LIVING WITH HYPERTENTION THROUGH A PARTICIPATORY LEARNING PROCESS: SELF-CARE DEVELOPMENT MODEL OF PATIENTS WITH ESSENTIAL HYPERTENSION

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Thesis Title : Living with Hypertension Through A Participatory Learning Process: Self-Care Development Model of Patients with **Essential Hypertension** : Penprakai Sroikham By Program : Master of Public Health (Health Systems Development) College of Public Health Thesis Advisor : Assistant Professor Nuntavarn Vichit-Vadakan, MS., M.P.H. Dr.P.H. Accepted by the College of Public Health, Chulalongkorn University, Bangkok Thailand in Partial Fulfillment of the Requirements for the Master's Degree Sandre Chimhangham, Dean of the College of Public Health (Samlee Plianbangchang, M.D., Dr.P.H.) THESIS COMMITTEE Chairperson (Tanawat Likitkererat, M.Sc.) Mahon Vicht- O. 11 Thesis Advisor (Assistant Professor Nuntavarn Vichit-Vadakan, MS., M.P.H. Dr.P.H.

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ABSTRACT

This project of self-care development model of hypertension patients by participatory learning and home visit aimed to examine an effect of the training program by participatory learning and home visit on self-care behaviours of essential hypertension patients. The study group was 31 essential hypertension patients who received medical treatment at Yasothon Hospital, Yasothon Province, and had characteristics according to the selection criteria. The study group received training by participatory learning approach as well as health advice and support from the project nurse during 3 home visits, which were separated by one-month interval. The control group consisted of 31 essential hypertension patients, who were under treatment at Khumkuankeaw Hospital, Yasothon Province and had similar characteristics as the study group. The control group received the routine health education program. The outcome evaluation was completed by comparing data of the study group with that of the control group and there were 3 phases of evaluation, that is, baseline, post intervention 1, and post intervention 2. The study employed questionnaires in collecting quantitative data of hypertension knowledge and self-care behaviours and used in-depth interview forms in collecting qualitative data about health status and self-care behaviours of the patients during the home visits. Number, percentage, paired t-test, and independent t-test were used in analysis of quantitative data while analysis of qualitative data was done by descriptive and content analysis.

The results showed that at post intervention 2, the average scores of hypertension knowledge and of self-care behaviours in the study group were significantly higher than those at baseline (p-value < 0.001). In addition, the mean scores of hypertension knowledge and self-care behaviours of essential hypertension patients in the study group were significantly higher than those in the control group at post intervention 1 (p-value < 0.001), and at post intervention 2 (p-value < 0.05).

It could be concluded from this study that participatory learning program and home visit by nurses helped essential hypertension patients to improve their knowledge about hypertension and correct self-care behaviour at greater extent than the patients who received the routine health education program. Nevertheless, future study should emphasise causes and symptoms of hypertension. In addition, a person responsible for running the participatory learning training program should practice until becoming skillful with all activity skills and should prepare a clear, correct and easy-to-understand content for the training. For target groups with elderly patients, learning process should be adjusted to emphasize more on speaking than writing and there should be a learning assistant available for maximum and complete learning. Finally, it is recommended that participatory learning activities be adopted in a group of essential hypertension patients who are not under medical treatment at the Hospital and patients with other non-communicable disease.

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