

## CHAPTER VI

### ANNOTATED BIBLIOGRAPHY

Karen G., Frances M. L., Barbara K. R., (1997), **Health Behavior and Health Education: Theory, Research, and Practice, Second Edition**, Jossey-Bass Publisher, San Francisco.

This book is organized into six parts. The most frequent in references are in Part Two and Part Four. Part Two focuses on theories of individual health behavior, variable *within individuals* that influence their health behavior and responses to health promotion and education interventions. Part Four covers models for the community or aggregate level of change, and the chapter covers community organization, adoption and diffusion of innovations, organizational change and communication.

WHO (1999), **School Health Insurance as a Vehicle for Health-Promoting Schools**, WHO Switzerland.

The third article of the book presents the development of School Health Insurance in Vietnam from the initial steps to the Inter-ministerial Circular on guideline of health insurance for schoolchildren. The preparation of the Circular and selected components of the Circular are also mentioned in detail. Article 4 is SHI implementation in Ho Chi Minh City with its funds for school health improvement and the survey on schoolchildren's health that has done in Ho Chi Minh City.

WHO (1993), **The Development of National Health Insurance in Vietnam**, 'Macroeconomics, Health and Development' Series Number 23. World Health Organization, Geneva, October 1993.

Article 3 presented Health Insurance Development in Vietnam from 1992 – 1996, included the target population of the scheme, the development of VHI between 1992-1996, health insurance benefits, use of health insurance revenues, the further efforts to extend membership and future locus of responsibility. The fifth Article focuses on 'Framework for Future Development of Health Insurance in Vietnam'.

Le Ngoc Trong (2000), **Strengthening socialization in the course of protection and taking care of the health of the people via health insurance and efficient implementation of school health insurance**, the speech at 'SHI 5 Year Implementation Meeting' held in Hanoi on 30<sup>th</sup> August 2000, VHI Journal No.35 / 2000.

In His Excellency's speech, Prof. Dr. Le Ngoc Trong, Vice Minister of Health, has highly appreciated the success that VHI obtained in the last 5 years of SHI implementation. He also mentioned the challenges that VHI is facing and some important orientations for expanding SHI coverage in future. He especially emphasized the necessity to further strengthen socialization in the course of protection and taking care for the health of the people via health insurance and efficient implementation of school health insurance especially. First, it is the responsibility of all authorities at different levels from central down to local. And the participation of

all public sectors as well as social organizations is needed. Second, in coming times, it is necessary to put more investment in IEC activities to encourage active SCP participation in the scheme.

VHI (2000), **The Report at “SHI 5 Year Implementation Review Meeting”**, held in Hanoi, August 30<sup>th</sup>, 2000.

After briefly touching upon the process of establishing the VHI and SHI schemes, the report presented the results of SHI implementation in the last 5 years, the contribution of SHI for primary health care activities at schools, and described the difficulties and challenges that VHI is facing. The report put forward the main principles and solutions for expanding the SHI scheme in the coming year for participants' discussion and consideration.

Duong Dinh Thien (2000), **Cross Sectional Study**, *Epidemiology and Applied Statistics in Scientific Research*, Hanoi Medical University

In this chapter the writer describes the cross-sectional study, sample size and sampling techniques, data analysis and finding interpretation.

Thomas D. C., Donald T.C., **Quasi-Experimentation: Design & Analysis Issues for Field Settings**, Houghton Mifflin Company, U.S.A.

In Chapter 3: Quasi-Experiments: Nonequivalent Control Group Designs, after described three the following designs frequently used in social science research, but which often do not permit reasonable causal inferences: the One-Group Posttest-Only Design, the Posttest-Only Design with Nonequivalent Groups and One-Group Pretest-Posttest Design. In the main part of this chapter, the writer focuses on some generally interpretable nonequivalent control group designs.