DEVELOPMENT GUIDELINES OF PROACTIVE OPERATIONAL COMPETENCIES OF VILLAGE HEALTH VOLUNTEERS FOR COPING WITH AGING SOCIETY IN NAKHONPATHOM PROVINCE, THAILAND

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ABSTRACT
Village Health Volunteers have been intended to be leaders, who acquired socially acceptable, play a role in developing of primary cares and life being of people in their village or community. However, the assigned roles have been intended to handle with reactive operation preferably. Hench, the objective of this paper aims to propose development guideline of proactive operational competencies of village health volunteers for coping with aging society in Nakhon Pathom province. This research was employed qualitative research to diagnose the required indicators. Key informants including 1) Village Health Volunteer (VHV) 2) District Public Health Officer 3) Chief of Provincial Administrative Organizations 4) Director of National Health Security Office, District 5 5) Director of Primary Health Care Division, Ministry of Public Health, a total of 15 key informants. The results found 6 significant indicators that peculiarly related with consequence of development guidelines of proactive operational competencies of the volunteers which are 1) providing applicable training courses for the volunteers. 2) The volunteers should be equipped with contextually appropriate practices to effectively apply their skills in the field. 3) establishing of facilitated working environment for the volunteers, and besides, supportive of access to required data base and allocate adequate resources. 4) give the opportunity to the volunteers in order to express recommendations and participate with outright decision. Moreover, knowledge sharing among village health volunteers should be arranged. 5) frequently evaluating and tracking work progressions. 6) Establishing collaboration among public health units and other organizations for supporting the volunteer's proactive operations.
Keywords: Village Health Volunteers, Operational Competencies, Proactive Operation

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INTRODUCTION

One of the principal organizations tasked with advancing optimal health outcomes across all stages of life for Thai citizens is the Ministry of Public Health. The Ministry has instituted a comprehensive 20-year national strategic plan for public health spanning from 2017 to 2036, delineating aims such as fostering robust citizenry, ensuring contented officials, and fortifying sustainable health infrastructures (Policy and Planning Division, Ministry of Public Health, 2016). The primary objective for the period between 2022 and 2026 entails fortifying capacities by enhancing workforce structures, refining management protocols, bolstering disease surveillance and prevention mechanisms, and optimizing environmental health provisions, all while prioritizing the cultivation of individual agency in health management. As delineated in this national strategic blueprint for public health, the imperative developmental tasks of health-centric community and civil society networks have been delineated. Specifically, the blueprint underscores the expansion of village health volunteer (VHV) networks and the empowerment of local administrative organizations to assume pivotal roles in orchestrating and administering public health initiatives. These entities are entrusted with disseminating easily understandable health information, ensuring widespread access to health resources, and orchestrating diverse educational activities aimed at augmenting public health understanding.

Village health volunteers (VHVs) assume pivotal roles in the provision of community healthcare, as appointed representatives chosen from within each village by community stakeholders. They undergo structured training following the curriculum established by the Ministry of Public Health. Their core responsibilities encompass the facilitation of healthy practices as catalysts for behavioral change, dissemination of public health insights, orchestration and coordination of health-centric developmental initiatives, alongside the provision of diverse public health services. These services encompass health advocacy, disease surveillance and prevention, basic medical assistance within parameters delineated by the Ministry of Public Health, facilitation of patient referrals for rehabilitation services, and safeguarding consumer health interest. Moreover, VHVs exercise leadership in fostering community health and enhancing overall quality of life. Their leadership entails dispelling misconceptions, disseminating accurate health-related information, coordinating health services, mitigating community suffering, and serving as exemplars of health-conscious behavior within their respective communities (Department of Health Promotion, Ministry of Public Health, 1994).

Until the present, the Ministry of Public Health has persistently endeavored to enhance the roles of village health volunteers, necessitating them to assume proactive leadership roles, possess foundational knowledge concerning socio-economic and political issues, and adeptly identify and address various health concerns as well as formulating solutions. This initiative underscores four pivotal strategies: firstly, the proactive delivery of health promotion services by village health volunteers to ameliorate the well-being of community members, particularly the vulnerable; secondly, the establishment of collaborative frameworks among health network partners, facilitated by sub-district health plans as a solution tool through community forums or consensus building on public health management; thirdly, the empowerment of community members and village health volunteer organizations to spearhead the development of sub-district health promotion schemes and actively collaborate with sub-district health promoting hospitals; and fourthly, the establishment of social standard, achieved through community consensus, to address health challenges within the community (Department of Health Service Support, Ministry of Public Health, 2011)

However, the roles of sub-district health volunteers have predominantly remained passive, rather than proactive. Consequently, the Department of Health Service Support, under the auspices of the Ministry of Public Health, has introduced a significant policy aimed at invigorating the proactive engagement of village health volunteers nationwide in community

health management endeavors. Given a thorough appreciation of the aforementioned roles, the researchers are committed to exploring guidelines for the development of proactive operational competencies among village health volunteers, specifically tailored to address the challenges posed by an aging society in Nakhonpathom Province, Thailand.

LITERATURE REVIEWS

Concepts and Theories Concerning Proactive Operational Competencies of Village Health Volunteers

Competencies is defined as behavioral attributes stemming from a combination of knowledge, skills, and various distinguishing features, which collectively empower an individual to outperform peers within a given organizational context (Ratchaneewan Wanichtanom, 2005). Meanwhile, proactive work performance, or proactive work behavior, is characterized by performing extra role behavior that surpass one's designated duties (McAllister et al., 2007; Parker & Collins, 2010). Consequently, proactive operational competencies can be defined as surpassing peers in various functions beyond the confines of assigned responsibilities.

The subject of proactive operational competencies has garnered continuous attention from scholars and researchers alike due to their capacity to mirror an individual's proactive work behavior and their potential constructive influence on both individual and organizational outcomes (Ashford & Cummings, 1985; Covey, 2020; Bateman & Crant, 2000). The scholarly inquiry into proactive work behavior has witnessed a progressive trajectory, commencing with investigations into the intricate processes characterizing the initiation and influence exerted by workers upon others and colleagues (Kipnis et al., 1980). Additionally, scholarly endeavors have been dedicated to scrutinizing the feedback provided by workers concerning their individual work performance (Ashford, & Cummings, 1985). Subsequent to this, there was the implementation of both fundamentals of personal initiatives and the proactive paradigms which have led to the definition of proactive work behavior as patterns of individual work behaviors characterized by internal initiatives and the undertaking of supplementary role obligations exceeding one's prescribed duties (Frese et al., 1997; McAllister et al., 2007). Parker and Collins (2010) posited that proactive work behaviors are not contingent upon hierarchical levels of work, as they are extra-role behaviors exceeding stipulated responsibilities.

Nevertheless, extra-role work behaviors do not always correspond with proactive work behaviors. As posited by Parker and Collins (2010), proactive work behaviors are oriented towards effecting transformative changes within the organizational environment, while concurrently enhancing the competencies of both the individual and the organization such as heightening operational efficacy, augmenting sales figures, enhancing performance outcomes, and aligning with organizational objectives (Fay & Frese, 2001; Parker et al., 2006; Raabe et al., 2007).

Conclusively, individuals exhibiting proactive work behaviors demonstrate a proclivity towards undertaking endeavors aimed at enhancing the prevailing operational competencies of both themselves and the organization, or innovating novel opportunities within the prevailing organizational environment and resources. It is evident that individuals characterized by proactive operational performance diverge from passive counterparts by prioritizing the adaptation of their working styles to realize predetermined objectives, without reliance on opportunities or external support resources (Crant, 2000). Proactive operational behaviors are shaped by personal attributes such as proactivity, which motivate individuals to utilize available resources towards the attainment of prescribed work objectives. In other words, an individual endowed with proactive operational competencies is inclined towards initiating the exploration of innovative work methodologies for the realization of designated work goals (Bateman & Crant, 2000) or actively seeking new opportunities to augment their job values continuously. The literature review reveals that proactive operational behaviors yield favorable

outcomes for both individuals and organizations across diverse domains, including the enhancement of operational competencies for both individuals and organizations (Crant, 2000; Thompson, 2005; Grant et al., 2009; Travis, 2021), career achievement (Crant, 2000; Seibert et al., 2001), work attitudes, self-regulation, and a lucid understanding of roles and responsibilities within the workplace (Crant, 2000).

Previous studies on proactive work behavior have delineated two primary categories of factors influencing proactive operational competencies or proactive work behavior: Firstly, individual traits encompassing proactive personality (Crant, 2000; Parker et al., 2006; Travis, 2011), individual creativity (Crant, 2000; Frese, Kring, Soose, Zempel, 1996), self-efficacy (Crant, 2000), engagement in work, desire for achievement, appetite for feedback, and goal-oriented self-adjustment (Crant, 2000). Secondly, contextual factors within the work environment such as autonomy in work (Parker et al., 2006; Travis, 2021), organizational atmosphere (Parker et al., 2006), organizational culture, organizational norms, support from superiors, the establishment of a company as either privately held or publicly traded (Crant, 2000), and the presence of servant leadership (Travis, 2021).

In conclusion, the concept of "proactive operational competencies of village health volunteers" denotes the exceptional execution of additional duties beyond the prescribed responsibilities of a village health volunteer, surpassing the performance of peers or colleagues. The four observed variables, as categorized by the researchers, encompass creativity, voice behavior, proactive behavior, and job performance.

RESEARCH METHODOLOGY

This research was employed according to qualitative research to diagnose the required indicators. Theoretical sampling method was applied to select the key informants from 5 groups which are including of 1) Village Health Volunteer (VHV) 2) District Public Health Officer 3) Chief of Provincial Administrative Organization 4) Director of National Health Security Office, District 5 5) Director of Primary Health Care Division, Ministry of Public Health. The number of the key informants was observed by employing theoretical saturation theory, emerging issues (Hennink, & Kaiser, 2022) were adopted since adequate information entirely consolidated, a total of 15 key informants.

Semi-structured interview, was employed as a research tool, had to verified information accuracy by index of item-objective congruence (IOC) examination. The significant data were collected by using in-dept interview. Afterward, both of the collected data and related information from literature review were diagnosed by employing content analysis.

RESEARCH RESULTS

The development of proactive operational competencies of village health volunteers holds considerable significance in bolstering their capacity and efficacy in performing their duties.

Guidelines for Fostering Proactive Operational Competencies of Village Health Volunteers

1) Training: Implementation of tailored training programs for village health volunteers aimed at augmenting the knowledge, skills, and attitudes requisite for health-related roles, encompassing instruction on fundamental medical services, social operational functions, interpersonal communication, and other pertinent areas.

2) Practical Skill Enhancement: affording opportunities for village health volunteers to practice, apply their skills in real-world contexts, and fostering proficiency in diverse scenarios tailored to specific job demands, including communication, counselling, basic health screening procedures.

3) Establishment of Trust and Support: Cultivating a supportive environment to instill confidence among village health volunteers in their work endeavors, involving the provision of cohesive team dynamics and community support through counselling sessions, follow-up

sessions, positive reinforcement of their contributions and achievements, the provision of data resources and educational materials pertinent to proactive operational performance, as well as the allocation of essential resources such as tools, equipment, and transportation facilities.
4) Cultivating Unity and Teamwork: promoting collaborative endeavors among teams or groups by facilitating avenues for village health volunteers to express their perspectives and participate in the decision-making process, establishing knowledge-sharing sessions among village health volunteers to exchange experiences and desirable practices in order to foster cohesion and unity within the team.
5) The Assessment and Follow-up Session: Monitor the progress of village health volunteers in cultivating proactive operational competencies and incorporate tailored activities and assessment procedures to ascertain the development of their skills and knowledge acquisition. Conduct periodic evaluations of the performance of village health volunteers to discern areas of proficiency and opportunities for enhancement. Utilize the insights garnered from these assessments to refine projects aimed at augmenting the competencies of village health volunteers.
6) The Establishment of Collaborative Networks and Partnerships: Establish collaborative partnerships with health-related entities and other community organizations to bolster the proactive operation of village health volunteers. Establish the networks among village health volunteers to facilitate reciprocal information dissemination and mutual support mechanisms.

DISCUSSION & CONCLUSION

Development of the proactive operational competencies of village health volunteers necessitates a concerted focus on learning and applying skills in actual context, thereby bolstering their readiness and confidence. This approach ensures the attainment of desirable and sustainable work performance outcomes among village health volunteers. Additionally, the provision of resources, establishment of collaborative networks with other organizations, regular evaluation and monitoring the progress of their work performance constitute pivotal factors in effectively and sustainably augmenting competencies and enhancing the quality of public health-related endeavors within the community or society in the long run. The research results are consistent with the research of Jewjinda and Chalermnirundorn (2018) topic: The development of the village health volunteer (VHV) model through a participatory process. The research findings indicate that support should promote participatory processes and network development for the common good, as well as Yaebkay (2018) research on Factors affecting the performance of village health volunteers (VHVs) according to primary health care standards in Sukhothai province, found that actors affecting the performance of Village Health Volunteers (VHVs) according to primary health care standards are motivation to perform, role perception, and social support.

Research Recommendations

1) The Ministry of Public Health's priority is to continuously improve the proactive operational competencies of village health volunteers. This requires an ongoing process of revising and enhancing competency development guidelines to align with evolving needs and contextual circumstances.
2) The Ministry of Public Health is tasked with ensuring the continual implementation of developmental projects geared towards equipping village health volunteers with knowledge and skills essential for carrying out their proactive operational responsibilities proficiently.

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