

AID 1020-25 (7-68)				SECURITY CLASSIFICATION		001 PROJECT NUMBER	
PROJECT APPRAISAL REPORT (PAR) (U-446) See M.O. 1026.1				UNCLASSIFIED		493-11-540-179	
002 PAR	MO.	DAY	YR.	003 U.S. OBLIGATION SPAN		004 PROJECT TITLE	
AS OF:	0	5	0	FY 66	Thru FY 74	RURAL HEALTH	
005 COOPERATING COUNTRY - REGION - AID/W OFFICE							
THAILAND							

006 FUNDING TABLE

AID DOLLAR FINANCING-OBLIGATIONS (\$000)	TOTAL	CONTRACT (NON-ADD)	PERSONNEL SERVICES			PARTICIPANTS		COMMODITIES		OTHER COSTS	
			AID	PASA	CONTRACT	DIR. PASA	CONTRACT	DIR. PASA	CONTRACT	DIR. PASA	CONTRACT
CUMULATIVE NET THRU ACTUAL YEAR (FY 1969)	3,757.8		735	95		822		2,101.8		4	
PROPOSED OPERATIONAL YEAR (FY 1970)	565.		150			120		295			

CCC VALUE OF P.L. 480 COMMODITIES (\$000) → Thru Actual Year : Operational Year Program :

007 IMPLEMENTING AGENCY TABLE

If contractors or participating agencies are employed, enter the name and contract or PASA number of each in appropriate spaces below; in the case of voluntary agencies, enter name and registration number from M.O. 1551.1, Attachment A. Enter the appropriate descriptive code in columns b and c, using the coding guide provided below.

TYPE CODE b	TYPE CODE c	a. IMPLEMENTING AGENCY	TYPE CODE		d. CONTRACT/PASA/VOLAG NO.	e. LEAVE BLANK FOR AID/W USE
			b.	c.		
1. U.S. CONTRACTOR	0. PARTICIPATING AGENCY					
2. LOCAL CONTRACTOR	1. UNIVERSITY					
3. THIRD COUNTRY CONTRACTOR	2. NON-PROFIT INSTITUTION					
4. PARTICIPATING AGENCY	3. ARCHITECTURAL & ENGINEERING					
5. VOLUNTARY AGENCY	4. CONSTRUCTION					
6. OTHER:	5. OTHER COMMERCIAL					
	6. INDIVIDUAL					
	7. OTHER:					

PART I - PROJECT IMPACT

I-A. GENERAL NARRATIVE STATEMENT ON PROJECT EFFECTIVENESS, SIGNIFICANCE & EFFICIENCY.

This summary narrative should begin with a brief (one or two paragraph) statement of the principal events in the history of the project since the last PAR. Following this should come a concise narrative statement which evaluates the overall efficiency, effectiveness and significance of the project from the standpoint of:

- (1) overall performance and effectiveness of project implementation in achieving stated project targets;
- (2) the contribution to achievement of sector and goal plans;
- (3) anticipated results compared to costs, i.e., efficiency in resource utilization;
- (4) the continued relevance, importance and significance of the project to country development and/or the furtherance of U.S. objectives.

Include in the above outline, as necessary and appropriate, significant remedial actions undertaken or planned. The narrative can best be done after the rest of PART I is completed. It should integrate the partial analyses in I-B and I-C into an overall balanced appraisal of the project's impact. The narrative can refer to other sections of the PAR which are pertinent. If the evaluation in the previous PAR has not significantly changed, or if the project is too new to have achieved significant results, this Part should so state.

008 NARRATIVE FOR PART I-A (Continue on form AID 1020-25 I as necessary):

This is the first PAR for this project which started in FY 66 as an out-growth of the Village Health and Sanitation Project No. 493-11-520-109. The project, somewhat in the nature of an umbrella project, covers the broad field of rural health development. The basic project is supported by two sub-projects which are, Mobile Medical Team Support, 493-11-540-179.1, and Protein Food Development, 493-11-540-179.2. (See separate PARS for these projects.) This project is in

MISSION DIRECTOR APPROVAL →	SIGNATURE	DATE
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PAR CONTINUATION SHEET

This sheet is to be used for any Narrative Sections for which sufficient space has not been provided on the form. Identify each narrative by its Part and Section Designation.

008 Narrative for Part 1-A (continued)

support of MOPH rural health development efforts with particular emphasis given to selected areas of strong insurgent activities and areas of increasing sensitivity.

The overall performance and effectiveness of project implementation has been good. Commodity support, which comprises the largest single area of expenditure, has been for the most part procured within reasonable time limits and effectively utilized by the host government. For example, 80% of 281 line items procured under this project in FY 68 have arrived in country. The time involved in clearing, making ready, registering and trans-shipping of vehicles to the end use location averages less than 30 days.

The basic training of auxiliary health workers in accordance with the MOPH five-year development plan is proceeding on schedule. Training schools are being constructed, staff assigned, curriculum broadened and trained health workers are graduating and being assigned to rural health facilities. Approximately 50% of all auxiliary health workers are being assigned to health facilities in sensitive provinces.

In-service training programs, conferences and workshops are being held annually at an expanding rate.

The project also has provided participant training and advisory services to the School of Public Health, which has the responsibility for training middle-level professional and supervisory health personnel. More than 40% of the graduates of this institution are in service of the MOPH in sensitive areas.

Participant training, another important aspect of this project, has been quite successful to date. Priority for training abroad goes to training personnel and officials responsible for planning, directing and evaluating rural health activities at the provincial level downward to the villages. To date, 176 participants have been trained, of which 33 were from the Faculty of the School of Public Health and 108 of the remaining 143 MOPH participants are now serving in rural areas of the country.

The establishment and staffing of rural health centers has been accelerated, especially in Northeast Thailand. For example, of the 389 new health centers constructed in the two-year period 1966-68, 46% of these are located in Northeast Thailand.

The environmental health project inputs have been steadily progressing. Of the 12,000 health development villages, more than 6,000 are in Northeast Thailand. To date, 8,500 village wells, 1,300 piped water supplies and more than half a million water seal latrines have been constructed.

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PROJECT NUMBER

403-11-540-170

PART I-B - PROJECT EFFECTIVENESS

I-B-1 - OUTPUT REPORT AND FORECAST - (See detailed instructions)

DE O. D/W SE ILY	2. This section is designed to record progress toward the achievement of each project output target which was scheduled in the PIP, Part II. Where progress toward a target is significantly greater or less than scheduled, describe reason(s) beneath the target.	ACTUAL AND PLANNED OUTPUTS (ALL DATA CUMULATIVE)				
		3. ACTUAL CUM. TO DATE	4. AS OF PRIOR JUNE 30		5. PLANNED BY NEXT JUNE 30	6. PROJECTED TOTAL FOR PROJECT* LIFE
			a. PLANNED	b. ACTUAL		
	1. Auxiliary health workers trained	2,500	1,700	1,649	450	4,349
	2. Auxiliary health workers refresher training	1,074	350	350	350	2,124
	3. Middle level professionals trained	1,085	680	658	454	1,965
	4. Health Centers constructed and staffed	2,867	190	190	190	3,247
	5. Health training institutions established	5	6	5	1	7
	6. Participants trained (U.S.)	95	74	72	12	104
	7. Participants trained (Third Country)	85	56	53	17	120
	8. Rural Hospitals improved	22	18	18	4	26
	9. Health development villages (Active program)	12,062	1,000	1,000	1,000	14,000
	10. Village leaders trained	1,096	500	500	500	2,000
	11. Shallow wells constructed	8,461	2,500	2,500	2,500	13,000
	12. School water supplies constructed	1,307	500	500	500	2,300
	13. Water seal latrines constructed	403,316	50,000	50,000	50,000	600,000
	14. Mobile health education teams fielded	3	3	2	9	21
	15. Tuberculosis control units established	3	2	2	0	3
	16. Rural Health Research Project established	1	1	1	0	1
	17. Regional environmental health headquarters established	4	4	4	1	9

* Through FY 71 only.

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PAR CONTINUATION SHEET

This sheet is to be used for any Narrative Sections for which sufficient space has not been provided on the form. Identify each narrative by its Part and Section Designation.

008 Narrative for Part 1-A (continued)

A small rural health research project is getting off the ground after a series of false starts. This project should improve steadily with new leadership and produce meaningful models for expansion on a national basis.

This project makes a major contribution by strengthening the basic organizational and administrative structure for delivery of health services throughout the provinces which have been given priority attention by the RTG in its accelerated rural development efforts. Good health is recognized as a crucial ingredient in building an economically strong and stable society.

One of the goals of this project is to improve the utilization of manpower and material resources. Increased emphasis on better training methods, support of the training institutions and encouragement of better health planning are all directed at stimulating the Ministry of Public Health to make maximum use of limited resources. Efficiency of planning and operational phases is improving, particularly with the establishment in the Under-Secretary's office of a health planning section.

U.S. objectives are to strengthen the human and material resources of Thailand so that this country can assume a strong place among the free nations of the world. A population without the vigor that good health provides serves as fertile ground for insurgency and social unrest. Prevention of disease and promotion of positive health is an achievable goal for Thailand, and will repay in multiple ways the investment the RTG will be required to make if the health service program is to be successful.

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PART I-B - Continued

010

B.2 - OVERALL ACHIEVEMENT OF PROJECT TARGETS

Place an "X" within the bracket on the following seven-point scale that represents your judgment of the overall progress towards project targets:



PART I-C - PROJECT SIGNIFICANCE

011

C.1 - RELATION TO SECTOR AND PROGRAM GOALS (See detailed instructions M.O. 1026.1)

This section is designed to indicate the potential and actual impact of the project on relevant sector and program goals. List the goals in col. b and rate potential and actual project impact in cols. c and d.

a. CODE NO. (AID/W USE ONLY)	SCALE FOR COLUMN c: 3= Very Important; 2= Important; 1= Secondary Importance SCALE FOR COLUMN d: 3= Superior/Outstanding; 2= Adequate/Satisfactory/Good; 1= Unsatisfactory/Marginal	c. POTENTIAL IMPACT ON EACH GOAL IF PROJECT ACHIEVES TARGETS	d. ACTUAL IMPACT ON GOAL TO DATE RELATIVE TO PROGRESS EXPECTED AT THIS STAGE
	b. SECTOR AND PROGRAM GOALS (LIST ONLY THOSE ON WHICH THE PROJECT HAS A SIGNIFICANT EFFECT)		
	(1) To strengthen rural health development, especially in areas of strong insurgent activity, in form of better trained health personnel, facilities, and supplies.	3	2
	(2) To augment existing rural health services to meet threat of insurgency through the Mobile Medical Team program.	3	2
	(3) To research, develop and stimulate production of a family of high protein food supplements for the purpose of improving nutrition in rural areas.	3	3
	(4)		

For goals where column c. is rated 3 or 2 and column d. is rated 1, explain in the space for narrative. The narrative should also indicate the extent to which the potential impacts rated 3 or 2 in column c. are dependent on factors external to the achievement of the project targets, i.e., is there a substantial risk of the anticipated impact being forestalled by factors not involved in the achievement of project targets. If possible and relevant, it also would be useful to mention in the narrative your reading of any current indicators that longer-term purposes, beyond scheduled project targets, are likely or unlikely to be achieved. Each explanatory note must be identified by the number of the entry (col. b) to which it pertains.

012 NARRATIVE FOR PART I-C.1 (Continue on form AID 1020-25 I):

- (1) Timing of the RTG effort is a critical factor. Services must be established and their continuation assured before insurgent activities become too formidable.
- (2) The mobile medical team effort provides the immediate impact objective, but the long-term objective of establishing regular services is more difficult to achieve because of limited trained manpower and material resources. The Rural Health Project gives strong support to both immediate and long-term objectives.
- (3) Good nutrition is prerequisite to good health, and good health is a major condition for family stability, productivity and economic achievement. Research, development, production and acceptance of high protein food supplements point directly at the problem of under-nutrition among villagers in rural Thailand. Cooperation of the Department of Fisheries and other RTG agencies is essential. Development of the protein supplements is definitely attainable during the life of the project, but commercial production, wide distribution, acceptance and use of the supplements is a long-term objective, achievement of which depends on a firm commercial base, plus intensive promotion and education.

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PART I-C - Continued

C.2 - GENERAL QUESTIONS

These questions concern developments since the prior PAR. For each question place "Y" for Yes, "N" for No, or "NA" for Not Applicable in the right hand column. For each question where "Y" is entered, explain briefly in the space below the table.

MARK
IN
THIS
COL.

013	Have there been any significant, unusual or unanticipated results not covered so far in this PAR?	N
014	Have means, conditions or activities other than project measures had a substantial effect on project output or accomplishments?	Y
015	Have any problems arisen as the result of advice or action or major contributions to the project by another donor?	N
016	If the answer to 014 or 015 is yes, or for any other reason, is the project now less necessary, unnecessary or subject to modification or earlier termination?	N
017	Have any important lessons, positive or negative, emerged which might have broad applicability?	N
018	Has this project revealed any requirement for research or new technical aids on which AID/W should take the initiative?	N
019	Do any aspects of the project lend themselves to publicity in newspapers, magazines, television or films in the United States?	Y
020	Has there been a lack of effective cooperating country media coverage? (Make sure AID/W has copies of existing coverage.)	N

021. NARRATIVE FOR PART I-C.2 Identify each explanatory note by the number of the entry to which it pertains. (Continue on form AID 1020-25 I as necessary):

- 014 Extensive road construction, irrigation projects, rural electrification, vocational education and cooperative farming projects are having or have the potential to increase the general level of living, which indirectly affects health, e.g. roads make access of health personnel easier to remote areas and as well as travel of villagers to health and medical facilities.
- 019 Activities of mobile medical teams and of the village level midwives and multipurpose health worker, family planning clinics, field training of health trainees, village water programs, etc.

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PART II - IMPLEMENTATION REPORT

II-A - STATUS OF SCHEDULE

022 A-1 - INDIVIDUAL ACTIONS (See detailed instructions M.O. 1026.1). This is a listing of major actions or steps which were scheduled for physical start or continuing implementation in the reporting period as reflected in the Project Implementation Plan, Part I.

(a)		(b) STATUS - PLACE AN "X" IN ONE COLUMN		
PIP ITEM NO.	MAJOR ACTIONS OR STEPS; CAUSES AND RESULTS OF DELAYS; REMEDIAL STEPS	(1) BEHIND SCHEDULE	(2) ON SCHEDULE	(3) AHEAD OF SCHEDULE
	Construction of Health Facilities		X	
	Staffing of Health Facilities	X		
	Construction of Training Institutions	X		
	Participant Training		X	
	Procurement of Commodities		X	
	Research Project (Sarapee)	X		
	Improvement of Hospitals		X	
	Village Environment Improvement		X	
	U.S. Advisory Assistance		X	

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PART II - Continued

023 II-A.2 - OVERALL TIMELINESS

In general, project implementation is (place an "X" in one block):

(a) On schedule	X
(b) Ahead of schedule	
(c) Behind schedule	
(1) AID/W Program Approval	
(2) Implementing Agency (Contractor/Participating Agency/Voluntary Agency)	
(3) Technicians	
(4) Participants	
(5) Commodities (non-FFF)	
(6) Cooperating Country	
(7) Commodities (FFF)	
(8) Other (specify):	

BLOCK (c): If marked, place an "X" in any of the blocks one thru eight that apply. This is limited to key aspects of implementation, e.g., timely delivery of commodities, return of participants to assume their project responsibilities, cooperating country funding, arrival of technicians.

II-B - RESOURCE INPUTS

This section appraises the effectiveness of U.S. resource inputs. There follow illustrative lists of factors, grouped under Implementing Agency, Participant Training and Commodities, that might influence the effectiveness of each of these types of project resources. In the blocks after only those factors which significantly affect project accomplishments, write the letter P if effect is positive or satisfactory, or the letter N if effect is negative or less than satisfactory.

1. FACTORS-IMPLEMENTING AGENCY (Contract/Participating Agency/Voluntary Agency)

024 IF NO IMPLEMENTING AGENCY IN THIS PROJECT. PLACE AN "X" IN THIS BLOCK:	X	032 Quality, comprehensiveness and candor of required reports	
025 Adequacy of technical knowledge		033 Promptness of required reports	
026 Understanding of project purposes		034 Adherence to work schedule	
027 Project planning and management		035 Working relations with Americans	
028 Ability to adapt technical knowledge to local situation		036 Working relations with cooperating country nationals	
029 Effective use of participant training element		037 Adaptation to local working and living environment	
030 Ability to train and utilize local staff		038 Home office backstopping and substantive interest	
031 Adherence to AID-administrative and other requirements		039 Timely recruiting of qualified technicians	
		040 Other (describe):	

2. FACTORS-PARTICIPANT TRAINING

041 IF NO PARTICIPANT ELEMENT IN PROJECT. PLACE AN "X" IN THIS BLOCK:		TRAINING UTILIZATION AND FOLLOW UP	
PREDEPARTURE		052 Appropriateness of original selection	P
042 English language ability	N	053 Relevance of training for present project purposes	P
043 Availability of host country funding	P	054 Appropriateness of post-training placement	P
044 Host country operational considerations (e.g., selection procedures)	P	055 Utility of training regardless of changes in project	P
045 Technical/professional qualifications	P	056 Ability to get meritorious ideas accepted by supervisors	N
046 Quality of technical orientation	P	057 Adequacy of performance	P
047 Quality of general orientation	P	058 Continuance on project	P
048 Participants' collaboration in planning content of program	P	059 Availability of necessary facilities and equipment	P
049 Collaboration by participants' supervisors in planning training	P	060 Mission or contractor follow-up activity	P
050 Participants' availability for training	P	061 Other (describe):	
051 Other (describe):			

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PART II-B - Continued

3. FACTORS-COMMODITIES

PLACE AN "X" IN APPROPRIATE BLOCK:	062 FFF	063 NON-FFF	X	064 NO COMMODITY ELEMENT		072 Control measures against damage and deterioration in shipment.	P
065 Timeliness of AID/W program approval (i.e., PIO/C, Transfer Authorization).					P	073 Control measures against deterioration in storage.	P
066 Quality of commodities, adherence to specifications, marking.					P	074 Readiness and availability of facilities.	
067 Timeliness in procurement or reconditioning.					P	075 Appropriateness of use of commodities.	
068 Timeliness of shipment to port of entry.					P	076 Maintenance and spares support.	
069 Adequacy of port and inland storage facilities.					P	077 Adequacy of property records, accounting and controls.	N
070 Timeliness of shipment from port to site.					P	078 Other (Describe):	
071 Control measures against loss and theft.					P		

Indicate in a concise narrative statement (under the heading a. Overall Implementation Performance, below) your summary appraisal of the status of project implementation, covering both significant achievements and problem areas. This should include any comments about the adequacy of provision of direct hire technicians as well as an overall appraisal of the comments provided under the three headings (b, c & d) which follow. For projects which include a dollar input for generation of local currency to meet local cost requirements, indicate the status of that input (see Detailed Instructions).

Discuss separately (under separate headings b, c & d) the status of Implementing Agency Actions, Participants and Commodities. Where above listed factors are causing significant problems (marked N), describe briefly in the appropriate narrative section: (1) the cause and source of the problem; (2) the consequences of not correcting it, and (3) what corrective action has been taken, called for, or planned by the Mission. Identify each factor discussed by its number.

079 NARRATIVE FOR PART II-B: (After narrative section a. Overall Implementation Performance, below, follow, on form AID 1020-251 as needed, with the following narrative section headings: b. Implementing Agency, c. Participants, d. Commodities. List all narrative section headings in order. For any headings which are not applicable, mark them as such and follow immediately below with the next narrative section heading.)

a. Overall Implementation Performance.

- 074 Northern Maternal & Child Health School--delay in starting for one year due to budget problems.
- 076 Spare parts for vehicles, wrong locations but straightening out.
- 077 Has been poor, but marked improvement, especially drugs, spare parts.

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PART III - ROLE OF THE COOPERATING COUNTRY

The following list of illustrative items are to be considered by the evaluator. In the block after only those items which significantly affect project effectiveness, write the letter P if the effect of the item is positive or satisfactory, or the letter N if the effect of the item is negative or less than satisfactory.

SPECIFIC OPERATIONAL FACTORS:

080	Coordination and cooperation within and between ministries.	N
081	Coordination and cooperation of LDC gov't. with public and private institutions and private enterprise.	P
082	Availability of reliable data for project planning, control and evaluation.	N
083	Competence and/or continuity in executive leadership of project.	P
084	Host country project funding.	N
085	Legislative changes relevant to project purposes.	
086	Existence and adequacy of a project-related LDC organization.	P
087	Resolution of procedural and bureaucratic problems.	N
088	Availability of LDC physical resource inputs and/or supporting services and facilities.	N
089	Maintenance of facilities and equipment.	P
090	Resolution of tribal, class or caste problems.	
091	Receptivity to change and innovation.	P
092	Political conditions specific to project.	
093	Capacity to transform ideas into actions, i.e., ability to implement project plans.	P
094	Intent and/or capacity to sustain and expand the impact of the project after U.S. inputs are terminated.	P
095	Extent of LDC efforts to widen the dissemination of project benefits and services.	P
096	Utilization of trained manpower (e.g., participants, counterpart technicians) in project operations.	P
097	Enforcement of relevant procedures (e.g., newly established tax collection and audit system).	
098	Other:	

HOST COUNTRY COUNTERPART TECHNICIAN FACTORS:

099	Level of technical education and/or technical experience.	P
100	Planning and management skills.	N
101	Amount of technician man years available.	P
102	Continuity of staff.	P
103	Willingness to work in rural areas.	N
104	Pay and allowances.	N
105	Other:	

In the space below for narrative provide a succinct discussion and overall appraisal of the quality of country performance related to this project, particularly over the past year. Consider important trends and prospects. See Detailed Instructions for an illustrative list of considerations to be covered.

For only those items marked N include brief statements covering the nature of the problem, its impact on the achievement of project targets (i.e., its importance) and the nature and cost of corrective action taken or planned. Identify each explanatory note.

106 NARRATIVE FOR PART III (Continue on form AID 1020-25 I):

- 080 Formerly very poor, but improving rapidly with changes in leadership in key posts.
- 082 Poor reporting on part of project. Data hard to get.
- 084 Dwindling CF Budget as \$ input lowers, without corresponding regular \$ budget increase.
- 087 Changes have been slow because of traditional administrative pattern, but improvement has been accelerated with emergence of young, energetic health officials in key positions.
- 088 Due to inadequate RTG budget support.
- 100 Planning and management skills in part has been weak but with participant training and advisory services, both areas have been strengthened materially.
- 103 Health personnel at higher levels, especially doctors, have been reluctant to live in rural areas due to poor facilities and communications, low salaries and no realistic incentive pay, professional isolation, etc.
- 104 Too low--civil service structure. Junior Health Worker--\$540/month only.

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PART IV - PROGRAMMING IMPLICATIONS

IV-A - EFFECT ON PURPOSE AND DESIGN

Indicate in a brief narrative whether the Mission experience to date with this project and/or changing country circumstances call for some adjustment in project purposes or design, and why, and the approximate cost implications. Cover any of the following considerations or others that may be relevant. (See Detailed Instructions for additional illustrative considerations.) Relevant experience or country situations that were described earlier can simply be referenced. The spelling out of specific changes should be left to the appropriate programming documents, but a brief indication of the type of change contemplated should be given here to clarify the need for change.

For example, changes might be indicated if they would:

1. better achieve program/project purposes;
2. address more critical or higher priority purposes within a goal plan;
3. produce desired results at less cost;
4. give more assurance of lasting institutional development upon U.S. withdrawal.

107 NARRATIVE FOR PART IV-A (Continue on form AID 1020-25 I):

Because this project assists the Ministry of Public Health in the broad scope of program development, no major change in purpose or design is anticipated. However, increasing emphasis will be placed on helping the Ministry develop an effective health planning capability, not only at the National level, but also at the provincial level. This will involve greater delegation of responsibility for planning to the provincial health officer, a process already underway.

Attention will be given to finding ways of more effectively influencing the development of better coordination within the Ministry and with other RTG activities.

Illustrative of such means will be a health manpower survey, which will help define role and utilization of present health manpower and project future personnel needs.

Activities supported by this project impinge in many ways on Thailand's changing health structure, and influence, through training and technical consultation, the attitudes of health officials toward the urgency of building a strong institutional service organization, relevant to overall economic and social progress of the country.

IV-B - PROPOSED ACTION

108 This project should be (Place an "X" in appropriate block(s)):

1. Continued as presently scheduled in PIP.	<input checked="" type="checkbox"/>
2. Continued with minor changes in the PIP, made at Mission level (not requiring submission of an amended PIP to AID/W).	
3. Continued with significant changes in the PIP (but not sufficient to require a revised PROP). A formally revised PIP will follow.	
4. Extended beyond its present schedule to (Date): Mo. ___ Day ___ Yr. ___. Explain in narrative, PROP will follow.	
5. Substantively revised. PROP will follow.	
6. Evaluated in depth to determine its effectiveness, future scope, and duration.	
7. Discontinued earlier than presently scheduled. Date recommended for termination: Mo. ___ Day ___ Yr. ___	
8. Other. Explain in narrative.	

109 NARRATIVE FOR PART IV-B: