

REFERENCES

- Blaine R., W., Sanders , J.R & Fitzpatrick , J.L. (1997). *Program Evaluation*. London : An imprint of Addison Wesley Longman, Inc.
- Bloom, B.S. (1956). *Taxonomy of Educational Objective Handbook I : Cognitive Domain*. New York : David Mc Kay.
- Boontham Kijpreedaborisuth. (1988). *Techniques of Data Collection Tools for Research*. Bangkok : Sri Anan.
- Boontham Kijpreedaborisuth. (1991). *Techniques of Data Collection Tools for Research, Revised Edition*. Bangkok : B&B Publishing.
- Champen Charnchai et al. (1999) *Evaluation of Family Health Leader Development Project of Trang Province, 1997-1998* (Unpublished Manuscript).
- Chawal Phaerattakul. (1983). *Techniques of Test Writings*. Bangkok Metropolis: Pitak Aksorn.
- Cronbach, L. J. (1970). *Essentials of Psychological Testing*. (3rd ed.) New York : Harper & Row Publishers.
- Good, C.V. (1973). *Dictionary of Education*. New York : Mcgraw Hill.
- Ktitsada Phongsamart. (2000). *Knowledge, Understanding, Attitudes and Participation of Soldiers toward the local government: Case Study of Soldiers in the camp of Thepsatri-Srisunthorn, Kapang Sub-district, Tungsong District, Nakhon Sri Thammarat Province*. Master's Thesis, Prince of Songkhla University.
- Meddick, H.D. (1963). *Decentralization and Development*. Bombay : Asia Publishing House.
- Ministry of Public Health. (1999). *Family Health Leader Development Project*. Nonthaburi : MOPH (Mimeographed Document).

Morris, L.L., & Gibbon, C.T.F. (1978). Evaluator's Handbook. (8th ed.) London : Sage Pub.

Nisa Chooto. (1988). Project Evaluation (2nd ed.), Bangkok Metropolis . Master Repress.

Nisa Chooto.(1995). Project Evaluation (4th ed.), Bangkok : PN Printing.

Office of the Permanent Secretary for Public Health, Bureau of Policy and Public Health Plan, (2000) Manual of Plan and Project Evaluation. Bangkok: Sam Charoen Panich.

Paungpetch Cherdchanpipat & Varunsiri Arayawong. (2000). Reports of Self Dependence Potential Evaluation of the Community. Fundamental Public Health Office. Office of the Permanent Secretary, Ministry of Public Health. Express Transportation Organization of Thailand Printing House.

Phannarai Pitakcharoen et al. (2001). Social Situation and Psychology Concerning with Self Heath Care Behavior of Family Health Leaders in Chachoengsao Province. Copied Document.

Phensri Pliankham. (2000). Fundamental Public Health. Ratjapat Petchaburi Institute. Thammarak Publishing.

Popham, W. J. (1975). Educational Evaluation. New Jersey : Prentice-Hall Inc.

Popham, W. J. (1993). Educational Evaluation. (3rd ed.) U.S.A.: A Division of Simon & Schuster, Inc.

Prapaphen Suwan. (1994). Health Status Evaluation, Scale Measurement Building and Questionnaires. Bangkok : Phappim Publishing.

Prapaphen Suwan. (1977). Attitudes: Evaluation of Changes and Hygenic Behaviors. Bangkok : Thai Wattana Panich Printing House.

Prawase Wasi. (1996). System Reform for Health. Second Edition. Bangkok : Institute of Public Health Analysis.

- Prawase Wasi. (2001). *Social Health to Peace*. Nonthaburi : Health System Reform Bureau and Institute of Public Health System Analysis.
- Rutman, L. (1977). *Planning and Evaluation Study* . In. L.Rutman (ed.) Evaluation Research Methods. California : Sage.
- Scriven, M. (1973). The methodology. In R.E.Stake (ed.) *Curriculum Evaluation*. Chicago : Rand Mc Nally.
- Somchit Suphannat. (1988). *Behaviors and Changes Unit 3*. Field of Health Education, Sukhothai Thammathirat University. 93-150.
- Somsong Rakphao & Sarongkot Duankhamsawat. (1997). *Procedure of Public Health Operation for Health Behavior Development*. Bangkok : Academic Welfare Project, Institute of Phraborom Ratchachanok. Office of the Permanent Secretary, Ministry of Public Health.
- Sopha Choopikulchai & Orathai Chuenmanut. (1973). *Social Psychology*. Bangkok : Kurusapha Printing House.
- Suchman, E.A. (1967). *Evaluation Research*. [U.S.A.] : Russell Sage.
- Theerasak Makkun et al. (1999). *Outcomes of Health Education Activities Including the Social Support from Village Public Health Volunteers Against Knowledge and Behaviors of Family Health Leaders in terms of the Prevention for Hemorrhagic Fever and Diarrhea of Trang Province*. Trang : Public Health Office of Trang Province, Institute of Public Health System Analysis.
- Training and Fundamental. (1999). *Public Health Development Center*, Khon Kaen : Northeastern Region.
- Vanida Virakul & Tawil Lerkchaiyaphum. (1999). *Study of Learning Development System and Knowledge Level of Self Health Care of Family Health Leaders in Northeastern Region*. Khon Kaen : Klung Nana Wittaya Printing House.

Vanida Virakul & Tawil Lerkchaiyaphum. (2001). Study of Learning Development System of Family Health Leaders in Northeastern Region. Khon Kaen : Klung Nana Wittaya Printing House.

Weiss, Carol H. (1972). Evaluation research : Methods of assessing program effectiveness. Englewood Cliffs, NJ : Prentice-Hall.

APPENDICES

APPENDIX 1

Questionnaire for Sub-district Public Health Officers

1.1 Input Evaluation of Family Health Leader Development Project

- (1) Public health officers at the public health center: Persons.
- (2) Public health officers responsible for the sanitation of the village:
Persons.
- (3) PHVs in the village: persons.
- (4) Family health leaders in the village:persons.
- (5) Who are the village personnels participating in Family Health Leader Project Development? What are their roles in this project?
- (6) Budget year / Budget sources / Quantity of budget for the operation of Family Health Leader Project Development
- (7) Who are the lecturers providing knowledge to family health leaders? How many?
- (8) Are there any documents supporting for the trainings? If so, what are the contents and sources of support?
- (9) What should be considered in terms of contents? How much are these contents precise or consistent with the problems in the community? Are these contents completely in accordance with the needs and necessity of the community?
- (10) Where are the places exploited for trainings? Who has made a decision of this selection?
- (11) When was the first time of training? In
- (12) In terms of administrative management in the project, how are the information acknowledgement or explanation from the district level? How much is the understanding and distinctness of the project?
- (13) In terms of administrative management in the project, how is the explanation about the project provided to the relevant public health persons of the public health center in the subjects of distinctness, understanding and operation planning? How is the administrative management provided from the public health center level to the community / village?

APPENDIX 2

Interview Form for Public Health Volunteers

2.1 Selection of Family Health Leaders

- (1) Who are responsible for the selection of family health leaders? How is the selection? What should be the qualifications considered for the family health leaders?
- (2) What are the methods of knowledge training – personal or group training? What are the reasons considered to select such a method? What are the methods of training, for instance, lecturing, demonstration, practice?
- (3) Are there any knowledge follow-ups, supervision and visits after the trainings by public health volunteers and public health officers – Yes / No? How many times per month? What are the issues of follow-ups? Are there any reports after the follow-ups? How?

7. Positions in the Village (Available for more than one answer)

- 1. Village Committee
- 2. Member of Sub-district Council
- 3. Public Health Volunteer
- 4. Female Volunteer Development Group
- 5. Others:
- 6. None

8. Sources of health care news and information (Available for more than one answer)

- 1. Discussions with Neighbors
- 2. Village News Tower
- 3. Public Health Officers
- 4. Public Health Volunteers
- 5. Headman / Village Committee / SAO.
- 6. Teachers
- 7. Documents / Brochures
- 8. Center of CCFPH.
- 9. Radio
- 10. Television
- 11. Newspapers
- 12. Others:

9. Quantity of family health leaderspersons.

10. Year of having worked as public health volunteer

Number

APPENDIX 3**Questionnaire for Family Health Leaders and Family Health Providers**

Subject: Evaluation of Family Health Leader Development Project, Na Khao Sia Sub-district, Na Yong District, Trang Province

Direction:

This research is aimed to evaluate the family health leader development project, Na Khao Sia Sub-district, Na Yong District, Trang Province. The outcomes of the research will be exploited to improve and develop the further potentiality of family health leaders.

The data of this research will be collected and exploited only in terms of academic benefits. Therefore, your answers did not have any impact on you.

Thank You

Mrs. Arunee Thunthanavittaya

A student in Master of Public Health (M.P.H.)

Course : Health Systems Development

The College of Public Health, Chulalongkorn University

6. Average Income of Family:Baht / Month
7. Quantity of Family Members:persons
8. Quantity of Alive Children:persons
9. Positions in the Village (Available for more than one answer)
 - () 1. Village Committee
 - () 2. Member of Sub-district Council
 - () 3. Public Health Volunteer
 - () 4. Female Volunteer Development Group
 - () 5. Others:
 - () 6. None
10. Knowledge training according to the family health leader development project
 - () 1. Being trained in
 - () 2. Not being trained
11. Sources of health care news and information (Available for more than one answer)
 - () 1. Discussions with Neighbors
 - () 2. Village News Tower
 - () 3. Public Health Officers
 - () 4. Public Health Volunteers
 - () 5. Headman / Village Committee / SAO.
 - () 6. Teachers
 - () 7. Documents / Brochures
 - () 8. Center of CCFPH.
 - () 9. Radio
 - () 10. Television
 - () 11. Newspapers
 - () 12. Others:
12. In the previous year, how many times have you been acknowledged in terms of health care news / information?: per year

13. In the previous year, have your family members been infected of these following diseases? (Available for more than one answer)

- 1. Hemorrhagic Fever
- 2. Diarrhea
- 3. AIDS
- 4. Diabetes
- 5. Hypertension
- 6. Cold / Flu

14. In the previous year, have your family members have received these following services? (Available for more than one answer)

- 1. Family Planning (Birth Control)
- 2. Immunity Providing
- 3. Pre-Natal Care for Mothers
- 4. Weighing and Nutrition Care for Newborn to 5-year-old Children
- 5. Reception of Fundamental Public Health Services at the Public Health Center Exploiting 30-Baht Card

3.2 Knowledge Test of Health Care for Personal and Family Levels

Instruction : Please mark ✓ in the Bracket () in front of the appropriate answer in each question or write down in the blank answer.

Your child is four years old. One day, he / she was stupefied and does not play or run as usual. In addition, his / her face is red and always asks for drinking water. His / Her lip was very dry complaining that he / she feels hot and cold. When you touch his / her forehead, it's very hot. Your child has had this symptom for a day.

1. How should you take care of your child?
 - () 1. Wipe his / her body with water continuously to reduce a fever. If you have a thermometer, you will measure his / her temperature so that you will know how high the fever is.
 - () 2. Give your child a medicine immediately to reduce a fever.
 - () 3. Allow your child to wrap his/her body with thick clothes so that he / she will not feel cold.
 - () 4. Bring your child to see a doctor promptly.

2. To reduce your child's fever, which methods are **Wrong**?
 - () 1. Give him / her as much as water frequently according to the request
 - () 2. Wipe the body with water until the body was colder
 - () 3. Give him / her soft food like boiled rice or fruit juice to fresh up the body
 - () 4. Give him / her a children medicine to reduce a fever after measuring with a thermometer finding that the fever is higher than 39° C

3. When should you observe when your family member has a fever?
 - () 1. If such person catches a cold, coughs, has a sore throat or pants
 - () 2. If such person has rash, pimples or patches on the skin and body
 - () 3. If such person has a swollen chin or throat
 - () 4. All items must be observed

Uncle Mee is 63 years old and does a rubber gardening. Two weeks ago, he had a terrible headache and vomited several times. Additionally, he could not eat anything but he gained 2 kilograms. He felt exhausted and dizzy especially when he changed his poses of sleeping to sitting or standing ones because his eyes would be dimmer. Then, Uncle Mee went to the Center of CCFPH and let a PHV measure his pressure. It was found that his blood pressure was 180/110 milliliter and Uncle Mee had a hypertension.

4. If you were his family member, what should you take care of him?
 1. Suggest Uncle Mee or bring him to the public health center immediately in order to be examined and cured correctly and rapidly.
 2. Suggest Uncle Mee to stop eating all food.
 3. Just leave and neglect him because there' s no need to cure an old man
 4. For Uncle Mee's content, take him to a temple so that his mind will be peaceful.

5. Which intervened symptoms do you like to give a suggestion to Uncle Mee in order to prevent himself from a danger?
 1. Heart Attack
 2. Renal Failure
 3. Broken Brain Blood Vessel
 4. Hepatitis

6. Which **is not** a suggestion for Uncle Mee and other hypertension patients?
 1. Stop eating salty and fatty food such as fried food or food with coconut cream
 2. Seeing frequently a doctor and have pressure measured
 3. After relieving from headache, stop taking medicines immediately without being acknowledged by a doctor
 4. Exercising such as walking and stop smoking and drinking alcohol

7. Who is most risky to have diabetes?
- 1. Anyone, who like eating sweets like golden threads (Foy Thong), golden sweetmeat in small porcelain cup (Thong Yip), Golden Ball (Thong Yod)
 - 2. A fat person, who does not exercise frequently and has parents having diabetes
 - 3. Anyone, who sells sweets
 - 4. Anyone, who eats two bowls of food
8. What are the symptoms of a person having diabetes?
- 1. Thirsty; drink water frequently; eat a lot but feel exhausted
 - 2. Frequently pee and there are ants swarming the urine
 - 3. Have a chronic wound, which is hard to be cured; feel numb at hands and feet
 - 4. All items are correct
9. What are the suggestions to diabetes patients?
- 1. Take care of a patient and encourage him/her to be examined, take medicines or receive an injection as appointed or on time.
 - 2. A diabetes patient should frequently exercise.
 - 3. Control of the food containing carbohydrate, sugar and fat; increase the food containing vegetables and fruits having less sugar
 - 4. All items are correct
10. If you doubt whether you are having diabetes, what should you do?
- 1. Go to the public health or CCFPH and have the urine tested
 - 2. Leave the urine and observe if there are any ants swarming
 - 3. Stop eating all sweets
 - 4. Do nothing because this disease is incurable
11. What are the symptoms of a person having diarrhea?
- 1. Have a twisted stomachache; excrete in a tiny amount
 - 2. Excrete fluidly and vomit sometimes
 - 3. Have symptoms of water shortage such as dry lips and skin or thirsty
 - 4. All items are correct

12. What are the causes of diarrhea?
- 1. Changing poses of children, for instance, from sitting to walking etc.
 - 2. Food and water containing diseases brought by flies
 - 3. Changing of seasons and hot weather
 - 4. Drinking too much water
13. What should be done to help a patient suffering from diarrhea?
- 1. Give him/her a medicine immediately so that the excretion is stopped
 - 2. Give him/her a drink of saline solution of Government Pharmaceutical Organization or home-made mixed saline solution
 - 3. Keep looking and wait until the excretion is automatically stopped
 - 4. Give him/her dry food; stop drinking water or soup so that the excretion is stopped rapidly
14. When should you bring a diarrhea patient to the public health center or the hospital?
- 1. When a patient has a high fever continuously all day (the temperature is over 39' C)
 - 2. When a patient cannot drink any water showing the symptoms of water shortage such as dry lips, withered skin and hollowed eyes
 - 3. When a patient excretes a lot; the shit is watery white with stinking smell
 - 4. All items are correct
15. How can you prevent yourself from diarrhea?
- 1. Wash your hands before having ready food bought from a market
 - 2. Have only cooked food without flies swarming
 - 3. Stop having food together with a diarrhea patient
 - 4. All items are false
16. Which item is wrong?
- 1. AIDS is derived from HIV
 - 2. Blemish tongue is a symptom of AIDS
 - 3. An AIDS mother can transfer AIDS to a baby during pregnancy
 - 4. Common house mosquitoes can be an intermediate host of AIDS

17. If anyone in your family or your neighbor is infected by AIDS, what would you do to take care of him/her?
- 1. Separate a patient and do not allow him/her to talk or contact with other persons
 - 2. Treat or talk to him/her as usual and give a patient a willpower
 - 3. Bring a patient to be cured at a hospital as soon as possible
 - 4. Do nothing because AIDS is not infected easily
18. What are the actual causes of a cold?
- 1. Have a chronic fever
 - 2. When a body is weak, it can be infected by virus
 - 3. Do not rest sufficiently
 - 4. The weather changed frequently
19. Which item **is not the symptom of a cold?**
- 1. A cold is a serious infectious disease, which can bring to death
 - 2. A cold is usually infected in a rainy season or winter
 - 3. A cold can be automatically cured within a week if there is no intervened symptoms
 - 4. Some symptoms of a cold are clear catarrh, nose congestion, sneezing and hot body
20. What should be done in order to take care of a patient catching a cold at the first stage?
- 1. Buy and give a patient an anti-inflammatory medicine so that the patient will be rapidly cured
 - 2. Keep a body warm; drink a lot of water to let off the heat and reduce a fever
 - 3. Work as usual because a cold is derived from virus, thus it cannot be cured
 - 4. Separate a patient; do not use anything together or contact with the patient

21. What is the intermediate host of Hemorrhagic Fever?
- 1. Anopheles
 - 2. Culex
 - 3. Bothering Mosquito
 - 4. Black Mosquito
22. What are the main symptom of Hemorrhagic Fever?
- 1. Have a sudden fever continuing for 2-7 days
 - 2. There are rashes or blood spots on skin / black feces
 - 3. The liver is swollen and gets hurt when pressing it (near the right rib)
 - 4. All items are correct
23. What should be done in order to take care of a patient suffering from Hemorrhagic Fever?
- 1. Do not give any medicines to reduce a fever because the fever is just little/low
 - 2. Allow a patient to drink a lot of water in order to compensate with lost water and mineral
 - 3. Observe the dangerous symptoms, namely, the blood oozing from parts of body or patches
 - 4. All items are correct
24. Which one is the method to prevent from Hemorrhagic Fever?
- 1. Hang a mosquito curtain, especially when taking a nap in the afternoon
 - 2. Cover all jars with lids properly
 - 3. Eliminate and control the origins of Culex
 - 4. All items are correct
25. Which vaccines are necessary to be injected for the newborn to 1-year-old children?
- 1. Vaccines for the prevention of tuberculosis, diphtheria, whooping cough, tetanus, poliomyelitis, measles and hepatitis
 - 2. Vaccines for the prevention of tuberculosis, diphtheria, whooping cough, tetanus, poliomyelitis and inflamed brain fever

- () 3. Vaccines for the prevention of tuberculosis, diphtheria, whooping cough, tetanus and poliomyelitis
- () 4. All items are correct
26. What should a pregnant woman do?
- () 1. Put under a doctor's prenatal care as soon as she realizes about the pregnancy and see a doctor for prenatal care at least four times
- () 2. Have only nutritious meals and have some proper exercising
- () 3. Be injected vaccines against tetanus at least 2 times
- () 4. All items are correct
27. What should be done to observe the food deficiency of children, especially for newborn to 5-year-old children?
- () 1. Newborn to 4-month-baby must be fed by mother's breast
- () 2. Children must be weighed every month and compare the results with the standard stated in Mother and Children Manual
- () 3. When being sick, give a medicine to a baby immediately in order to prevent him/her from a chronic disease
- () 4. Only items 1 and 2 are correct
28. What should be considered in food buying?
- () 1. Color or chemicals should not be added in food
- () 2. There should be no fungus in dry food
- () 3. Cans and containers must be covered orderly; there should be labels informing about the registration of Aor. Yor., manufacturer, date of manufacturing and expiry date
- () 4. All items are correct
29. What is the danger from a set medicine?
- () 1. A medicine is not consistent with a disease
- () 2. A medicine is taken in a body in a too much amount
- () 3. A price is high
- () 4. Only items 1 and 2 are correct

30. Which one is true about family planning?
- 1. Birth control can help about the desirable quantity of pregnant periods and children
 - 2. Services of birth control include taking pills, injecting, burying pills, using condoms and male/female sterilization
 - 3. Practice of women after marriage
 - 4. Only items 1 and 2 are correct
31. Which birth control method is used after having sufficient children?
- 1. Male/female sterilization
 - 2. Taking birth control pills, injecting or burying pills
 - 3. Using condoms
 - 4. Only items 1 and 2 are correct
32. What is the importance and necessity of 30-Baht Health Insurance Card?
- 1. Can use this right for nursing and pay only 30 Baht for a fee
 - 2. It is the policy of government that every person should have a health insurance
 - 3. in case of serious sickness, the villagers can be treated at Na Yong Hospital and Trang Hospital
 - 4. All items are correct

3.3 Test of Disease Prevention and Health Care of Family Health Leaders in Personal and Family Levels

Instruction : Do a mark ✓ in a box, which you practice

Activity	Practice			Non-Practice
	Regular	Occasional	Seldom	
1. You exercise at least 3 days a week				
2. You take care of your health by having food with five groups of nutrition				
3. You eat sweets and pickled food				
4. When catching a cold, you take a sufficient rest and nutritious food				
5. When having a fever, you take a medicine and drink a lot of water				
6. You put Abate Sand in utilizing jars, ditches, cupboard's legs and vases				
7. You do not allow any water puddles both inside and outside your house				
8. You investigate the larvae of mosquitoes both inside and outside your house				
9. You always wash your hands cleanly before cooking or having meals				
10. You always wash your hands cleanly after using a toilet				
11. You drink clean or boiled water				
12. You warm the remaining food before taking it				
13. You wash fresh vegetables or fruits before eating them				
14. You eliminate garbage both inside and outside your house				
15. You excrete in a hygienic toilet				
16. You keep cleaning your house orderly				
17. Have you ever had a sexual intercourse with other person, who is not your husband or your wife? () No. () Yes. Did you use a condom?				

APPENDIX 4

Knowledge Interview of Family Health Leaders

4.1 Level of application knowledge according to the scope of training in terms of the disease prevention, importance and application to oneself and family for the following diseases:

- (1) **Cold:** Disease prevention, health care when there is a sickness and the communication prevention of disease to family members; steps of health care; knowledge transfer/advice to family members
- (2) **Hemorrhagic Fever:** Disease prevention such as explanation / advice / force / sample practice to family members; steps of health care; transfer / suggestion to family members
- (3) **Diarrhea:** Disease prevention such as washing hands before-after meals; having cupboards / lids to cover food; having bins and garbage elimination; health care when being sick and the communication prevention to other family members; steps of health care; transfer / suggestion to family members
- (4) **Diabetes:** Health promotion; knowledge transfer to family members; participation of health care when a family member is sick such as bringing him/her to be examined / get medicines as appointed; provide proper food for a family member having health problems
- (5) **Hypertension:** Health promotion; knowledge transfer to family members; participation of health care when a family member is sick such as bringing him/her to be examined / get medicines as appointed; provide proper food for a family member having health problems

APPENDIX 5

Interview Form for Family Health Leaders Having Sick Family Members

5.1 Primary Health Care When Being Sick in Personal and Family Levels

- (1) In terms of health care when the family members are suffering from a cold, hemorrhagic fever, diarrhea, diabetes and hypertension, which is the level of the health care of family health leaders?
- (2) How about the prevention for a cold, hemorrhagic fever and diarrhea?
- (3) Are there any suggestions and knowledge transfer for health care when family members are suffering from a cold, hemorrhagic fever and diarrhea? How?

5.2 Behaviors of Family Health Leaders and Family Health Providers of Families Having Health Problems in the Previous Six Months in the Following Issues:

- (1) How about the behaviors of primary health care when being infected by the diseases such as a cold, hemorrhagic fever, diarrhea, diabetes and hypertension?
- (2) How about the disease prevention behavior in terms of a cold, hemorrhagic fever and diarrhea?
- (3) How about the behavior of health care suggestions and knowledge providing in a family in terms of a cold, hemorrhagic fever and diarrhea?

APPENDIX 6

Behavioral Evaluation of Disease Prevention in Family

Part I: Prevention of Diarrhea

Activities / Quantity	Completed	Non-Completed
(1) Having and exploitation of bins		
(2) Garbage elimination		
(3) Washing hands cleanly with a soap after using a toilet (there is a soap in a toilet)		
(4) Drinking clean or boiled water		
(5) Eating raw food		
(6) Having and exploitation of hygienic toilets		
(7) Excretion in a toilet		

Part II: Prevention of Hemorrhagic Fever

Sources and Origins of Common House Mosquitoes	Practical Activities
Drinking Jars	<ul style="list-style-type: none"> - Quantity of Jars:.....pieces/Having mosquitoes:..... pieces - Covered with lids:.....pieces - Having been added with Abate Sand: pieces
Utilizing / General Jars	<ul style="list-style-type: none"> - Quantity of Jars:.... pieces /Having mosquitoes:.... pieces - Having been added with fish: pieces - Having been added with Abate Sand: pieces
Flower Vases	<ul style="list-style-type: none"> - Quantity of Jars:.... pieces/Having mosquitoes:.... pieces - Water changing or covering with cotton or soft paper on - Prevention from mosquitoes laying eggs:..... pieces
Flowerpot Saucers	<ul style="list-style-type: none"> - Quantity of Jars:.... pieces/Having mosquitoes: pieces - Having been added with Abate Sand: pieces - Prevention from mosquitoes laying eggs:..... pieces
Cupboard Saucers	<ul style="list-style-type: none"> - Quantity of Jars:..... pieces/Having mosquitoes:..... pieces - Having been added with powder detergent or a half teaspoon of salt: pieces - Having been added with Abate Sand: pieces
Used Tires	<ul style="list-style-type: none"> - Total Quantity:..... pieces / Having mosquitoes: pieces / Tires modified to utensils or to prevent from water puddles:..... pieces
Scraps of Tins / Coconut Shells	<ul style="list-style-type: none"> - Quantity of Jars:..... pieces / Having mosquitoes: pieces - Plastic bags available for water puddles-destroyed or buried:..... pieces

Part III: Fundamental Public Health Services.

Activities / Quantity	Number	Completed	Non-Completed
(1) Quantity of mature women			
(2) Mature women conducting birth-control			
(3) Quantity of pregnant women			
(4) Having been investigated their womb according the standard			
(5) Quantity of children aging below 5 years old			
(6) Having been vaccinated according to the standard			
(7) Having been weighed every 3 month			

Part IV: Health Insurance of Family (Quantity complete/non-complete)

Activities / Quantity	Number	Completed	Non-Completed
(1) Quantity of family			
(2) Health Insurance			

Part V: Health Condition of Family: In the previous year, did the family members be sick of these following diseases (Yes /No)

Activities / Quantity	Sick	Non-sick
(1) Cold		
(2) Hemorrhagic Fever		
(3) Diarrhea		
(4) Diabetes		
(5) Hypertension		
(6) AIDS		

APPENDIX 7

Reliability Test for Questionnaires

RELIABILITY ANALYSIS-SCALE (ALPHA)

Item-total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected if Item Total Correlation	Alpha if Item Deleted
V4201	19.5161	29.5247	0.7670	0.8311
V4202	19.9677	28.4989	0.3680	-0.8200
V4203	20.1290	30.1823	0.0000	0.8271
V4204	19.1613	30.4731	-0.1627	0.8302
V4205	19.4194	28.1183	0.3784	0.8198
V4206	19.6452	28.3699	0.2873	0.8233
V4207	19.5161	29.9247	0.0024	0.8338
V4208	19.4194	26.6516	0.6965	0.8080
V4209	19.3871	27.1118	0.6203	0.8113
V4210	19.3226	29.0925	0.2144	0.8251
V4211	19.5484	25.8559	0.7989	0.8027
V4212	19.1613	29.8065	0.1755	0.8256
V4213	19.1613	29.6731	0.2440	0.8247
V4214	19.5161	25.4581	0.8965	0.7988
V4215	19.4194	29.9183	0.0102	0.8326
V4216	19.5161	29.1247	0.1521	0.8283
V4217	19.2903	29.8129	0.0564	0.8294
V4218	19.8387	28.0065	0.0420	0.8189
V4219	19.3548	28.5699	0.3152	0.8220
V4220	19.3226	29.7591	0.0599	0.8298
V4221	19.1935	29.8946	0.0827	0.8273
V4222	19.6129	25.7785	0.8038	0.8022
V4223	19.6452	32.5032	-0.4452	0.8500
V4224	19.4194	26.4516	0.7413	0.8063
V4225	19.9355	31.7290	-0.3774	0.8424
V4226	19.4194	26.8516	0.6521	0.8097
V4227	19.5484	26.2559	0.7150	0.8062
V4228	19.4194	26.6516	0.6965	0.8080
V4229	19.4839	26.9247	0.5986	0.8112
V4230	19.5806	26.7183	0.6135	0.8103
V4231	19.6774	31.5591	-0.2872	0.8445
V4232	19.4516	26.2559	0.7600	0.8052

Reliability Coefficients

N of Cases = 30.0 N of Items = 32 Alpha = .8262

RELIABILITY ANALYSIS-SCALE(ALPHA)
Item-total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected if Item Total Correlation	Alpha if Item Deleted
V4301	42.7000	11.8724	0.1316	0.7260
V4302	42.0667	11.6506	0.3910	0.6760
V4303	41.8667	12.4644	0.1472	0.7063
V4304	41.9000	12.9897	0.0387	0.7168
V4305	41.7333	13.3057	0.0546	0.7044
V4307	41.9333	12.1333	0.2940	0.6875
V4308	41.8000	11.6138	0.7375	0.6566
V4309	41.8000	12.0276	0.4168	0.6769
V4310	42.0000	11.2414	0.5268	0.6601
V4311	42.0000	10.4828	0.6673	0.6377
V4312	41.9000	13.3345	-0.1540	0.7148
V4313	42.1333	10.1885	0.5410	0.6498
V4314	41.8000	11.6138	0.7375	0.6566
V4315	41.9333	12.9609	0.0220	0.7231
V4316	41.6667	13.4713	0.0000	0.7037
V4317	41.8000	11.6828	0.7061	0.6591
V4318	43.6333	13.6195	-0.1348	0.7103

Reliability Coefficients

N of Cases = 30.0 N of Items = 17 Alpha = .7010

CURRICULUM VITAE

Name : Arunee Thantavittaya

Birth Date : May 01,1972

Birth Place : Pattany Province

Sex : Female

Nationality : Thai

Marital : Married

Education Background

1992 : Diploma of Nursing and Midwife

1998 : Bachelor in Public Health, Songklar University

2001 – 2005 : Master of Public Health (M.P.H.) The Collage of
Public Health, Chulalongkorn University

Position : Health Academic Level 5

Work Place : Public Health Office, Trang Province.