on the Food Products Selecting Behavior among
Housewives in Banna District of Nakonnayok
Province

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ABSTRACT

Behavior in consuming substandard food products is an important health behavior problem that causes a number of serious diseases particularly cancer, a leading cause of death second only to heart disease. It has been assumed that such diseases are caused by accumulated toxic substances contained in the food consumed unintentionally due to a lack of knowledge and understanding of the danger of consuming substandard food products. For these reasons, the researcher is interested in studying the food products selection behavior of housewives in Banna District of Nakhon Nayok Province using a health education process, aiming at promoting the selection of quality food products. The study applied the health belief model, group process concept, and social support theory in organizing health education activities which include lecturing with slide and video presentation, demontration, practices in identifying proper

food labels, and supporting housewives to have suitable behavior in selecting food products for consumption through village health volunteers.

This study is quasi-experimental with a sample of 69 housewives for the experimental group and 65 housewives for the control group selected according to spicified criteria. The experimental group was given a health education program, while the control group was not.

The data collection was conducted twice, before and after the experimental intervention, eight weeks apart in both groups by using interviews of the group's knowledge and perception, and observing their behavior in selecting food products. It was found that after having participated in the health education program, the knowledge, perception and food selection behavior of the housewives in the experimental group were discriminating than those before the intervention, and rated significantly higher than those in the control group. In addition, their knowledge and perception were found to be positively associated with their behavior regarding the selection of standard food products. But their age, income and marital status had no statistical relationship with their food selection behavior, except for their educational level.

This study has shown that the health education program for housewives that applies the health belief model, group process concept, and social support theory can make housewives have proper behavior in selecting standard food products, correctly identifying and checking the "FDA" apporoved label, and noticing the food s color and odor each time prior to buying such food. Therefore, this health education program is deemed appropriate for application with other groups of housewives in other lacalities.