x 3 cars x 2 ways x 11.7 ฿/l		
4.3 Conference room rental (฿ 2,000/day)	฿ 4,000	
฿ 2,000 x 2 days		
4.4 Report Making (฿ 250/set)	฿ 50,000	
฿ 250 x 200 sets		
	sub-total	฿ <u>92,424</u>
	Grand-Total	฿ <u><u>395,404</u></u>

(2) AN INTERNATIONAL POSTGRADUATE COURSE

IN

RURAL MANAGEMENT OF PRIMARY HEALTH CARE DEVELOPMENT

OCTOBER 1 - DECEMBER 28, 1984, BANGKOK, THAILAND

COURSE ORGANIZED BY

ASEAN Training Centre for Primary Health Care Development, Mahidol University/Ministry of Public Health

OBJECTIVES

The principal aim of the Course is to contribute and reinforce existing efforts in the field of planning and management of primary health care in individual ASEAN member countries.

Unlike some similar courses, this course is designed to link planning and management with specific technical procedures and social functions of health services, instead of dealing merely with theoretical considerations of planning and management techniques. The focus is on implementation and middle-level management.

The aim is to learn from experience and improve technical cooperation among ASEAN member countries and other developing countries.

The specific objectives of the Course are:

- a) To develop and support attitudes towards primary health care as part of social development and towards the population as an active participant in the health system; to reinforce positive attitudes to rational methods in planning and administration services;
- b) To develop skills in analysing technical and organizational problems of health services and techniques in the judgement of alternative solutions; to develop skills in functional analysis of services and the planning of development of adequate manpower;
- c) To increase knowledge to be used in the:
 - listing and assessment of the core of technological and managerial problems in primary health care;
 - analysis of trends of development and health priorities;

- conditions and ways of community participation in health care;
- orientation as to the possibilities and position of community health in relation to other sectors of development;
- application of techniques in integral primary health care to tackling different typical problems such as maternal and child health and family planning, prevention and control of infectious diseases, genetic disorders of high prevalence, nutritional problems, health education, basic medical care;
- organization of services under different conditions;
- manpower development and financial support to primary health services;
- design and practice of the evaluation and control of health services and implementation of plans;
- training and research in management of primary health care.

CONTENT OF THE COURSE

The techniques of planning and management will be briefly introduced. The most important part of the Course will consist of case studies and

analysis of experience in the development of health services in developing countries. The essentials of that part will be summarized in the last section of the Course by formulating different types and models of development of health services. A short refreshment course in theory of planning and management in health care and health services as a social system will be provided at the beginning. Teachers will be from the Faculty of Public Health, from the Medical Schools and other faculties of Mahidol University as well as from the Ministry of Public Health and other universities. A special contribution will be given by teachers from the National Institute Development of Administration (NIDA).- In specific topics guest lecturers from ASEAN member countries and the World Health Organization will be invited.

ORGANIZATION OF THE COURSE

The language of instruction will be English. Formal teaching will include 45 working days with 3 hours of lectures, 2-3 hours of work in groups, and 1-2 hours of summing-up seminars. In addition there will be at least 20 days of field work and observation study. The subjects will be studied by analysing actual experience, case studies, field observations and field work. The studies will include problems of communicable disease

control, and malaria and other endemic diseases control, nutritional problems, common diseases, basic sanitation, family planning and maternal and child health. Practical demonstrations will include rural health centres and work of auxiliary midwives, preventive campaigns, work of the district hospital doctor, health units in industries, organization of the provincial hospitals and their referral system of services, public health institutions, and cooperation of health units with other social and educational services. Written material will be sent to participants so that they may prepare themselves before the beginning of the Course.

A Certificate of Attendance of the ASEAN Training Centre for Primary Health Care Development will be issued.

Proposed Expenditure for International Training 1984

1. Air Fare - Economy	₱ 158,550
2. Daily Allowance for Trainees and Special Instructors	₱ 552,000
3. Daily Allowance for Trainers during Field Study/Observation	₱ 100,000
4. Travelling Expenses for Field Study/Observation	₱ 36,720
5. Special Instructor Fee	₱ 72,000
6. Teaching Materials	₱ 110,000
7. Training Materials	₱ 30,000
8. Evaluation and Report Making	₱ <u>60,000</u>
Grand Total	<u>₱1,119,270</u>

Break - Down Cost

1. Air Fare-- Economy

1.1 Jakarta - Bangkok - Jakarta (฿ 17,530/person)	฿ 35,060
฿ 17,530 x 2 persons	
1.2 Manila - Bangkok - Manila (฿ 17,770/person)	฿ 53,310
฿ 17,770 x 3 persons (2 trainees + 1 special instructor)	
1.3 Kuala Lumpur - Bangkok - Kuala Lumpur	฿ 16,700
฿ 8,350 x 2 persons	
1.4 Singapore - Bangkok - Singapore	฿ 31,800
฿ 10,600 x 3 persons (2 trainees + 1 special instructor)	
1.5 Bandasari - Bangkok - Bandasari (฿ 10,840/person)	฿ 21,680
฿ 10,840 x 2 persons	
sub - total	฿ <u>158,550</u>

2. Daily Allowance for Trainees and Special Instructors

2.1 Trainees from ASEAN countries (฿500/person/day)	฿ 540,000
฿ 500 x 12 persons x 90 days	
2.2 Special instructors from Manila and Singapore	฿ 12,000
(฿ 1,200/person/day)	
฿ 1,200 x 2 persons x 5 days	
sub - total	฿ <u>552,000</u>

3. Daily Allowance for Trainers during Field Study/Observation

(฿ 400/person/day)	฿ 100,000
฿ 400 x 10 persons x 25 days	
sub - total	฿ <u>100,000</u>

4. Travelling Expenses for Field Study/Observation

4.1 Field study in Khon Kaen (฿1,500/person)	฿ 18,000
Bangkok - Khon Kaen - Bangkok	
฿ 1,500 x 12 persons	
4.2 Observation to 10 health organizations (฿ 1,872/place)	฿ 18,720
200 km. (5km./1) x 2 cars x 2 ways x 11.7 ฿ /1 = ฿ 1,872	
฿ 1,872 x 10 places	
sub - total	฿ <u>36,720</u>

5. <u>Special Instructor Fee</u> (P 200/hr./person)	P	72,000
P 200 x 3 hrs. x 120 persons		
	sub - total	P <u>72,000</u>
6. <u>Teaching Materials</u>		
6.1 Preparation, Printing, Purchasing Text Books	P	60,000
(P 200/item/set)		
P 200 x 15 items x 20 sets		
6.2 Translation (P 100/page)	P	50,000
P 100 x 500 pages		
	sub - total	P <u>110,000</u>
7. <u>Training Materials</u> (P 1,500/set)	P	30,000
1 set: file	P	150
stationary	P	300
A/V materials	P	800
Paper	P	<u>250</u>
	P	1,500 x 20 sets
	sub - total	P <u>30,000</u>
8. <u>Evaluation and Report Making</u> (P300/set)	P	60,000
P 300 x 200 sets		
	sub - total	P <u>60,000</u>
	Grand Total	P <u><u>1,119,270</u></u>

(3) 国内訓練

Training Programme

on

Cooperatives and Primary Health Care Development

1. Objectives

The course aims to enable the participants to:

- 1.1 Understand the concepts, strategies and management of primary health care.
- 1.2 Understand village primary health care development fund
- 1.3 Understand cooperatives system
- 1.4 Consider guideline of primary health care implementation towards
 - Cooperatives welfare system
 - Village development fund

2. Content

- 2.1 Primary health care concepts, principles, administration and managements
- 2.2 Social development policy and primary health care development plan
- 2.3 Primary health care implementation through cooperatives system
- 2.4 Village development fund implementation
- 2.5 Human resource development
- 2.6 Guideline for coordination of primary health care to cooperatives activities

Participants

There are 30 provincial cooperatives officers and district cooperatives officers.

4. Course Organization

- 4.1 Exchange of experiences related to primary health care among participants
- 4.2 Lecture and discussion
- 4.3 Group working
- 4.4 Field observation

5. Duration

I week

July 15-21, 1984

Training Programme
on
Primary Health Care Development

1. Objectives

The course aims to enable the participants to:

- 1.1 Understand the concepts, strategies, and management of primary health care
- 1.2 Determine their roles in supporting and implementing primary health care activities

2. Content

- 2.1 Social, public health and rural development policies and plans
- 2.2 Primary health care concepts and principles
- 2.3 Primary health care management
- 2.4 Primary health care elements and supporting strategies
- 2.5 Community participation
- 2.6 Inter-organization coordination
- 2.7 Role of participants in primary health care management
- 2.8 Field training

3. Participants

There are 30 participants in each training program on "Primary Health

Care Development." The participants are categorized as follows:

- 3.1 Twenty administrators, technicians, and instructors from the Ministry of Public Health
- 3.2 Ten university instructors involving in primary health care activities

4. Course Organization

- 4.1 Exchange of experiences related to primary health care among participants
- 4.2 Lecture and discussion
- 4.3 Group working
- 4.4 Field practice

5. Duration

Two weeks in each training program

June 10-23, 1984

August 12-25, 1984

October 7-20, 1984

December 9-22, 1984

Training Programme

on

Role of Non-Governmental organization to Primary Health Care

1. Objectives

The course aims to enable the participants to:

- 1.1 Understand the concepts and strategies and to support primary health care
- 1.2 Determine their roles and guidelines for the non-governmental organizations to support primary health care development

2. Content

- 2.1 Social development policies and plans
- 2.2 Policy and plan for coordination of non-governmental and governmental organizations for country development
- 2.3 Primary health care concepts and principles
- 2.4 Primary health care administration and implementation
- 2.5 Community participation in developing primary health care activities
- 2.6 Role and guideline for implementation of non-governmental organization in supporting primary health care activities

3. Participants

There are 30 chiefs of non-governmental organizations

4. Course Organization

4.1 Exchange of experiences related to primary health care
among participants

4.2 Lecture and discussion

4.3 Group working

4.4 Field practice

5. Duration

I week

September 16-22, 1984

Training Programme

on

Achievement of Basic Minimum Needs of Rural Community through Primary Health care

1. Objectives

The course aims to enable the participants to:

- 1.1 Understand the concepts and strategies and to support primary health care
- 1.2 Determine their roles and guideline for provincial rural development coordination to support primary health care activities in four ministries concerned .

2. Content

- 2.1 Primary health care concepts, principles, and management
- 2.2 Social development policy
- 2.3 Primary Health Care Implementation through cooperatives system
- 2.4 Community preparation and community development participation
- 2.5 Inter-organization coordination
- 2.6 Guideline for coordination of primary health care to cooperatives activities .

3. Participants

This training program is divided into 4 courses

- 3.1 In the first training course, there are 30 participants consisting of provincial officers from four ministries concerned
- 3.2 The other 3 courses, there are 60 participants in each course consisting of provincial and district officers from ministries concerned .

4. Course Organization

4.1 Exchange of experiences related to primary health care among participants

4.2 Lecture and discussion

4.3 Field visit to familiarize the participants with community and to participate in community analysis and problem solving planning with the community

5. Duration

one week in each training program

September 2-8, 1984

November 18-24, 1984

January 6-12, 1985

February 10-16, 1985

National Training
on
Primary Health Care Development

1. Objective

The course aims to enable the participants to exchange experiences and policies of the in-country primary health care.

2. Content

2.1 Report from the participants on the primary health care implementation outcomes

2.2 Lecture

2.3 Recommendation and view in respect to policy and guideline of primary health care implementation

3. Participants

There are 60 participants.

3.1 Administrators and primary health care implementators at the central level

4. Course Organization

4.1 Report from the participants on experience in primary health care implementation

4.2 Lecture

4.3 Group discussion

5. Duration

5 days

January 27-31, 1985

Training Program Expenditures 1984

1. Daily allowance for trainees	1,548,000
2. Travelling expense for trainees	510,000
3. Daily allowance for trainers	486,000
4. Travelling expense for field study	270,677
5. Special instructor fee	101,250
6. Teaching material	
6.1 Translation	180,000
6.2 Preparation, printing or purchasing of text books	345,000
7. Training material	133,260
8. Evaluation and report making	333,000
	<hr/>
Total	<u>3,907,187</u>

Training Program

on

Primary Health Care Development (4)

(June 10-23,1984, August 12-25,1984, October 7-20,1984, December 9-22,1984)

-
1. Daily allowance for trainees 168,000
 $30^P \times 14^d \times 400^B = 168,000$
 2. Travelling expense for trainees 36,000
 $30^P \times 2^{times} \times 600^B = 36,000$
 remarks: 1,200^B for two ways from Bangkok to Khon Kaen province by train
 3. Daily allowance for trainers 47,600
 - 3.1 allowance for preparation of field study
 $2^P \times 7^d \times 400^B = 5,600$
 - 3.2 allowance for field study $15^P \times 7^d \times 400^B = 42,000$
 4. Travelling expense for field study at Pitsanurloork province 26,417
 - 4.1 Gasoline $11.7^{B/1} \times 500^{Km} / Km \times 2^{times} \times 3^{Cars} = 7,020$
 - 4.2 Gasoline $11.7^{B/1} \times 130^{Km} / Km \times 5^{groups(cars)} \times 7^d = 10,647$
 - 4.3 Allowance for drivers $5^{Km} \times 5^P \times 7^d \times 250^B = 8,750$
 5. Special instructor fee 11,250
 $25^P \times 1.5^H \times 300^B = 11,250$
 6. Teaching material (1st) 65,000
 - 6.1 Translation into English (2nd, 3rd, 4th) 50,000
 $200^{Page} \times 100^{B/Page} \times 1^{text book} = 20,000$
 - 6.2 Preparation, printing material of text book
 $300^{Copy} \times 50^{B/copy} \times 3^{kind} = 45,000$ (for 1st course)
 $300^{Copy} \times 50^{B/copy} \times 2^{kind} = 30,000$ (for 2nd, 3rd, 4th course)

7. Training material (30^P x 350^{B/P}) 10,500
- 7.1 transparency 15 sheets/Person x 6^B = 90
 - 7.2 File 15^B x 4 kinds
 - 7.3 Background Paper 4 kinds x 50^B = 200
8. Evaluation and Report making 35,000
- 8.1 to organize the evaluation meeting
 - 8^P x 2 times x 500^B = 8,000
 - 8.2 report making
 - Evaluation report on training program
250 Copy x 1 Program x 50^{B/copy} =12,500
 - Report making on training Program itself
300 Copy x 1 Program x 50^{B/copy} =19,000

Total 1st course = 399,767
2nd course = 384,767
3rd course = 384,767
4th course = 384,767

Training Program
on
Cooperative and Primary Health Care Development
(July 15-21, 1984)

1.	Daily allowance for trainees	84,000
	$30^P \times 7^d \times 400^B = 84,000$	
2.	Travelling expense for trainees	24,000
	$30^P \times 2 \text{ times} \times 400^B = 24,000$	
	remarks: 800 B for two ways from Bangkok to Lopburi by train	
3.	Daily allowance for trainers	6,000
	$15^P \times 1^d \times 400^B = 6,000$	
4.	Travelling expense for field study	6,116
	4.1 Gasoline $11.7^{\text{B}/1} \times 600^{\text{Km}}/5 \text{ Km} \times 2 \text{ times} \times 2 \text{ cars} = 5,616$	
	4.2 Daily allowance for drivers $2^P \times 1^d \times 250^B = 500$	
5.	Special instructor fee	9,000
	$20^P \times 1.5^H. \times 300^B = 9,000$	
6.	Teaching material	45,000
	6.1 Translation into English 150 Page x 1 text book x $100^{\text{B}/\text{Page}} = 15,000$	
	6.2 Preparation, printing material of text book	
	300 Copy x 50 B/copy x 2 kinds = 30,000	
7.	Training material ($30^P \times 249^B$)	7,470
	7.1 Transparency 9 Sheets/Person x 6B = 54	
	7.2 File 3 kinds x 15B = 45	
	7.3 Background Paper 3 x 50B = 150	

8.	Evaluation and report making	25,000
8.1	Evaluation report on Training Program	
	200 Copy x 1 Program x 50 ₪/copy =	10,000
8.2	Report making on training Program itself	
	300 Copy x 1 Program x 50 ₪/copy =	15,000

Total 206,586

Training Program

on

Role fo Non-Governmental Organization to Primary Health Care

(September 16-22,1984)

1.	Daily allowance for trainees	84,000
	$30^P \times 7^d \times 400^B = 84,000$	
2.	Travelling expense for trainees	30,000
	$30^P \times 2 \text{ times} \times 500^B = 30,000$	
	remarks : 1,000 B for two ways from Bangkok to Nakornsithamarate Province by train	
3.	Daily allowance for trainers	12,000
	$15^P \times 2^d \times 400^B = 12,000$	
4.	Travelling expense for field studdy at Nakornsithamarate province	9,924
	4.1 Gasoline $11.7^B/1 \times 600^{Km} / 5Km \times 2\text{times} \times 3\text{car}$	
	$= 8,424$	
	4.2 Daily allowance for driver $3^P \times 2^d \times 250^B = 1,500$	
5.	Special instructor fee	11,250
	$25^P \times 1.5 \times 300^B = 11,250$	
6.	Teaching materual	45,000
	6.1 Translation into English 150Page x 100 B/page x 1 text book = 15,000	
	6.2 Preparation, printing material of text book 300Copy x 50 B/copy x 2 kinds = 30,000	

7.	Training material	(30 ^P x 350 ₪/P.)	10,500
7.1	transparency	15 sheets/Person x 6 [₪] = 90	
7.2	File	4 kinds x 15 [₪] = 60	
7.3	Background Paper	4 kinds x 50 [₪] = 200	
8.	Evaluation and report making		35,000
8.1	to organize the evaluation meeting		
		8 ^P x 2 times x 500 [₪] = 8,000	
8.2	report making		
	- Evaluation report on training program		
		250 Copy x 1 Person x 50 ₪/copy = 12,500	
	- Report making on training program itself		
		300 Copy x 1 Program x 50 ₪/copy = 15,000	

Total = 237,674

Training Program

on

Achievement of Basic Minimum Needs of Rural Community through
Primary Health Care (1st)

(September 2-8, 1984)

-
1. Daily allowance for trainees 84,000
 $30^P \times 7^d \times 400^B = 84,000$
 2. Travelling expense for trainees 36,000
 $30^P \times 2 \text{ times} \times 600^B = 36,000$
remarks : 1,200^B for two ways from Bangkok to Nakornsithamarat
province by train
 3. Daily allowance for trainers 61,600
 - 3.1 Allowance for field preparation
 $2^P \times 7^d \times 400^B = 5,600$
 - 3.2 Allowance for field study
 $20^P \times 7^d \times 400^B = 56,000$
 4. Travelling expense for field study at Suratthani province 25,598
 - 4.1 Gasoline $11.7^{\text{B}/1} \times \frac{500^{\text{Km}}}{5^{\text{Km}}} \times 2 \text{ times} \times 3 \text{ cars}$
 $= 7,020$
 - 4.2 Gasoline $11.7^{\text{B}/1} \times \frac{120^{\text{Km}}}{5^{\text{Km}}} \times 5 \text{ group(cars)} \times 7^d$
 $= 9,828$
 - 4.3 Daily allowance for drivers
 $5^P \times 7^d \times 250^B = 8,750$
 5. Special instructor fee 6,750
 $15^P \times 1.5^H \times 300^B = 6,750$

6.	Teaching material	45,000
6.1	Translation into English	
	150 Page x 100 [₪] /Page x 1 text book = 15,000	
6.2	Preparation , printing material of text book	
	300 ^{Copy} x 50 ^{₪/copy} x 2 kinds = 30,000	
7.	Training material (249 [₪] x 30 ^P)	7,470
7.1	Transparenacy 6 [₪] x 9 sheets/Person = 54	
7.2	File 15 [₪] x 3 Kinds = 45	
7.3	Background Paper 50 [₪] x 3 = 150	
8.	Evaluation and report making	25,000
8.1	Evaluation report on Training Program	
	200 Copy x 1 Program x 50 ^{₪/copy} = 10,000	
8.2	Report making on training program itself	
	300 ^{Copy} x 1 Program x 50 ^{₪ / copy} = 15,000	

Total = 291,418

National Training

on

Primary Health Care Development

(Jan 27-31, 85)

1. Daily allowance for trainees	120,000
$60^p \times 5^d \times 400^{\text{฿}} = 120,000$	
2. Travelling expense for trainees	60,000
$60^p \times 2^{\text{times}} \times 500^{\text{฿}} = 60,000$	
remarks : 1,000 ฿ for two ways from Bangkok to Nakornsawan Province by train	
3. Daily allowance for trainers	6,000
$15^p \times 400^{\text{฿}} = 6,000$	
4. Travelling expense for field study	6,116
4.1 Gasoline $11.7^{\text{฿/l}} \times 600^{\text{km}} / 5^{\text{km}} \times 2^{\text{times}} \times 2^{\text{cars}} = 5,616$	
4.2 Daily allowance for drivers $2^p \times 1^d \times 250^{\text{฿}} = 500$	
5. Special instructor fee	9,000
$20^p \times 1.5^h \times 300^{\text{฿}} = 9,000$	
6. Teaching material	45,000
6.1 Translation into English $150^{\text{page}} \times 100^{\text{฿/page}} \times 1^{\text{text-book}} = 15,000$	
6.2 Preparation, printing material of text book $300^{\text{copy}} \times 50^{\text{฿/copy}} \times 2^{\text{kind}} = 30,000$	
7. Training material $350^{\text{฿/p}} \times 60^p$	21,000
7.1 Transparency $6^{\text{฿}} \times 15^{\text{sheet/person}} = 90$	
7.2 File $15^{\text{฿}} \times 4^{\text{kinds}} = 60$	
7.3 Background Paper $50^{\text{฿}} \times 4^{\text{kinds}} = 200$	
8. Evaluation and report making	25,000

8.1 Evaluation report on training program

$$200^{\text{copy}} \times 1^{\text{program}} \times 50^{\text{B/copy}} = 12,500$$

8.2 Report making on training program itself

$$300^{\text{copy}} \times 1^{\text{person}} \times 50^{\text{B/copy}} = 15,000$$

Total

287,116

Training Program

on

Achievement of Basic Minimum Needs of Rural Community through

Primary Health Care (2nd , 3rd , 4th)

(Nove 18 -24 , 1984 , Jan 6-12 ,1985 , Feb 10-16 ,1985)

1.	Daily allowance for trainees	168,000
	$60^P \times 7^d \times 400^B = 168,000$	
2.	Travelling expense for trainees	72,000
	$60^P \times 2 \text{ times} \times 600^B = 72,000$	
3.	Daily allowance for trainers	70,000
	$25^P \times 7^d \times 400^B = 70,000$	
4.	Travelling expense for field study	39,085
4.1	Gasoline $11.7^{\text{B/l}} \times 500^{\text{Km}} / 5^{\text{Km}} \times 2 \text{ times} \times 4 \text{ cars}$	
	$= 9,360$	
4.2	Gasoline $11.7^{\text{B/l}} \times 120^{\text{Km}} / 5^{\text{Km}} \times 8 \text{ groups (cars)} \times 7^d$	
	$= 15,724$	
4.3	Daily allowance for drivers	
	$8^P \times 7^d \times 250^B = 14,000$	
5.	Special instructor fee	6,750
	$15^P \times 1.5^H \times 300^B = 6,750$	
6.	Teaching material	45,000
6.1	Translation into English	
	$150^{\text{Page}} \times 100^{\text{B/page}} \times 1 \text{ text book} = 15,000$	
6.2	Preparation, printing material of text book	
	$300 \text{ Copy} \times 50^{\text{B/copy}} \times 2 \text{ kinds} = 30,000$	
7.	Training material ($249^B \times 60^P$)	14,940

7.1	Transparency	6	x	15	₱ sheet/person	=	90
7.2	File	15	x	4	₱ kind	=	60
7.3	Background Paper	50	x	4	₱ kind	=	200
8.	Evaluation and report making				(2 nd , 3 rd)		25,000
8.1	to organize the evaluation meeting						
		8 ^p	x	2 ^{times}	x	500 [₱]	= 8,000 (only the fourth one)
8.2	Evaluation report on Training Program						
		200 ^{copy}	x	1 ^{program}	x	50 ^{₱/copy}	= 10,000
8.3	Report on training program itself						
		300 ^{copy}	x	1 ^{program}	x	50 ^{₱/copy}	= 15,000
	Total				2 nd course	=	440,775
					3 rd course	=	440,775
					4 th course	=	448,775

Expenditure for Training program 1984

Training Course	ATC/PHC 15	ATC/PHC 16	ATC/PHC 17	ATC/PHC 18	ATC/PHC 19	ATC/PHC 20	ATC/PHC 21	ATC/PHC 22	ATC/PHC 23	ATC/PHC 24	ATC/PHC 25	Total
No. of Trainers	15	15	15	20	15	15	25	15	25	15	25	
No. of trainee	30	30	30	30	30	30	60	30	60	60	60	
No. days	14	7	14	7	7	14	7	14	7	5	7	
Date	June 10-23	July 16-21	Aug. 12-25, 84	Sept 2-8, 84	Sept 16-22,	Oct. 7-20, 84	Nov. 18-24, 84	Dec. 9-22, 84	Jan 6-12, 85	Jan 27-31, 85	Feb. 10-16, 85	
1. Daily allowance for trainees	168,000	84,000	168,000	84,000	84,000	168,000	168,000	168,000	168,000	120,000	168,000	1,548,000
2. Travelling expense for trainees	36,000	24,000	36,000	36,000	30,000	36,000	72,000	36,000	72,000	60,000	72,000	510,000
3. Daily allowance for trainers	47,600	6,000	47,600	61,600	12,000	47,600	70,000	47,600	70,000	6,000	70,000	496,000
4. Travelling expense for field study	26,417	6,116	26,417	25,598	9,924	26,417	39,085	26,417	39,085	6,116	39,085	270,677
5. Special instructor fee	11,250	9,000	11,250	6,750	11,250	11,250	6,750	11,250	6,750	9,000	6,750	101,250
6. Teaching material												
6.1 Translation	20,000	15,000	20,000	15,000	15,000	20,000	15,000	20,000	15,000	10,000	15,000	180,000
6.2 Preparation, printing or purchasing of text books.	45,000	30,000	30,000	30,000	30,000	30,000	30,000	30,000	30,000	30,000	30,000	345,000
7. Training material	10,500	7,470	10,500	7,470	10,500	10,500	14,940	10,500	14,940	21,000	14,940	133,260
8. Evaluation and report making.	35,000	25,000	35,000	25,000	35,000	35,000	25,000	35,000	25,000	25,000	33,300	333,000
Total	399,767	206,586	384,767	291,418	237,674	384,767	440,775	384,767	440,775	287,116	448,775	3,907,187

Training Program, 1984

	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March.	REMARK
			6-29	15-21	12-25	2-8 16-22	7-20	18-24	9-22	27-31	10-16		
Training Program													
Courses Preparation													
1. Training Program on													
1.1 Cooperatives and Primary Health Care Development (1)													
1.2 Role of Non-Governmental Organization to Primary Health Care (1)													
2. Training Program on													
2.1 Primary Health Care Development (4)													
2.2 Achievement of Basic Minimum Needs of Rural Community through Primary Health Care (4)													
3. National Training on Primary Health Care Development (1)													

Work plan and schedule for documentation & information

ATC/PHC

1984 - 1987

Activities	1984				1985				1986				1987				
	1	2	3	4													
1. Document collection and filing																	
system management																	
Field Study																	
2. Workshop on PHC development																	
3. Dev. of data collection tools																	
indicators (45 persons 7 days)																	
4. Workshop on PHC data collection																	
3. Developments of data collection tools																	
4. Data collection, analysis, compilation, and documentation																	
5. Dissemination (not by priority)																	
(2) - Newsletters																	
(5) - Journal																	
(3) - Program Instruction Development																	
(4) - Display and Exhibition																	
(1) - Annual reports																	

Activities:	Data Collection System								
	Document Collection	Field Study 2 persons 30 days	Dev. of Collection Tools (6 persons 5 days 4 times)	Workshop (60 persons 3 days)	Data Collection	Determination			
					Annual Report	Newsletters	Victor Program	Display Exhibition	Journals
Budget Item									
Bibliography	—	14,000	48,000	36,000			22,500		
Travel Allowance	—	9,600	28,500	36,000			8,000		
Special - publication fees	—	—	—	4,000			2,000		3,000
Renovations									
Inv./Editors consultations	—	—	(4 persons, 2 months) 10,000	—	(4 persons, 6 months) 72,000				
Printing materials and other	50,000	—	10,000	35,000	20,000	25,000	23,000	8,000	25,000
Other materials	—	—	—	4,000	—	10,000	2,000	3,000	4,000
<u>Total</u>	50,000	23,600	48,500	120,000	92,000	35,000	25,000	11,000	30,000

(4) Plan for Documentation and Information

ATC/PHC

1984 - 1987

Purpose

To develop information education and communication programs of PHC development to trainers, Trainees, researchers and PHC workers of both in country and ASEAN Target groups.

Strategy

1. Library
2. PHC data collection, analysis, compilation and documentation
3. Dissimination PHC information through a number of approaches i.e. journal, newsletters, program instruction, periodio display and exhibition, etc.

Work plan and schedule for 1984 - 1987 (see appendix 1)

Budget required for 1984 - 1987 (see appendix 2)

For library 50,000 Bahts

For PHC data collection, analysis, compilation and
documentation 34,440.00 Bahts
~~350,000~~

For dissemination PHC information 11,000.00 Bahts
~~101,500~~

Total 50,440.00 Bahts
~~512,000~~

JICA