ABSTRACT

This cross-sectional study was conducted to correlate the Village Funds as a form of community financing, and the Village Health Volunteer (VHV) who are the community support group for labor and cooperation in PHC.

The contributions of Village funds were identified through the perception of VHV in terms of its characteristics, roles, activities, and contributions. The coverage of VHV performance status in PHC activities was also identified. VHV personal characteristics, VHV involvement in Village Funds and their perception on Village Funds were measured as independent variables. The study was conducted during the two weeks of April, 2000, covering 280 VHV of Sriprachan District, Suphanburi Province, Thailand.

Based on the 75th percentile value of performance score, VHV were divided into two groups: 32.6% of them were highly active and 67.4% were moderately active. Correlation between the independent and dependent variables was also made. VHV total involvement score in village funds and VHV perception scores on village funds had significant correlation with the VHV performance scores with r = 0.171 (p-value 0.01) and r = 0.123 (p-value 0.05) levels respectively. The Village Funds contributed to VHV performance by facilitating to operate and maintain the CPHCC.

Only education attainment ($x^2 = 8.09, p$-value 0.04) and family monthly income ($x^2 = 10.04$ p-value 0.03) were found to be significantly related with VHV performance level, while the other VHV personal characteristics were not able to describe significantly related.

From the findings of this study, it is recommended that the two kinds of community involvement, i.e., VHV (Health volunteer system) and Village Funds (one form of community financing) should continue and maintain to achieve the HFA 2000 goals.