

MID-BCC – Communications for Change in Infectious Diseases in Greater Mekong Subregion

Dissemination Forum: Participatory Action Research in Savannakhet

**30 August 2010
Settha Palace Hotel, Vientiane
Capital**

Acknowledgment

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Ministry of Foreign Affairs

Ministry of Health - CIEH

Ministry of Information and Culture (MOIC)

Ministry of Education

Ministry of Agriculture and Forestry

- Department of Livestock and Fisheries

- National Animal Health Center

Provincial Health Department of Vientiane Capital

Provincial Health Department of Savannakhet

Lao Women Union

US-CDC

CARE

UN - FAO, IOM, UNICEF

WHO

Forum Objectives

1. To share information and insights gathered from the PAR conducted in Savannakhet province
2. To share lessons learned and open the discussion on the PAR methodology as it was applied in reducing the risk of bird flu (Pls see separate PPT)
3. To inform partners on the next steps - moving forward to address behavioral challenges identified in the PAR

Findings of the PAR in Savannakhet

Presentation Contents

- ❑ Background
- ❑ Objectives
- ❑ Process
- ❑ Data Collection and Analysis
- ❑ Summary of Findings
- ❑ Challenges

Background

Why Savannakhet was selected for PAR?



- ❑ A very active place for communication, commerce and movement of people with Thailand and Vietnam
- ❑ The road lays east-west from the provincial capital to the Vietnamese border town of Lao Bao.
- ❑ People and cars can cross the Mekong River between Savannakhet and Thailand's town of Mukdahan.

PAR Objectives

- ❑ To understand the daily life of the people including livelihood, culture and traditional practices that affect their health
- ❑ To determine the communication behavior and practices of people on how they seek health care
- ❑ To look at communication behavior and prevention practices of people toward infectious diseases

Research Questions?

- ✓ What is the health problem in the village?
- ✓ How serious is the disease in the village?
- ✓ How do people recognize the symptoms?
- ✓ How do people seek for treatment ?
- ✓ What is gender role regarding care?
- ✓ How does the bridge affect their lives?
- ✓ How do villagers prefer to receive information? What communication means/channels they used often?
- ✓ What actions they take to protect themselves from influenza-like diseases?
- ✓ What actions they would consider to protect their village from influenza-like diseases?

Processes



- 2 Districts: Nong & Sepone for Viet Nam Border
- 2 Districts: Kayson & Songkhon for Thai Border
- 4 Villages: Thasano, Thadeua, Dansavanh, Danvilay

- ✓ Discussion with the Public Health Department
- ✓ Touching base with district health office
- ✓ Making arrangements with Village Leaders
- ☐ PAR Team:
- ✓ AED Consultant: 1
- ✓ PPHO: 1
- ✓ DPHO: 1
- ✓ Village Facilitators: 2

Data Collection :

Participatory Action Research (PAR)

- Village Mapping
- Transect walk- Observation
- Individual Interview
- 2FGD's (10men & 10women):
 - ✓ Daily Activities Profile
 - ✓ Seasonal Calendar
 - ✓ Bean Quantification
 - ✓ Chapatti Pie
 - ✓ Ranking Table
 - ✓ Flowchart
 - ✓ Force Field Analysis

Data Analysis

- ❑ Looked at results using the PAR tools
- ❑ Each group used ten different tools
- ❑ Looked at the notes of notes
- ❑ Compared results from women's group vs. results from men's

Research Tool

□ Village Mapping

- ✓ show infrastructure that is important to them in the village and surroundings
- ✓ boundaries of the village



Research Tool

Transect walk

Provides opportunity
see available
village resources
which were not
captured in the
map.



Research Tool

□ Daily Activities Profile

Daily activities showed village livelihood activities during the day.

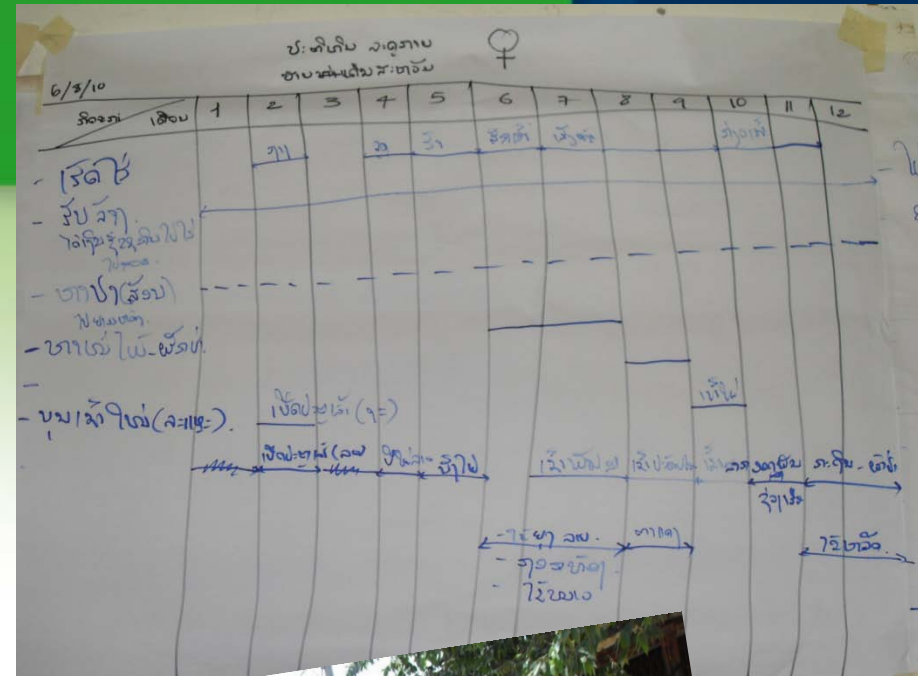
It showed women's productive work apart from household work, while men concentrate only on productive work and social events.



Research Tool

Seasonal Calendar

- ✓ showed different events during the year
- ✓ each event could indicate the cause of disease emergence in the village
- ✓ indicate duration of disease occurrence



Research Tool

□ Bean Quantification

was used to rank importance of diseases among villagers.



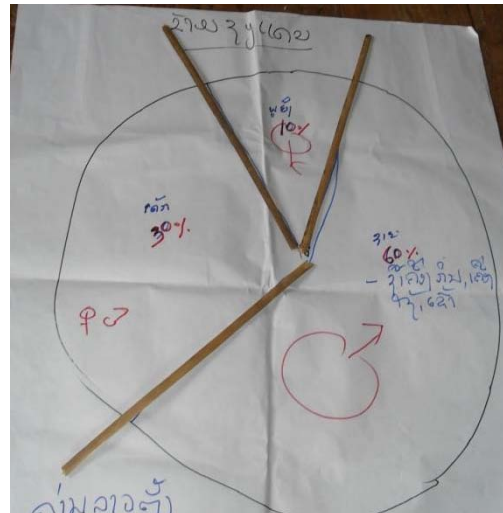
Research Tool

□ Chapatti Pie

✓ was used to show % of workload by gender with regard to home care



✓ was used to show % of people traveling across border by gender



Research Tool

Preferred Ranking

was used for decide on communication channels used in the village



ວັດສຳລັບຄວາມສຳຄັນ
(ແຫ່ງ) ຊຸມພ. ຊ່ວຍລາຍ ຍັງບໍ່ ທາງໄດ້

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TV	X	✓	ບໍ່ດີ	ດີ	ດີ	ດີ	ດີ
ອີເລັກໂນນິກ		X	ບໍ່ດີ	ດີ	ດີ	ດີ	ດີ
ປຶກສາຕົວເມັດ			X	ດີ	ດີ	ດີ	ດີ
ບັນທຶກສຽງ				X	ດີ	ດີ	ດີ
ກອງປະຊຸມ					X	ດີ	ດີ
ບັນທຶກຮູບ						X	ດີ
ອື່ນໆ							X
ຊັດເຈນ	IV	II	III	II	I	II	IV
ອື່ນໆ	2	1	3	4	5	6	1



Research Tool

Force Field Analysis

- ✓ to help the village members to think of what could be done to protect the village from disease
- ✓ to discuss and define a few key actions that could be undertaken in the future.

ວິເຄາະ: ຫົວໜ້າ

ປັນຫາ	ສາເຫດ	ຜົນກະທົບ	ແນວທາງແກ້ໄຂ	ຊົນ: ຜູ້ກວດກາ/ຜູ້ປຸງ
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II. ກວດກາ	- ອາຫານ ສິບ - ຊີ້ນ + ປາ (ຈັບ) - ອາຫານ ບຸດ ເຍົາ + ບໍ່ມີ ອາຫານ - ກາງ ສະ ກຸງ ບໍ່ມີ ທີ່ອາໄສ - ກາງ ສິບ - ບໍ່ມີ ວັກ ສິ ຫຼື ກຸງ - ກ່ອນ ລົດ	- ອາຫານ ສິບ - ອາຫານ ບຸດ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ	- ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ	- ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ - ອາຫານ ສິບ
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Findings

❑ Serious disease in the village

Ranking	Thasano		Thadeua		Dansavang		Danvilay	
	Men group	Women group	Men group	Women group	Men group	Women group	Men group	Women group
1	Common Colds and Dengue	Common Colds	Dengue	Dengue	Common Colds	Dengue	Malaria	Malaria
2		Diarrhea	Common Colds	Common Clods	Diarrhea	Diarrhea	Common colds	Common Colds
3	Diarrhea	Dengue	Malaria	Diarrhea	Skin Allergy	Common Colds	Diarrhea	Diarrhea
4		<i>Women 's group ranked in line to health center and district hospital record.</i>		Tuberculosis	Conjunctivitis	Conjunctivitis <i>Men 's group is in line to health center statistic.</i>	Dengue	Cough

Findings

□ How do people recognize the symptoms?

They have high fever, feel body pain, headache with nasal congestion (runny nose) which they suspect as symptoms of common colds.

If they do not experience nasal problem, they do not know exactly the disease. They will know it when they go to hospital and have blood test.

Findings

How do people seek treatment?

Different ways of treatment depend on ethnic group

Lao Lum

- ✓ Put cool tissue
- ✓ Take paracetamol 2-3 days
- ✓ See Medico at Health Center
- ✓ Go to hospital in Laobao for Nong-Sepon. No one said he goes to District due to transportation available
- ✓ Go to district hospital - Mukdahan for Kayson and Songkhone
- ✓ Herb/Traditional local treatment (*Lieng Phee/Dumo*) is most common to treat serious case

Lao Theung

- ✓ Take blanket /make fire for warm up body
- ✓ Traditional local treatment (*Leng Phee/Dumo*)
- ✓ See Medico at Health Center
- ✓ Go to hospital in Laobao

Findings

□ What is gender role regarding care?

Mother's work load is heavier than Father's particularly the 2-3 days home care.

Bringing the sick child at health center is mostly done by women. If their children are not better then their husbands help them to seek treatment at district hospital at cross border

Findings:

How does the border affect their lives?

Nong and Sepon-Viet Nanam border

Positive

- ✓ Good transportation and communication-increasing numbers of traders, visitors
- ✓ increase demand of food supply, village especially women can sell their agriculture products and NTFP like bamboo shoot and herbal.
- ✓ Men are employed in tree farms, ferrying, and hiring of motorbikes

Negative

- ✓ People rush into Lao side for job
- ✓ Vibrant entertainment businesses - night club-karaoke, this leads to sex service, strikes, drug addiction, and gambling.
- ✓ Traffic jam and accident
- ✓ Water pollution and garbage problem
- ✓ Drunks fighting each other or with wives
- ✓ Lost of agricultural land to private concessioners who do tree farms

Findings:

How does the bridge affect their lives?

Kaysone and Songkhone-Thai Land

Positive

- ✓ new bridge has no effect to their livelihood so far, because they regularly cross border by boat - having more confidence in crossing border to Thailand legally.
- ✓ livelihood is better than before, because their sons and daughters who work in Thai side send money to their family
- ✓ Increased number of merchants

Negative

- ✓ They feel unhappy- missing and think of their children who work in Thailand that will take risk in terms of diseases and security
- ✓ Social problems arise like gambling and drug addiction
- ✓ One case of dengue was reported. The person works in Thailand

Findings

❑ Preferred channel to receive information

	Thasano		Thadeua		Dansavang		Danvilay	
Ranking	Men group	Women group	Men group	Women group	Men group	Women group	Men group	Women group
1	health center	health center	Village meeting	Village meeting	Health center	Health center	sick people	MCNV
2	TV	poster	poster	Loud speaker	Village meeting	Village meeting	Health center	poster
3	Loud speaker	loud speaker	Health center	poster	Radio/loud speaker	relative	village meeting	Health center
4	village meeting and poster.	TV and radio	Loud speaker	Health center	Play Role	Loud speaker	poster	Village meeting

Findings

□ Key Actions

- ✓ They would consider NO ACTION to protect their village from influenza-like diseases
 - Villagers perceived Common colds is caused of Season change
 - Exercise, Take rest, Eat nutritious foods are measures considered by Lao Lum to protect themselves from common colds

Challenges

- ❑ People are busy during farming season. No time to join village meetings
- ❑ Communication during rainy season is difficult
- ❑ Women of ethnic groups do not understand (no read, no write) Lao Language; mostly do not go to school
- ❑ PAR is new for local/ government staff
- ❑ Conduct of PAR needs more patience and take time to hear village' issues specially the poor - women

Implication of Findings

- Low health- seeking behavior
- Lack of knowledge → Low education
- Inadequate access to information
- Ethnicity is a barrier
- Communication channels not maximally tapped → capacity needs to be improved

Implication of Findings - Way Forward

- Target audience segmentation
- Review of existing materials
- Development of materials and that address culture and ethnicity
- Build the capacity of health workers, community influentials and opinion leaders

Next Steps

Mekong Infectious Diseases – Behavior Change Communication (2010-2012)

- Pursue PAR as a methodology to bring in more community participation in identifying people's health issues.
- Continuously conduct communication research to determine barriers to practice.
- Pursue targeted communications - conduct of stakeholders' mapping
- Adapt/develop communication messages and materials that address ethnic and language barrier
- Build the interpersonal communication skills of health care workers and community influentials and spokespersons and provide them the job aids

END