

**PARTICIPATORY ACTION RESEARCH AS A TOOL TO
COMBAT FATAL DELAYS IN PRESENTING CHILDREN
UNDER FIVE WITH PNEUMONIA TO A TRAINED HEALTH
WORKER**

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to a trained health worker

By Marc Vandenberghe

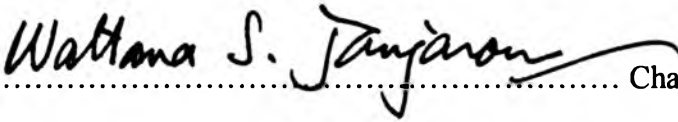
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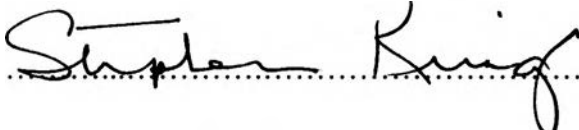
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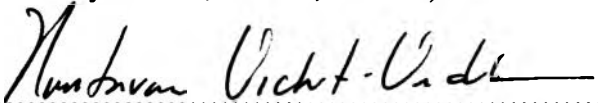
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ABSTRACT

Children under five years old with fast breathing in developing countries, are often presented too late to a trained health worker, because of impeding socio-economic factors in their caretakers' immediate environment. A health promotion approach is advocated, based on the concept that communities can improve their health status by exerting control on certain health determinants in their environment. Therefore, community empowerment, defined as the enhancement of communities' ability to take action to improve their lives, is proposed. The methodology used is Participatory Action Research (PAR), that combines learning with action. PAR enables caretakers of children under five years old to link health education needs with training in life supporting skills, which will help them to remove practical obstacles when presenting their children to a trained health worker. A description of an ARI-related PAR project, set in a hypothetical situation, is given.

A project proposal has been developed aiming at reducing pneumonia-related mortality and ARI-related morbidity. The target group is women up from fifteen in a certain community. The objectives are to increase the number of caretakers who bring their child with fast breathing in time to a trained health worker, and to improve standards of hygiene, and feeding and treatment practices. It is proposed to conduct a baseline study, which will be followed by the intervention proper, a PAR project. A programme outcome and impact evaluation is scheduled as well.

A data collection exercise has been conducted in Muang district of Chonburi Province, Thailand, in cooperation with officers of the provincial Ministry of Public Health. The aims were to (1) describe caretakers' recognition of symptoms of ARI and their response to them, especially fast breathing, (2) assess possible delays in health care seeking from a health center or a hospital, (3) determine which decision-makers are instrumental in the referral process to the health center or the hospital. The study population was caretakers of children under five years old who had been admitted for pneumonia in Chonburi hospital in the course of 1997. The results showed that caretakers (1) do not normally consult a health volunteer for their health problems, (2) often do recognize the main danger signs of pneumonia in their children, but may present them to a trained health worker with an unwarranted delay.

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