# CHAPTER VI

## An annotated bibliography

### 6.1 Search method

I started searching Medline, entering following key words: *community participation, community involvement, community health, primary health care*. I combined these key words with *developing countries*. This strategy gave me many references of articles in journals, on topics related to community participation in primary health care programmes in developing countries. Some articles also discussed issues like *empowerment* and *health promotion*.

For (*Participatory*) *Action Research* (PAR) I searched Chulalinet database of Chulalongkorn University. This search resulted in a useful number of references on PAR, available in libraries of Chulalongkorn University.

To find references on *community empowerment* and *health promotion* I searched Medline again. Combining these key words with *developing countries* gave hardly any results. Consequently, most references I obtained were of journal articles about situations in North America. I also tried *healthy cities*, but without result. I found many references in journal articles.

For references on *Acute Respiratory Infections* (ARI) I had many alternatives:

Medline (searching *ARI* and *pneumonia*, combined with *Primary Health Care* and

*developing countries*), the WHO library in the Ministry of Public Health, the WHO

Home Page on the internet, Chulalinet (searching *Acute Respiratory Infections*,

*communicable diseases, and Primary Health Care*) and personal contacts. This gave

me a sufficient number of references.


For references on *health education* I searched Chulalinet and Medline.

Chulalinet proved more useful than Medline.


## 6.2 Annotated Bibliography


Annett H. & Rifkin S. (1995). *Guidelines for rapid participatory appraisals to assess
community health needs: a focus on health improvements for low-income   urban and
rural areas.* Geneva: WHO, Division of Strengthening of Health Services


Practical manual explaining how a team of experts and community

representatives can obtain information on health problems and factors that may

influence the set-up of a community based health programme. Advocate feedback to

community representatives to check whether problems and priorities as understood by

the team reflect the communities' perspective. Rapid Participatory Appraisal is meant

as a first step of community involvement in the planning of health services.

Fals-Borda O. & Anisur Rahman M. (eds.).(1991). *Action and knowledge: breaking the monopoly with participatory action-research*. New York: The Apex Press

Contains contributions of authors reflecting experiences from South America, Africa, and Asia. Contributions cover the theoretical foundations of Participatory Action Research (PAR), based on Freire, and with a high political dimension, discussions of certain practical aspects of PAR (such as the role of facilitators), case-studies with different groups of participants (revealing PAR's potential to acquire information that would not be available using more conventional data collection methods), and philosophical issues around PAR.

Freire P. (1970). *Pedagogy of the oppressed*. New York: The Seabury Press
A philosophical introduction to the principles of education for the poor.

Freire is highly influenced by Marxism and Existentialism. He proposes an education method that is at once adapted to the realities of the poor and liberating. Facilitators have to understand the daily life and problems of the poor to create learning means (called "codes") that enable the learners to react intellectually and emotionally, thus learning about their own living conditions and acquiring new skills. Learning is applied in reality and is thus emancipatory. Teacher and learner inter-act on an equal basis in this highly political education process.

Green A. (1994). *An introduction to health planning in developing countries*. Oxford: Oxford Medical Publications, Oxford University Press

This work gives an overview of health planning phases in a Primary Health Care context. It discusses the notions of health and sees a holistic notion closely related to individuals having a more pro-active role in their own health and health care. Discusses the notion of priority setting on basis of notion of needs and advocates a greater role for communities in this process. Develops a priority setting structure model with a clear role for national level and local level (communities and health professionals).

Hart E. & Bond M. (1995).*Action research for health and social care. A guide to practice*. Buckingham: Open University Press

Introduction to action research as a tool for health and social care, mainly in a hospital setting in Europe. Give an overview of antecedents of action research (Lewin) and present a useful typology of action research, and have a lot of interest for the "politics" of any action research project (or the inter-personal dimension). Interesting and diverse case studies, with in annex a practical tool-kit.

Lankester, T. (1992). *Setting up community health programmes: A practical manual for use in developing countries*. London: Macmillan

Sees partnership between external organizations and communities as a basis for all stages of a health programme. Gives interesting guidelines for organizations to

"chose" a community to work with, which touch upon many factors that affect community participation.

Oja S. & Smulyan L. (1989). *Collaborative Action Research: a developmental approach.* London-New York-Philadelphia: the Falmer Press

Action research in a school context. Discusses action research as a means to help teachers understand and tackle their professional problems. A case study illustrates the different phases of an action research project in a school, and stresses different elements of group dynamics involved. The issue of funding of action research projects is being discussed.

Oakley P. (1989). Community involvement in health development: An examination of the critical issues. Geneva: WHO

Gives a systematic discussion of key issues in community involvement in health development (CIH). Reviews philosophical issues related to CIH, and presents arguments to justify it. Asks what is a community, discusses concept and degrees of CIH, as well as factors favouring support mechanisms. Reviews education and training for CIH, and proposes strategies focussing on building up an organizational basis for people to make their opinions known and to negotiate and bargain with forces that influence their lives (as opposed to obtaining support for an externally developed project).

Rifkin S. (1985). *Health planning and community participation: case studies in South-East Asia.* London: Croom Helm

Builds on experiences with community development in other sectors to discuss community participation in health. Improvements in community health do not necessarily start with health related activities. Discusses three models of participation of communities, the respective role of health professionals in these models, and how participation is justified in these models. The book contains three case studies from South-East Asia, illustrating factors that influence community participation.

Rohde J., Chatterjee M.& Morley D.(Eds).(1993). *Reaching health for all.* Delhi: Oxford University Press

Contains articles of authors reflecting experiences in Primary Health Care and other health programmes at different levels (local, regional, and national...). Some very inspiring witnesses on how basic health care projects at local level can be implemented in cooperation with communities, traditional and modern leaders, health staff, and organizations. One interesting article on how disabled people can stimulate their community by assuming responsibility for their own development. Also interesting article about relationship between professional health staff and communities.

Stringer E. (1996). *Action research: a handbook for practitioners*. London: Sage Publications.

Introduction to action research from a practical perspective. Gives guidelines

for action research in situations with many groups, with a potential conflict situation.

Covers the role of the facilitator starting from the initial phase, before mobilization of

anyone, to evaluation of activities.

Thavitong et al., .(1988). *Alternatives to PHC Volunteers in Thailand.* Bangkok:
Center for Health Policy Studies, Mahidol University

Study performance of health volunteers in Thailand's Primary Health Care

system. Concludes that the Primary Health Care system and the expected tasks for

health volunteers are characterized by a tasks-oriented, top-down approach. This

resulted in low community participation in most community health programmes. Focus

should be on health behaviour problems, rather than service coverage, and this will

need more planning from the bottom and democratic and development minded village

heads.

World Health Organization.(1991). *Community involvement in health development: challenging health services.* Report of a WHO study group, WHO Technical Report Series, 800: Geneva: WHO

This work, written by experts of community health, advocates communities'

involvement in design and implementation of health care programmes, on the basis of

felt needs as opposed to medically related needs. It stresses the need to foment local

partnerships and gives Participatory Action Research (PAR) as an example of how this can be achieved. Importance of training of health staff to acquire the skills needed to help to understand its health problems and to work at improving its health status. Also need to train communities in "community understanding": achieving a consensus on health needs.

Whyte F. W. (Ed).(1991) *Participatory action research.* Newbury Park: Sage Publications

Present Participatory Action Research (PAR) in the context of social research and organizational behaviour management. Present case studies in the context of corporate reformation (organizational change) and agricultural development. Many case studies stress the importance of the role of the researcher/facilitator. Some contributors also show an interest for the validity of the knowledge acquired during the PAR process.