

Phanthita Chalermphanaphan 2007: Quality of Life of Patients in Thai Traditional and Alternative Medicine Department at Chao Phya Adhaibhubej Hospital. Master of Science (Community Psychology), Major Field: Community Psychology, Department of Psychology. Thesis Advisor: Theerapat Wongkumsin, Ed.D. 162 pages.

The purposes of this study were 1) to study the level of self-care behavior, social support, and quality of life of patients at Thai traditional and alternative medicine department, 2) to compare patients at Thai traditional and alternative medicine department quality of life by personal factors, 3) to study the relationship between self-care behavior and quality of life of patients at Thai traditional and alternative medicine department, 4) to study the relationship between social support and quality of life of patients at Thai traditional and alternative medicine department. The samples were consisted of 280 patients at Thai traditional and alternative medicine department at Chao Phya Adhaibhubej hospital. Data were collected by using questionnaires and analyzed by using package computer program. Statistical procedures in this study were t-test, One-way ANOVA, Multiple Comparison (LSD) and Pearson's Coefficient. Statistical significant was set at .05 and .01.

The findings of this study indicated that 1) self-care behavior of patients at Thai traditional and alternative medicine department was in high-level, social support of patients at Thai traditional and alternative medicine department was in moderate-level and quality of life of patients at Thai traditional and alternative medicine department was in high-level, 2) patients at Thai traditional and alternative medicine department had difference level of gender, age, revenue average of family, occupation, symptoms, period of use Thai traditional medicine service, model of heal had non different quality of life and patients at Thai traditional and alternative medicine department had difference level of education and period of symptoms were different quality of life that were statistically significant at .05, 3) self-care behavior were positively correlated to quality of life at .01, 4) social support were positively correlated to quality of life at .01.

Phanthita Chalermphanaphan
Student's signature

T. Wongkumsin.
Thesis Advisor's signature

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