

Thai Women's Perceptions of the Causes of Hypertension Based on Age and Educational Level

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Abstract: To date, perceptions among hypertensive Thai women regarding causes of hypertension is poorly understood. Therefore, the purpose of this study was to examine, in 253 Thai women, their perceptions (external and internal) of the causes of their hypertension based on age and educational level. An external cause of illness was perceived to be the result of something from outside of the body (e.g. germs or viruses, diet, pollution, chance, other people and/or poor medical care), while an internal cause was considered the result of something within the body (e.g. heredity, stress, personal behavior, and/or state of mind). Data were obtained using a demographic data record and an illness perception scale. Data analysis included the use of descriptive statistics, ANOVA, MANOVA, MANCOVA, Wilks' lambda multivariate test, and the Scheffé test and/or Games-Howell test.

The results revealed Thai women with lower educational levels reported significantly greater external causes of their hypertension than did Thai women with higher levels of education. No differences were found between the external and internal causes of hypertension based on age. These findings suggest the need for educational health programs designed for hypertensive Thai women with low levels of education so they can better understand the cause of their illness and, thereby, increase their ability to better control their blood pressure.

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Key Words: Age; Educational level; Illness perceptions; Hypertension; Thai women

Introduction

Hypertension is a prevalent health problem throughout Thailand. Previous research has found only 13.9% of treated patients with hypertension maintain blood pressure readings of less than 140/90 mmHg.¹ According to Thailand's Ministry of Public Health,² approximately 57% of Thais, 60 years of age and older, are hypertensive. In addition, Thai women have been found to be 1.62 times more likely to have hypertension than Thai men.

Prior research has noted demographic factors, such as age and educational level, are related to blood pressure control. For example, a Portuguese study

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