

# Province location and info

- Œ 85% is mountainous with 14 ethnic group
- Œ Total population : 295.110 people( Female136.139)
- Œ Total 7 districts, total: 475 villages, 61 village groups, 15 development target, 3 target to establish small district
- **Œ** Poor province
- Œ Poor village : 332 villages, or 70%
- Œ Poor family : 25.410 families or 53%
- Œ Poor population : 152.000 people or 55%

(Data from planning and investment sector in province 201

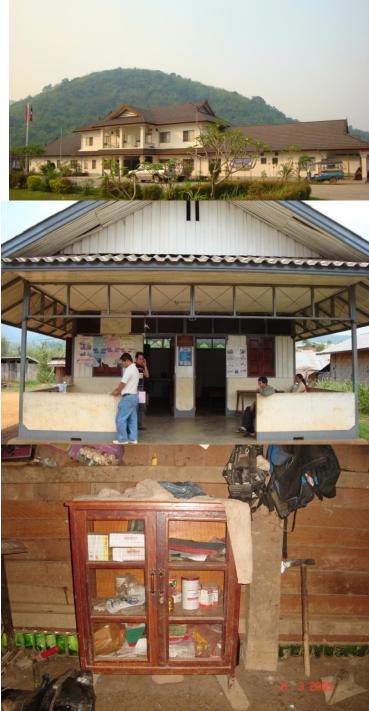




Health care service center

PHO : 1 with 85 beds
--Service center :1
Œ District hospital : 6 place at 120 beds
Œ Community CHC : 44 with

- Œ Community CHC : 44 with 88beds
- Œ Drug kit in village : 355



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## (Propose Health Campaign Project)

- **1. Reduce Infant Mortality rate and Mother Mortality rate**
- 2. Strengthened Health Care systems and Expanded access to health services in community Household
- 3. To improve Health Quality of Service in Communities

- 1. To ensure that all the pregnancy in the focus village have health check up and safely give birth.
- 2. To letting mothers in the focus villages able to gain knowledge about the nutrition.
- 3. All the focus group of children can receive the neccessaries vacination and parasite prevention
- 4. Students in primary and secondary school in the focus villages receive the information concerning the health care, and will able to transfer to others family member and

- Health Campaign (Home Visit)
- Follow up district, CHC, village committee and VHV at least 1once a year.
- 2. CHC with VHV to home visit including the case that VHV found pregnancy which not come to CHC for check up yet.
- 3. Held village meeting to discuss about the household which could not follow the direction for health care, and VHV to do more basic health care focusing to prevent the disease which found happened a lot in the village at least 2 times a

4. Encourage people to do 3 cleanliness and estrablish model

health village

5. Creating strong reporting function between village and CHC

(form report)

### **Project area**

**Œ Houn district** 

**CE 2** Areas : (Sibounheung and Naxiengdee)

Œ10 big villages, total population: 12.153 (female: 6.234)

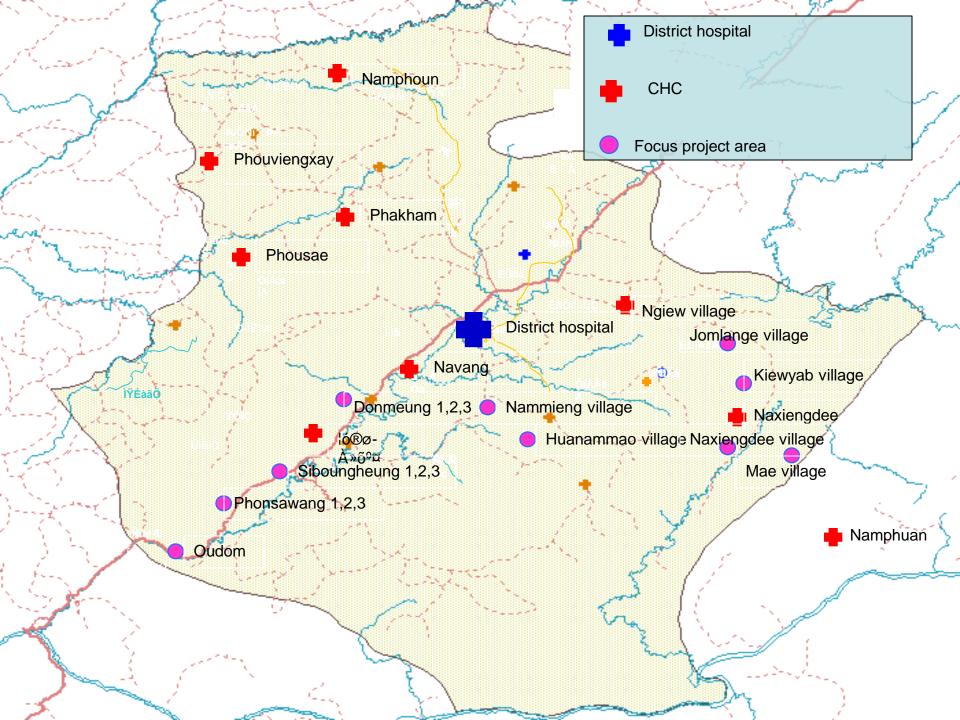
Total students in secondary school in 2 areas are: 982 (Girl:615)

**Œ VHV: 20 people (Female:4)** 

**Œ** Village health committee: 19 (female:9)

**Œ** District supervisors: 3 people

**Œ** Area supervisors: 7 people



# Implemented activities in the health campaign project

1. VHV have done home visit(visiting family)

2. Improved data transfer method.

3. Evaluate Mother and child Mortality rate in Sibounheung

area at the beginning project and compare to recent

4. Preparing recording book, and shirt for model heath mother

who accomplished 10 conditions.

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5. Promoted health care basis including 3 cleanliness in

schools, every Monday. The students will transfer the

knowledge to others family member and friends.

6. Evaluate according the 8 tasks of health care to announce the

model health care

# 8 tasks of health care to image to implement in village of home visit

project

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- 1. Sanitary campaign (3 cleanliness)
- 2. Clean water and environmental cleaning such as:

using toilet, remove animal raising from house,

having garbage disposal

3. Vaccination campaign for children and women between age 15 to 49 years old for target of 95%, especially reduce fever in child and link to other health care work

- 4. Safety pregnancy and give birth campaign
- **Œ** Family planning project implementation
- **CE** Prevent and protect Crpridopathy and AIDS
- Œ Pregnancy check up at least 4 times before give birth.
- Œ Get assist that have been trained while give birth.
- Œ If any suspicious more than ability must be delivery to hospital in time
- Œ To ensure that baby after born got regular check up to prevent suspicious matter .

5. Safety baby campaign implementation: New born care,

breast feeding until 6months

6. Reduce problem of lacking nutrition campaign : using

**Iodine, distribute Vit A, Fe and parasite medicine** 

7. Cure some disease that spread a lot such as ( stomach

disease, Lung disease, Malaria, Dengue fever)

8. Encourage VHV, village committee to take care of drug

kit in village normally

## 10 conditions for model health mother. (Mother and child health care)

- 1.Pregnant between age 18- to 35 years old.
- 2.Get check up at health care service unit at least 4 times and above.
- 3. Get the vaccination as commented by doctor.
- 4. Give birth at the health care service unit or give birth at home with the safely assistant .
- 5. Weight of baby should not less than 2500g.

## 10 conditions for model health mother. (Mother and child health care)

- 6. 6months breast feeding.
- 7. Baby get vaccination as advice by doctor before become 1 year old.
- 8. Have recording book of vaccination for mother and child.
- 9. Mother have family planning after give birth.
- **10.** Mother could encourage other mother at least 2 people to participate

#### in the health care.

#### 2. Follow up the VHV's activity by provincial, district, CHC



#### 3. Providing facilities and shirt for model health mother



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#### 4. Training for village health committee, VHV in Naxiengdee area.



#### 4. Announcement of the Model health village



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#### 4. Announcement of Model health village



## Out come of the implementation

1. Home visit: 35 times, meet patient:92 people, Pregnancy:

78 people, Mother : 58 people.

2. Health care and sanitary activity in village, school,

festival, village meeting total: 19 times, audience : 1,745 times of people

1. Encouraging 3 cleanliness campaign in school, villages

#### and family, total 7times.

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## Out come of the implementation

- 1. No infected disease in the focus villages.
- 2. Improvement of 3 cleanliness activities and able to

achieve the model health village for 4 villages.

## Out come of the implementation

1. Mother and child mortality rate decreased as shown below base on

Sibounheung aread info (2villages) and Naxiengdee area(2villages)

	2011	2012
Mother mortality rate	0	0
Child under 5 years old mortality rate	5	3
Child under 1 year mortality rate	(1/132)	2
Model health village	0	4

## Budget

No	Activity	Budget (\$)
1	Follow up, train for VHV by provincial, District, CHC	1.500
2	Provide recording book and shirt for model health mother	500
3	Follow up and evaluation	500
	Total	2.500

#### Advantage and disadvantage

#### Advantage:

- 1. Have supported budget from Japan.
- 2. Got support and supervise from provincial health office.
- 3. Well cooperate from district, CHC, village, and school's teachers. In implement the activities
- 4. All relevant sectors pay attention in their tasks.

**Disadvantage:** 

- 1.Lacking in budget
- 2.Some VHV not recognize the important and do not fully participating in job, the reason may because of no incentive for them

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