ABSTRACT

The objective of this study was to indentify the explanatory model (consisting of perceptions and beliefs about the causes of diabetes, symptoms, complications and severity, treatment and evaluations of diabetic patient) and life situations which enabled them to carry out a self-care medical regimen. The study was a case

study of diabetic patients in a community hospital. The methods for collecting data were indepth-interview and observations of the patients' home circumstances. Twenty patients were selected according to gender,

patients contained a basic knowledge of modern medicine. The patients believed that the causes of the disease were over eating of sweet foods and genetics. The symptoms were polyuria and tiredness; these were more severe if they had a high blood glucose level, if they had complications, if they refused to take medicine or failed to continue to see their doctors. Some patients did not undertake a self-care

The results showed that the explanatory model of all

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age and result of treatment.

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medical regimen these were patients who: 1. had severe symptoms 2. had economic problems 3. responsible for a family 4. were not supported by a spouse. On the other hand, the patients who are able to follow medical regimen should have characteristics opposed to those conditions mentioned earilier. The most important factors related to the problem of self-care practice, were poor economic situation and the occupational characteristics of the patients. Those patients, who had not family support (i.e. spouse) must choose between managing the illness and meeting other needs.

The study recommendations are that the advice for the diabetic patients should not have one standard form only but should consider the individual life situation of each patient. Self-care management regimens should be based on coordinated team work, preferably with a team consisting of a doctor, a nurse, a social worker and a nutritionist. This will ensure that the regimen is appropriate and relevant to the patient's unique circumstances and will enable the patient to manage his or her real life in the community.