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<td><strong>Author(s)</strong></td>
<td>Somjit Supannatas.</td>
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Effectiveness Of Health Education Approach
In Primary Health Care Through Village Public Address
And Self-Taught Manual

By

Somjit Supannatas
The Effectiveness of Health Education Approach in Primary Health Care Through Village Public Address and Self-taught Manual

Abstract

The main objective of this research was to study the effectiveness of health education approach in primary health care through public address system and self-taught manual.

Sample was the three villages of Nonthaburi province. They were selected and assigned for different health education approach. The head of the family of these three villages was the sample of this study. The total number of the sample were 70, 74, and 67 people of the first, the second and the third village respectively.

The contents of the primary health care were in the areas of safe drinking water, garbage disposal, and proper use of sanitary latrine. The message was recorded in a tape cassette in a form of dialogue and music.

The self-taught manual was designed in the form of cartoon with a short wordings. The contents of the message in the tape casette and in the self-taught manual were divided into 7 parts. The first village was listened to the public address system in the evening. The design of delivery the massage was as follows:

Supannatas, S; Lekhomporn, T; Sudsook, U; Chanthamolee, S; Singhakajen V.
Day 1
Broadcasted Part 1 Handed out Manual part 1

Day 3
Broadcasted Part 2 Handed out Manual part 2 no treatment

Day 5
Broadcasted Part 3 Handed out Manual part 3

Day 7
Broadcasted Part 4 Handed out Manual part 4

Day 9
Broadcasted Part 5 Handed out Manual part 5

Day 11
Broadcasted Part 6 Handed out Manual part 6

Day 13
Broadcasted Part 7 Handed out Manual part 7

Village 1

Village 2

Village 3
The interview schedule was designed as a tool for data collection. The data on knowledge and opinions regarding the primary health care had been collected on day one (prior to the treatment) and on day fourteen (after the end of the treatment). Two months later, data on practice of primary health care were collected.

The main results were as follows:

1. People of the first village gained more knowledge in primary health care than people of the second village. The difference was statistical significant (p < .001).

2. Opinions regarding the primary health care of the people of the first village were more positive than the people of the second village. The difference was statistical significant (p < .001).

3. Opinions regarding the primary health care of the people of the second village, after the trial, were not different from prior to the trial.

4. After the trial, practices in primary health care of the people of the first and second village were better than prior to the trial. The changing of practices was statistical significant difference (p < .001).

5. Comparing the people's practices in primary health care between the first village and the second village, it was found that the former village was better than the later one. The difference was statistical significant (p < .001).

6. The practices in primary health care of the people of the control village, did not change differently during the period of eight weeks.