

**PARTICIPATORY LEARNING: A STRATEGY FOR IMPROVING
KNOWLEDGE, ATTITUDE AND PRACTICE ON
SEXUAL TRANSMITTED DISEASES IN WOMEN AND THEIR SPOUSES
IN THE FAMILY PLANNING CLINIC, PHUWIANG HOSPITAL, THAILAND**



Mrs. Suchada Sriputtha

**A Thesis Submitted in Partial Fulfillment of the Requirements
for the Degree of Master of Public Health in Health Systems Development**

College of Public Health

Chulalongkorn University

Academic Year 2002

ISBN 974-9599-20-9

Copyright of Chulalongkorn University


Thesis Title : Participation Learning: A Strategy for Improving Knowledge Attitude and Practice on Sexual Transmitted Diseases in Women and Spouse in Family Planning Clinic of Phuwiang District

By : Suchada Sriputtha

Program : Master of Public Health (Health Systems Development)
College of Public Health

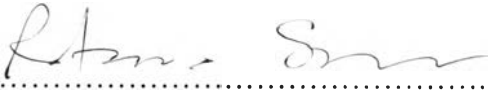
Thesis Advisor : Ratana Somrongthong, M.A.


Accepted by the College of Public Health, Chulalongkorn University, Bangkok
Thailand in Partial Fulfillment of requirements for the Master's Degree

....., Dean of the College of Public Health
(Samlee Plianbangchang, M.D., Dr.P.H.)

THESIS COMMITTEE

.....Chairperson
(Professor Emeritus Nikorn Dusitsin, M.D.)

.....Thesis Advisor
(Ratana Somrongthong, M.A.)

.....Member
(Professor Edgar J. Love, M.D., Ph.D.)


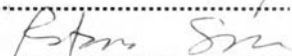
PH: 972094 : MAJOR HEALTH SYSTEMS DEVELOPMENT PROGRAMME
KEY WORD : PARTICIPATORY LEARNING, STDs, SPOUSES, FAMILY
PLANNING CLINIC.

SUCHADA SRIPUTTHA: PARTICIPATORY LEARNING: A STRATEGY
FOR IMPROVED KNOWLEDGE, ATTITUDE AND PRACTICE ON
SEXUALLY TRANSMITTED DISEASES IN WOMEN AND THEIR
SPOUSES IN THE FAMILY PLANNING CLINIC, PHUWIANG HOSPITAL,
THAILAND. THESIS ADVISOR: RATANA SOMRONGTHONG, M.A.,
67pp. ISBN 974-9599-20-9

This study aimed to assess whether the participatory learning technique could be used to improve the knowledge, attitude, and practice of sexually transmitted diseases (STDs). Fifty women who tested positive by pap smear for vaginal fungus and Trichomonas, together with their husbands, volunteered as study subjects. The average age of the females was 32.6 years, and 37.5 years for males. The majority of the subjects (67%) had elementary level education; 70% were married, and 19% were married but occasionally lived apart. The two most common occupations were in agriculture (45%) and labor (25%). The average annual income per household was 6,745 Baht. Sixty-one percent (61%) of the subjects reported having some knowledge about STDs, but that was mostly related to HIV/AIDS. The most common source of knowledge was television programs (21%). The volunteered couples were enrolled into the participatory educational program from May to September 2002.

Pre- and post-test scores revealed significantly improved knowledge and attitude about STDs, at $p = 0.01$ for both categories. The results also showed that women in the study had increased levels of self-awareness about their illness, while their husbands became more aware of their wives' illness. Both spouses reported that they had changed their STD-preventive behavior. The women felt that they were able to discuss safe sex, or various issues related to sexual intercourse and its associated risks, and that they were able to request that their husbands use condoms.

The results of this study indicated that participatory learning should be utilized with other groups, such as adolescents and housewives. Adolescents could learn how to practice safe sex and other life skills, while housewives could acquire knowledge of STDs and how to negotiate safer sex with their husbands.

Field of study Health Systems Development Student's signature 
Academic year 2002 Advisor's signature 

ACKNOWLEDGEMENTS

My utmost gratitude goes to the following individuals, without whose kindness this thesis could not have been completed.

To Ajarn Ratana Somrongthong and Dr. Pimpawan Boonmongkon for their valuable guidance, advice, and kind support through out the study, especially for proof-reading of the manuscript.

To all academic staff at the College of Public Health for providing me the necessary foundations for this research.

To Professor Edgar J. Love for participating as an External Examiner.

Dr. Chutima Charurnsinsup and Khun Grittya for their assistance in instrument testing and valuable comments on how to improve it.

To Dr. Tuen Saibuathong, the Director of Phuwiang Hospital, Khun Prayon Sriputth, the Public Health Officer of Phuwiang District, Khun Santana Saibuathong, Khun Prapain Khimkan, R.N. and the members of the Health Promotion Team for their assistance in data collection, and for serving as facilitators for group learning.

To the counseling team members of the health centers involved in this project, for their kind co-operation during the sampling process.

TABLE OF CONTENTS

	Page
ABSTRACT.....	iii
ACKNOWLEDGEMENTS	iv
TABLE OF CONTENTS	v
LIST OF TABLES	vii
LIST OF FIGURE	viii
CHAPTER I: INTRODUCTION.....	1
Scope of the Study.....	7
Assumptions.....	7
Expected Benefits/Outcomes of Study	7
Definition of Terms.....	7
CHAPTER II: PROJECT DESCRIPTION	9
CHAPTER III: PROJECT EVALUATION.....	18
3.1 Introduction.....	18
3.2 Purpose.....	18
3.3 Question for Evaluation.....	18
3.4 Evaluation Design.....	18
3.5 Population and Sample.....	19
3.6 Instrument.....	20

3.7	Data Collection Methods.....	23
3.8	Data Analysis.....	23
3.9	Results.....	25
CHAPTER IV: CONCLUSIONS AND DISCUSSION.....		35
4.1	Conclusions.....	35
4.2	Discussion.....	36
CHAPTER V: RECOMMENDATIONS.....		39
1.	Policy Recommendations.....	39
2.	General Recommendations.....	39
3.	Recommendations for further studies.....	40
REFERENCES.....		41
APPENDICES.....		45
CURRICULUM VITAE.....		67

LIST OF TABLES

	Page
Table 1 : Prevalence of STDs (1997-2001).....	2
Table 2 : Leading Causes of Female Genito-vaginal Infections (1997-2001).....	2
Table 3 : Cases with Abnormal Conditions of the Reproductive System and STDs who received Counseling Services at the Family Planning Clinic, Phuwiang Hospital (2000-2001).....	5
Table 4 : Action Plan with Timetable.....	16
Table 5 : Timetable for data collection.....	24
Table 6 : Demographic Characteristics of the Samples (N and %)......	26
Table 7 : Level of Knowledge about STDs before and after the training.....	27
Table 8 : Comparison of Means for Knowledge of STDs Before and After Training.....	28
Table 9 : Attitudes towards STDs before and after the training.....	29
Table 10 : Comparison of means of attitudes towards STDs before and the training.....	30
Table 11 : Numbers and percentages for awareness about STDs before and after the training.....	31
Table 12 : Numbers and percentages for risks of STDs before and after the training.....	32
Table 13 : Numbers and percentages for STDs practices before and after the training.....	33
Table 14 : Comparison of the STD awareness, risk and practices before and after the training.....	34

LIST OF FIGURE

	Page
Figure 1 : Conceptual Framework of Group Participatory Learning	14