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APPENDICES

**Appendix A: Instrument employed in the training process
of the family healthcare leader training project**

The instruments used in the family healthcare leaders training process comprised of:

1. Training schedule
2. Presentation materials on
 - 2.1 A story of Yai Ma I and II.
 - 2.2 Diabetes knowledge and diabetic patient care for disease control.
3. Presentation materials on “Roles of family healthcare leaders as social support providers for diabetic patients”.
4. Materials for poster display.
5. The handbook of primary self-care practice for potential risk people and for diabetic patients.

1. Training schedule

Table A1 : Training schedule for family healthcare leaders as diabetic patient caretakers at Khaonoi public health center, Phuwiang district, Khon Kaen province, on 5 July 2000, at 8.00-16.30 hours

Time	Training topics	Speaker
8.00-8.30 hours	Registration	
8.30-9.00 hours	Opening the training session	Dr Tuen Saibuathong
9.00-9.30 hours	Pre-test	Prakongluke Jaklang and colleagues
9.30-9.50 hours	Self introduction	Prakongluke Jaklang and colleagues
9.50-10.10 hours	The story of Yai Ma I	Prakongluke Jaklang and colleagues
10.20-10.50 hours	Knowledge on diabetes	Prakongluke Jaklang and colleagues
10.50-12.00 hours	Knowledge on diabetic patient care for disease control	Prakongluke Jaklang and colleagues
12.00-13.00 hours	Lunch break	
13.00-14.00 hours	Demonstration and practice of exercise techniques for diabetic patients.	Permjit Pimdeet and colleagues
14.00-14.45 hours	Roles of family healthcare leaders in providing emotional, information, and instrumental support for diabetic patients.	Prakongluke Jaklang and colleagues
14.45-15.45 hours	Practice recording the form for social support provision for diabetic patients.	Prakongluke Jaklang and colleagues
15.45-16.00 hours	The story of Yai Ma II	Prakongluke Jaklang and colleagues
16.00-16.10 hours	Discussion of general problems	Prakongluke Jaklang and colleagues
16.10-16.40 hours	Post-test	Prakongluke Jaklang and colleagues
16.40 hours	Closing the training session	Dr Tuen Saibuathong

2. Presentation materials on

2.1 “A story of Yai Ma I”

Slide No.	Story detail
1.	At a village not very far from our village.
2.	There was one old lady named Yai Ma. She was 65 years old and was sick with diabetes for nearly 10 years.
3.	Her eyes were vague and she could not see clearly from both eyes.
4.	She also had problems with her legs and her knees and had to use a walking stick to help support the body while walking.
5.	Yai Ma lived with her daughter, her son-in-law and 3 grandchildren who were studying in secondary school level.
6.	Regarding medicinal intake, sometimes she did, sometimes she did not, sometimes she forgot, and sometimes she could not find the medicine bag.
7.	It was also difficult for her to see a doctor when she had to travel on a bus by herself, as her descendants were busy with their work.
8.	Rarely seeing a doctor, after a blood test, the doctor often said to her that “Your blood sugar level has highly increased”.
9.	Yai Ma could not do anything, just sighed deeply and smiled softly.
10.	After came back home, she felt pain and numbed at the legs but she did not know how to exercise and could not remember what the doctor taught her.
11.	Her descendants loved her so much and always bought some sweets and desserts for her. “I’ll take some Thai layer cakes and sapodilla, please” her descendants said to a seller. They are sweet and soft so that Grandma can eat them easily”
12.	Yai Ma was a very active person and liked to walk around the house. One day she caught her foot against a big stone. Her foot suddenly turned green.
13.	Two days later the sore turned into a serious wound. Yai Ma then bought hydrogen and applied it onto the wound “I bet it will get better soon”, she said.
14.	It had been two weeks and the wound was not cured. Yai Ma then went to see a doctor and the doctor said “Yai Ma, we need to cut-remove your toes”
15.	Do you know how we could help poor Yai Ma?

Presentation materials on “A story of Yai Ma II”

Slide No.	Story detail
1.	Today at the same village, not very far away from us.
2.	Khun Yai Ma with big smile, having her husband and her descendants to take care of.
3.	She never forgets to take medicines, as there is always someone there to remind her and prepare medicines for her.
4.	Her husband and her descendants advise her and take her to exercise everyday.
5.	Problems with leg and knee pain are getting better although she still has to use a walking stick.
6.	Yai Ma never misses medical appointments and there is always someone accompanying her for medical examination.
7.	Every time that her doctor told her a blood test result, she heard “Yai Ma, Your blood sugar level is normal”.
8.	Her husband and her descendants also take care of her diets.
9.	They prepare the proper diets for her as been advised by the doctor.
10.	They also look after her feet and her legs and will not let her lose her fingers or toes again.
11.	All these happen because her husband and descendants know about proper diabetic care practices.
12.	Therefore, Yai Ma’s life can be happy though she is still a diabetic patient.

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control

Picture	Description
Large strip with the word "DIABETES" on it.	Diabetes is a chronic disease when the body cannot metabolize sugar in a normal rate. The blood sugar level then rises and is excreted via urination. High sugar content in urine is common in diabetic patients.
Children and adults who were diabetic patients.	<p>There are two types of diabetes:</p> <ol style="list-style-type: none"> 1. Insulin dependent diabetes is commonly found in children and people with ages of younger than 20 years old. Pancreases of the patients in this group cannot produce insulin. 2. Non-insulin dependent diabetes is commonly found in adults with ages of more than 40 years old. The pancreases can somewhat produce insulin but not sufficient to supply the body.
Six causal factors of diabetes.	<p>Casual factors: Diabetes occurs due to abnormality of the pancreas, which functions in producing insulin hormone that helps facilitating sugar metabolism in the body. In diabetic patients, the pancreas cannot produce insulin or produce in amount that is inadequate to the body's need. However, related casual factors may be summarized as in the followings:</p> <ol style="list-style-type: none"> 1. Genetics, diabetes can pass on from parents to their children. 2. Obesity. 3. Exposures to certain types of drugs or chemicals such as regular and prolonged medicinal intake, alcohol intake, etc. 4. Nutrition deficiency. 5. High number of pregnancy. 6. Other unknown causes.

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

Picture	Description
Diabetic patients and common symptoms	<p>Common symptoms of diabetes</p> <ol style="list-style-type: none"> 1. Frequent urination. 2. Thirsty. 3. Eat large amounts of food but losing weight. 4. Fatigue and weariness 5. Wounds are difficult to be cured. 6. Itchy at skin and genital areas.
Abnormal blood sugar level	<p>A person is diagnosed with diabetes when a test for fasting blood sugar level indicates a blood sugar level of above 140 mg%.</p>
Secondary disease diabetes	<p>Most common secondary disease of diabetes are:</p> <ol style="list-style-type: none"> 1. Acute secondary diseases include various kinds of infection such as wounds, abscesses, and tuberculosis including possible unconsciousness due to excessively high or low blood sugar level. 2. Chronic secondary diseases are often found after being diabetic for a long period of time (10 years or longer). Those diseases include cardiovascular disease, which could cause paralysis; eye disease such as vagueness, cataracts, and blindness; kidney disease, heart disease, inflammation of nerve cell edges, which could cause paralytic condition to fingers and tiptoes.
Six principles for diabetes control	<p>Principles of diabetes control</p> <p>There is a need to control diabetes in order for the patients to live normal lives.</p> <ol style="list-style-type: none"> 1. Dietary control 2. Exercise

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

Picture	Description
	3. Medicine 4. Skin and foot care 5. Follow up 6. prevention of complication and basic care
Weighing foods	1. Dietary control Its purposes are to control levels of sugar and fat in blood and to control the body weight. Dietary control involves substitution of diets, restriction of amounts of food intake for each meal, taking variety of foods to cover every nutritious group as well as in suitable and sufficient quantities for the body need.
Protein diets including meats, eggs, milk, green vegetables, and fruits with no or little sweet taste.	Suitable diets for diabetic patients are nutritious foods such as meats, eggs, and milk, especially green vegetables that contain high fibers which will help reduce the rate of sugar absorption into the body.
Carbohydrate diets including rice, bread, taro, and potato.	Regarding unsuitable diets for diabetic patients, intake of diets with high carbohydrate content and all types of rice should be reduced.
Sweets, durian, sapodilla, fruits in syrup, and canned fruits.	Prohibited diets for diabetic patients are all types of sweets, soft drinks, foods with high sugar content, highly sweet fruits such as durian, longan, sapodilla as well as syrup and canned fruits.
Whisky, beer, cigarette, tea, and	Diabetic patients should stop smoking and stop drinking all types of alcohol including whisky and beer as well as drinks that

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

Picture	Description
coffee.	deteriorate the body such as tea and coffee.
A party picture	In case of having a party or eating out, diabetic patients should eat in similar manner as being at home both in terms of quantity and menus.
Exercise picture I	<p>1. Exercise</p> <p>Benefits: Exercise helps to increase the rate of sugar metabolism within the body, reducing body weight, and helps reducing fat levels in blood.</p>
Exercise picture II	<p>Exercise principles</p> <ol style="list-style-type: none"> 2. Should practice exercising regularly at least 3 times a week. 3. Each exercise session should take no less than 15-20 minutes.
Pictures of people running, walking, and working-out.	<p>Suitable exercise techniques</p> <p>Suitable exercise techniques for diabetic patients are walking, jogging, and body-parts workout.</p>
Pictures of exhausted persons after exerciser work.	During exercise session, if having the following signs: chest pain, abnormal panting, headache, vague eyes, dizziness, and faintness; diabetic patients should cease the exercise activity immediately.
Pancreas, medicines, and insulin.	<p>4. Medicine</p> <p>Benefits: Medicines will help activating pancreas to produce more insulin and reducing absorption of food and water into the body leading to reduction of blood sugar levels.</p>
Picture of persons taking medicines	<p>Principles of medicinal intake</p> <ul style="list-style-type: none"> • Take medicines with proper types, doses, and times as

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

Picture	Description
	<p>prescribed by a doctor.</p> <ul style="list-style-type: none"> • Before meal medicines should be taken 30 minutes earlier. • After meal medicines should be taken immediately after meal. • Any change of doses is strictly prohibited unless recommended by a doctor.
<p>Picture of a patient being examined by a medical doctor and a public health officer.</p>	<p>4. Follow up</p> <p>Benefits of follow up are as follows:</p> <ol style="list-style-type: none"> 1. Any abnormal symptoms will be detected by a doctor during medical follow up and can be treated promptly. 2. Diabetic patients can ask for advice from a doctor or from medical officers regarding disease control behaviours. 3. There is an opportunity to get blood and urine tests and any change in the results will help the doctor to prescribe a new medicine appropriately with the blood sugar level.
<p>A phrase reads “Restrict water and food after midnight every time prior to going for medical examination”.</p>	<p>Principles of going for follow up</p> <ol style="list-style-type: none"> 1. Should go for medical check for every appointment. If unable to go, should inform the doctor in advance. 2. Should restrict water and food every time before going for medical examination. 3. If diabetic patient needs to travel a far distance, he/she should take the following materials with them: the diabetic patient card; diabetic control medicines; and sugar, candies or toffees.

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

Picture	Description
Picture of a patient taking a shower.	<p>5. Skin and foot care</p> <p>General skin care</p> <ol style="list-style-type: none"> 1. Take showers twice a day using mild soap and take special care at inner joint areas such as armpits, between the legs, and genitals. 2. Wear clean clothes and avoid scratching or fiercely rubbing the skin.
Picture of a diabetic patient's feet	<p>Foot care</p> <p>Since the feet normally receive little blood circulation, most patients feel paralytic at finger and toe tips, which are easily wounded but difficult to treat. Primary foot care practices are as follows:</p> <ol style="list-style-type: none"> 1. Clean the feet with water and soap and wipe to dry everyday. 2. Cut finger and toe nails in a straight shape. 3. Wear clean socks without fierce seams. 4. Wear soft shoes, fitted well with the feet and does not squeeze the feet. 5. Do not cut skin warts or foot corns by a knife. 6. Exercise the feet by walking or stretching.

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

6. Prevention and basic care for the complication

Picture	Potential symptoms	Patient care at home	Treatment services at hospitals or public health centers
A person getting faintness and coma.	Dizziness, sweating, thirst, faintness, or possible unconsciousness	- Provide syrup, sweet drinks or toffees. - If unconscious, deliver to a hospital or a public health center immediately.	If the symptoms are recovered, should consult a doctor to adjust medicine doses.
A vomiting person with a glass and a bottle of water.	Frequent urination, thirst, and fatigue. Severe signs include vomiting and possible unconsciousness	- Provide a lot of water and reduce amounts of food and sugar intake. - If unconscious, deliver to a hospital immediately.	If the symptoms persist, see a doctor for adjustment of medicine doses.
Diabetic patients with vague eyes.	The eyes become vague and suddenly blind.	- Should reduce amounts of food and sugar intake. - If the eyes suddenly turn blind, take the patient to a doctor.	Check the eyes regularly on an annual basis.
Hands and feet of diabetic patients.	Feel numbed or fiercely pained at finger and toe tips.	- Soak hands and feet in warm water every day. - If the symptoms occur with the feet, avoid getting wounded at the feet and wear	If the symptoms persist or if getting wounded.

2.2 Presentation materials on diabetes knowledge and diabetic patient care for disease control (cont.)

6. Prevention and basic care for the complication

Picture	Potential symptoms	Patient care at home	Treatment services at hospitals or public health centers
		comfortable and proper shoes. - Exercise the feet every day.	
A diabetic patient covering the stomach with hands.	Constipation and difficult defecation.	- Eat more fruits and vegetables. - Practice usual defecation at every day. - Exercise regularly everyday.	If constipation persist longer than 1 week and primary care does not help.
A patient with small wounds. A patient with large wounds.	Wounds at skin and foot areas.	- In case of small and shallow wounds, clean with warm boiled water twice a day. - For large and deep wounds.	- If not better within 2-3 days, should see a doctor or public health officers. - Should see a doctor immediately.
Diabetic patients with abscesses or skin infection.	Feeling painful, swollen, red, and burn at the skin areas.	- Apply warm water switching with cold water. - Keep the areas clean.	If not better in 2-3 days, should see a doctor or public health officers.

3. Presentation materials on the roles of family healthcare leaders as social support providers for diabetic patients.

Provision of social supports for diabetic patients within the family of the healthcare leaders could be through 3 aspects including emotional support, information support, and instrumental support. There are certain criteria set up as a guideline for social support provision in each aspect as the followings:

- 1. Emotional support:** Family healthcare leaders can provide support through;
 - 1.1 Providing care, asking and finding out about the symptoms of the patient regularly at least once a week.
 - 1.2 Showing love and warmness for diabetic patients.
 - 1.3 Encouraging and complimenting when diabetic patients practice self-care correctly and appropriately for a disease control.
 - 1.4 Listening to problems and providing advice on diabetes for the patients without losing interest and keenness.

- 2. Information supports** are such as provision of knowledge, advice, and information on self-care practice for disease control to diabetic patients which include dietary intake, exercise, medicinal intake, skin and foot care, medical examination, and observation of secondary disease and primary care as following details:

Dietary control: Family healthcare leaders are to inform the patients at least once a month about the benefits of dietary control, about suitable types of foods they should take, about the types of foods that should be restricted or avoided, and about appropriate quantities of food intake.

Exercise: To advise the patients at least once a month about the benefits of exercise activities, exercise principles and proper exercise techniques for diabetic patients.

Medicinae: To advise the patients at least once a month about the benefits and side effects of the medicines and about correct methods of medicinal intake.

Follow up : To advise the patients at least once a month about the benefits of the medical check up and how to prepare themselves for check up.

Skin and foot care: To advice about the benefits and methods of skin and foot care including foot exercise techniques for the patients at least once a month.

Prevention and basic care for the complication : To advise the patients at least once a month about potential symptoms that should be monitored including their primary care practices at home before going to a public health office or a hospital.

3. Instrumental support

Dietary control

- Prepare proper types of diets for the patients; the criteria: on a daily basis.
- Determine suitable amounts of foods for the patients according to the daily energy requirement and according to the daily blood sugar level; the criteria: on a daily basis.

Exercise

- Take care and ensure that the patients practice exercise according to the medical criteria of at least three times a week.

Medicinae

- Take care and ensure that the patients take proper medicines; the criteria: the medical treatment plan.

Skin and foot care

- Take care and ensure the patients clean their body according to criteria on a daily basis.
- Look after the skin and feet regarding the criteria on a daily basis.
- Take care and ensure the patients exercise their feet according to the criteria on a daily basis.

Follow up

- Take care and accompany the patients for follow up; the criteria as appointed by a public health officer or a doctor.
- Ensure that there is preparation for medical check up; the criteria: food and water restriction after mid night of the night before.

Prevention and basic care for the complication

- Provide primary care when the patients develop abnormal symptoms; the criteria: every time the patients have abnormal symptoms.

7. Materials for poster display

Poster 1: Five essential groups of diets.

Poster 2: Diets restricted for diabetic patients (including examples of actual foods)

- All types of sugar including honey.
- Various sweet drinks, juices, soft drinks, ice coffee and sweet fresh milk.
- Diets with high sugar content such as jam, jelly, condensed milk, toffee, chocolate, candy, fruit candy, fruits in syrup.
- Various sweets and desserts such as Thong Yip, Thong Yod, Foi Thong, Thai pudding, custard, sticky rice with sweet topping, and caramel.

- Dried fruits such as banana, prunes, raisins, longan, and so on.
- Canned fruits and fruits in syrup such as lychees, longans, and rambutans.
- Highly sweet fruits such as durian, jack fruits, custard apples, sugar cane, sapodillas, grapes, and lychees.
- Various kinds of sweet bread, cream filling bread, cookies, and pies.
- Drinks with added sugar such as tea, coffee, and alcohol drinks such as whiskies, beers, and wines.

Poster 3: Diets allowed for diabetic patients with limited amounts of intake (including illustration of actual diet examples)

1. Some types of fruits such as oranges, rambutans, mangoosteens, bananas, guavas, pineapples, and ripe mangoes.
2. Carbohydrate diets such as rice, sticky rice, corn, bread, all types of noodles, pasta, potatoes, and nuts and grains such as cashew nuts and various beans.
3. Diets with high fat such as rice with pork leg, oily rice with chicken, stir-fried or deep-fried foods, and foods with coconut milk.
4. Vegetables with high carbohydrate content such as turnips, pumpkins, carrots, onions, margosa, roselle, bean sprouts, green beans, and cabbage.

Poster 4: Diets that is not restricted for diabetic patients (including actual examples of vegetables)

- All types of vegetables (except the ones with high carbohydrate content).

Poster 5: Examples of proper quantities of foods for diabetic patients according to their body conditions and their energy requirements.

1. People who use great extent of labors such as farming, lifting, or practicing a lot of exercise should take as in the followings for each meal:

- 5-6 standard spoons of steam rice (5-6 handfuls of sticky rice).
- 4-5 Tablespoons of meat or bean curd.
- 4-5 Tablespoons of fat contained in the food.
- Vegetables (as much as required).
- 2 fruits (such as orange)

2. People who use moderate labors such as working in an office, a teacher, a busy housewife should take as in the followings for each meal:

- 4-5 standard spoons of steam rice (4-5 handfuls of sticky rice).
- 4 Tablespoons of meat or bean curd.
- 1 Tablespoon of fat contained in the food.

- Vegetables (as much as required).
 - 1 fruit (such as orange)
3. People who use low level of energy, who are obese, and a doctor recommended weight reduction should take as follows for each meal:
- 2-3 standard spoons of steam rice (2-3 handfuls of sticky rice).
 - 4 Tablespoons of lean meat or bean curd.
 - 1 Teaspoon of cooking oil.
 - Vegetables (as much as required).
 - 1 fruit (such as oranges)

Remarks: 1 standard spoon of steamed rice is equivalent to 1 handful of sticky rice.

Poster 6: Various exercise techniques for diabetic patients (with demonstration)

1. Walking for 30 minutes – 1 hour a day.
2. Stepping up a stair using foot tips.
3. Stretching up chest muscles.
4. Exercise on a chair.
5. Knee bending.
6. Heel lifting.
7. Foot swinging.
8. Foot circles.

Knee exercise

Pose 1: Sit on a chair with both legs down, slowly lift one leg up until the knee is straight, and then lower the leg down. Do the same for the other leg.

Pose 2: Stand up straight (using a table edge for support), slowly bend one leg in backward direction to its possible maximum bending, and then release to its original position. Do the same procedure for the other leg.

Board 7: Foot exercise (with demonstration)

Starting position: Sit straight on a chair with both feet on the floor and with the back not touching the backrest

Pose 1: Bend and stretch the toes (Repeat 8-12 times).

Tilt the toes of both feet upward then bend downward to the forefoot. Repeat up and down without removing the soles from the ground.

Pose 2: Standing up on the soles-on the foot tips (Repeat 8-12 times).

1. Tilt the foot tips away from the floor to their highest possible position with the soles still on the floor.
2. Stand on the foot tips by lifting up the soles to their highest possible position.
3. Repeat by switching between 1 and 2.

Pose 3: Foot tip circles

1. Keep both soles on the ground.

2. Tilt both foot tips upward and then circulate the foot tips in outwards or clockwise direction (Repeat 8-12 times).
3. Tilt the foot tips upwards and then circulate the foot tips inwards or in anti-clockwise direction (Repeat 8-12 times).

Pose 4: Sole circles (Repeat 8-12 times).

Keep the tiptoes on the floor, lift the soles up and circulate at their widest possible circle and then do the same for the opposite direction.

Pose 5: Up and down stretching.

1. Lift both legs parallel to the ground and keep the knee straight.
2. Tilt the foot tips upwards as much as possible then at the same time bend the tiptoes downwards as much as possible (do it slowly).
3. Do the same for the other leg.
4. Then do both legs at the same time.

Pose 6: Leg stretching with foot circles (Do 8-12 times for each leg).

1. Stretch the legs straight and then lift a leg up until it is parallel to the ground (one leg at a time)
2. Move the foot tip in circular direction similar to writing a big O in the air and then move in the opposite direction.
3. Repeat the same steps for the other leg.

**Appendix B: Instrument employed in the evaluation process
of the family healthcare leader training project**

The instrument used in the evaluation process of the family healthcare leader training project comprised of :

1. Questionnaire for interviewing of the family healthcare leaders.
 - Knowledge on diabetes and diabetic patient care for the disease control.
 - Attitudes of the family healthcare leaders towards being social support provider for diabetic patients.

2. Questionnaire for interviewing of the diabetic patients about social support received from the family healthcare leaders.

3. Record form of social support provision for diabetic patients by the family healthcare leaders.

No. of Questionnaire.....

Questionnaire

For family healthcare leaders

A training program for family healthcare leaders on social support for non-insulin independent diabetic patient care in Khaonoi sub-district, Phuwiang district, Khon Kaen province

This questionnaire comprises of 3 parts as follows:

Part 1 General and demographic information of the interviewee.

Part 2 Knowledge of family healthcare leaders on diabetes and diabetic patient care.

Part 3 Attitudes of family healthcare leaders towards being social support providers for diabetic patients.

Name of interviewee:.....Date (D/M/Y):.....

Starting time:.....Finishing time:

The total interview time:hours.....minutes.

Interviewee code:.....Address number:.....Moo.....

Khaonoi sub-district, Phuwiang district, Khon Kaen province.

FHL

Part 1: General and demographic data of the family healthcare leaders

		For the author's use
1. Gender	<input type="checkbox"/> 1. Male <input type="checkbox"/> 2. Female	SEX <input type="checkbox"/>
2. You are.....years old.		AGE <input type="checkbox"/>
3. What is the highest education level you have completed?	<input type="checkbox"/> 1. Lower than primary school level <input type="checkbox"/> 2. Primary School <input type="checkbox"/> 3. Junior High School <input type="checkbox"/> 4. Senior High School <input type="checkbox"/> 5. Diploma <input type="checkbox"/> 6. Bachelor degree <input type="checkbox"/> 7. Higher than a Bachelor degree	EDU <input type="checkbox"/>
4. Marital status	<input type="checkbox"/> 1. Single <input type="checkbox"/> 2. Married <input type="checkbox"/> 3. Widowed <input type="checkbox"/> 4. Divorced/ Separated	MST <input type="checkbox"/>
5. What is your relationship with diabetic patients? (e.g. husband, wife, children, son/daughter in law etc.)		RELA <input type="checkbox"/>

Part 2: Data on knowledge of the family healthcare leaders**2.1 Knowledge on diabetes**

For the author's use

1. How is the medical test result of the blood sugar level of a diabetic patient different from that of a normal person?

K1

- 1. Higher than normal.
- 2. Lower than normal.
- 3. Fluctuating and inconstant.
- 4. Do not know.

2. What are common symptoms of diabetes?

K2

- 1. Eat large amount of food and frequently but losing weight.
- 2. Fatigue and weariness.
- 3. Both answer 1 and 2 are correct.
- 4. Do not know.

3. At what blood sugar level a normal person should have before breakfast?

K3

- 1. Below 80 mg %.
- 2. 80 – 120 mg %.
- 3. Above 140 mg %.
- 4. Do not know.

4. By what means diabetes can be treated?

K4

- 1. Dietary control and exercise.
- 2. Intake of tablet medicines and injection.
- 3. Both 1 and 2 are correct.
- 4. Do not know.

5. What are the effects of diabetic treatment medicine?

K5

- 1. Lessen or eliminate weariness.
- 2. Reducing blood sugar level.
- 3. Secreting urine.
- 4. Do not know.

6. What are potential secondary diseases or symptoms often found in diabetic patients?

K6

- 1. High blood sugar level.
- 2. Low blood sugar level.
- 3. Both 1 and 2 are correct.
- 4. Do not know.

2.2 Knowledge about diabetic patient care for the disease control.

1. Dietary control

7. How is dietary control beneficial to diabetic patients? ?

K7

- 1. Helps to maintain the blood sugar level.
- 2. Helps to lose weight

- 3. Helps to reduce fat level in blood.
- 4. All of the above answers are correct.
- 5. Do not know.

8. What types of diets are restricted for diabetic patients?

K8

- 1. Diets with high carbohydrates.
- 2. Diets with high sugar content.
- 3. Diets with high fat content.
- 4. All of the above answers are correct.
- 5. Do not know.

9. What types of diets are unrestricted for diabetic patients?

K9

- 1. Vegetables.
- 2. Fish and chicken.
- 3. Fruits with low sweet taste.
- 4. All of the above answers are correct.
- 5. Do not know.

10. Why are diets with high carbohydrate content restricted for diabetic patients?

K10

- 1. Because carbohydrates will be converted into fats.
- 2. Because carbohydrates will be converted into sugars leading to an increase in blood sugar level.
- 3. Because it is difficult to digest carbohydrates.
- 4. Do not know.

11. What types of cooking oil are suitable for diabetic patients?

K11

- 1. Vegetable oil extracted from rice bland.
- 2. Pork fat.
- 3. Palm oil.
- 4. All of the above answers are correct.
- 5. Do not know.

12. What types of drinks are suitable for diabetic patients?

K12

- 1. Whiskies and beers
- 2. Soft drinks
- 3. Ginger drink with no sweet taste
- 4. Coffee
- 5. Do not know.

13. Which of the following desserts are unsuitable for diabetic patients?

K13

- 1. Sweet Singaporean starch in coconut milk (Lod-chong-sing-ka-po).
- 2. Deep fried banana/sweet potatoes.
- 3. Sticky rice with sweet toppings.
- 4. All of the above answers are correct.
- 5. Do not know.

2. Exercise

14. How is exercise beneficial to diabetic patients?

K14

- 1. The body could better metabolise blood sugar.
- 2. Help facilitating blood circulation.
- 3. Helps to keep the body strong.
- 4. All of the above answers are correct.
- 5. Do not know.

15. How long should diabetic patients exercise for each session?

K15

- 1. 15 minutes – 1 hour.
- 2. Exercise until getting a lot of sweat in order to take a lot of rest afterwards.
- 3. Longer than 1 hour.
- 4. Do not know.

16. What are proper exercise activities for diabetic patients?

K16

- 1. Jogging/ Running.
- 2. Walking.
- 3. Aerobics.
- 4. All of the above answers are correct.
- 5. Do not know.

3. Medicinae

For the author's use

17. What are the effects properties of the diabetic pills taken by the patients to control diabetes?

K17

- 1. Help to reduce blood sugar level.
- 2. Help to completely cure diabetes.
- 3. Help to reduce craving for food.
- 4. Help to nourish the body.
- 5. Do not know.

18. How long before meal should diabetic pills (before meal type) be taken?

K18

- 1. Immediately
- 2. 30 minutes
- 3. 1 hour
- 4. Do not know.

4. Skin and foot care

19. What types of shoes are suitable for diabetic patients?

K19

- 1. Shoes with good ventilation.
- 2. Shoes that well cover the foot.
- 3. Shoes that perfectly fit with the foot.
- 4. All of the above answers are correct.
- 5. Do not know.

20. How should foot exercise for diabetic patients be performed?

K20

- 1. Bend the ankle in up and down direction.
- 2. Sit and swing the feet backward and forward.
- 3. Move the foot tip in circular motion.
- 4. All of the above answers are correct.
- 5. Do not know.

21. How should diabetic patients cut their foot nails?

K21

- 1. Cut straight.
- 2. Cut the edge into circular shape
- 3. Allow the foot nails to grow long.
- 4 Do not know.

5. Follow up

22. What are the benefits of turning up for medical examination appointment?

K22

- 1. Knowing the progress of the existing disease.
- 2. Obtaining blood and urine tests.
- 3. Obtaining a new set of medicines.
- 4. All of the above answers are correct.
- 5. Do not know.

6. Prevention and basic care for the complication

23. What should you do if the diabetic patients feel numbed at the foot?

K23

- 1. Soak the foot in warm water.
- 2. Place a hot water bag on the foot.
- 3. Soak the foot in cold water.
- 4. All of the above answers are correct.
- 5. Do not know.

24. What is primary care practice for the patient with low blood sugar level?

K24

- 1. Give sweet candies or sweet drink immediately.
- 2. Take the patient to a doctor immediately.
- 3. Taking rest is adequate.
- 4. Do not know.

25. What would be common signs found in the diabetic patients with exceedingly high blood sugar level?

K25

- 1. Sweating, having a cold body, heart throbbing, and fainting.
- 2. Very thirsty, dry mouth and throat, and frequent urination.
- 3. Secreting a small amount of urine.
- 4. Do not know.

26. What is the basic care for the diabetic patients with high blood sugar level?

K26

- 1. Give a lot of water.
- 2. Immediately restrict types and quantities of diets.
- 3. Both 1 and 2 are correct.
- 4. Do not know.

Part 4 Attitudes towards being social support provider for diabetic patients.

Attitudes	Agree	Disagree	For the author's use
Attitudes towards diabetes			
1. A person develops diabetes because of his/her karma from the previous life.			A1
2. Children whose parents are diabetic patients could later develop diabetes.			A2
3. A person once develops diabetes could acquire several other co-diseases.			A3
Attitudes towards diabetic patient care for disease control			
1. Dietary control			
1.1 Diet restriction will not help the patients in controlling their blood sugar level.			A4
1.2 You are content to provide dietary advice for diabetic patients.			A5
2. Exercise			
2.1 You are keen to provide advice on exercise techniques for diabetic patients.			A6
2.2 Diabetic patients should exercise everyday.			A7
2.3 Exercise is not necessary for diabetic patients.			A8
3. Medicine			
3.1 Regular medicinal intake will help diabetic patients in controlling their blood sugar level.			A9
3.2 Advising the patients to regularly take medicines is essential.			A10
3.3 You think diabetic patients can adjust a dose of medicines as they wish.			A11

Part 4 Attitudes towards being social support provider for diabetic patients.

(cont.)

Attitudes	Agree	Disagree	For the author's use
3.4 If the patients take medicines regularly but having abnormal symptoms, you would take them to a doctor.			A12
3.5 You are content to ensure that diabetic patients receive medicines as prescribed by a doctor.			A13
4. Skin and foot care 4.1 Keeping the skin clean will lessen skin infection of diabetic patients. 4.2 Diabetic patients do not need to wear shoes regularly. 4.3 Foot exercise will possibly cause pain and paralysis to the foot.			A14 A15 A16
5. Follow up 5.1 Diabetic patients do not need to turn up for every medical appointment. 5.2 You are content to take the patient for every medical examination as appointed. 5.3 Turning up for medical examination appointment allows you to know the treatment results of the diabetic patients.			A17 A18 A19
6. Prevention and basic care for the complication 6.1 Prevention of abnormal symptoms is the responsibility of a doctor only.			A20

No. of Questionnaire.....

Questionnaire

For Diabetic Patients

A training program for family healthcare leaders on social support for non-insulin independent diabetic patient care in Khaonoi sub-district, Phuwiang district, Khon Kaen province

This questionnaire comprises of 2 parts as follows:

Part 1 General and demographic information of the interviewee.

Part 2 Social support received of the diabetic patients from the family healthcare leaders.

Name of Interviewee.....Date (D/M/Y).....

Starting Time:..... Finishing time:.....

Total Interview Time:.....Hours.....Minutes.....

Interviewee Code:..... Address Number:..... Moo.....

Khaonoi Sub-District, Phuwiang District, Khon Kaen Province.

PT

Part 1 : General and Demographic data of the diabetic patients

1. Gender	For the author's use
1. Male	SEX <input type="checkbox"/>
2. Female	AGE <input type="checkbox"/>
2. You are.....years old.	
3. What is your highest education level you have completed?	EDU <input type="checkbox"/>
1. Lower than primary school level	
2. Primary School	
3. Junior High school	
4. Senior High School	
5. Diploma	
6. Bachelor Degree	
7. Higher than a Bachelor Degree	
4. Marital status	MST <input type="checkbox"/>
1. Single	
2. Married	
3. Widowed	
4. Divorced/ Separated	
5. Occupation (as your main income)	OCC <input type="checkbox"/>
1. Agricultures	
2. Labour	
3. Trader	
4. Government officer, state enterprise	
5. Others, please specify.....	
6. You have developed diabetes for.....years	ILYRS <input type="checkbox"/>
7. A distance from your home to Phuwiang Hospital.....km (Approximately)	DIST <input type="checkbox"/>
8. What are the complications you have developed at the present.....	COMP <input type="checkbox"/>

Part 2 : Social support reception of diabetic patients from the family healthcare leaders (FHLS) within the past 1 month.

Activities with social support provision from family healthcare leaders (FHLS)	No social support receptions	Received social support from FHLS	Number of social support received	For the author's use
2.1 Emotional supports				
2.1.1 FHLS provided care, asked and found out about your symptoms regularly at least once a week.				S1
2.1.2 FHLS listened to your problems and provided you an advice.				S2
2.1.3 FHLS showed you love and warmness and encouraged you in disease control.				S3
2.2 Information supports on disease control				
2.2.1 Dietary Control				
1. FHLS informed you about the benefits of dietary control.				S4
2. FHLS advised you about suitable types of food that you should take.				S5
3. FHLS advised you about the types of food that should be restricted or avoided.				S6
4. FHLS advised you about appropriate quantity of rice that you should take per each meal.				S7

Part 2 : Social support received of diabetic patients from the family healthcare leaders within the past 1 month (cont.)

Activities with social support provision from family healthcare leaders (FHLSS)	No social support received	Received social support from FHLS	Number of social support received	For the author's use
5. FHLS advised you about the types of drinks that should be avoided.				S8
6. FHLS advised you about the types of fruits that should be avoided.				S9
2.2.2 Medicine				
1. FHLS advised you about the benefits of diabetic control medicines.				S10
2. FHLS advised you to take medicine before or after meal 30 minutes.				S11
3. FHLS advised you about the side effects of the medicines.				S12
2.2.3 Exercise				
1. FHLS advised you about the benefits of exercise activities.				S13
2. FHLS advised you about proper exercise techniques.				S14
3. FHLS advised you about the proper time for each exercise session.				S15

Part 2 : Social support received of diabetic patients from the family healthcare leaders within the past 1 month (cont.)

Activities with social support provision from family healthcare leaders (FHLSS)	No social support received	Received social support from FHLS	Number of social support received	For the author's use
2.2.4 Skin and foot care				
1. FHLS advised you about the methods of skin and foot cleaning.				S16
2. FHLS advised you about foot exercise techniques.				S17
2.2.5 Follow up				
1. FHLS advised you about the benefits of turning up for medical examination appointment.				S18
2. FHLS advised you about how to prepare for medical check-up.				S19
3. FHLS advised you to turn up for every medical examination appointment.				S20
2.2.6 Prevention and basic care for the complications				
1. FHLS advised you about potential symptoms of complications that might be found.				S21

Part 2 : Social support received of diabetic patients from the family healthcare leaders within the past 1 month (cont.)

Activities with social support provision from family healthcare leaders (FHLSS)	No social support received	Received social support from FHLS	Number of social support received	For the author's use
2. FHLS advised you about primary care practice for complications before going to hospital or health center.				S22
2.3 Instrumental support on disease control				
2.3.1 Dietary Control				
1. Quantity or rice that FHLS prepared for you - Nonglutinous rice of more than 6 ladles - Sticky rice of more than 6 balls (size of hen's egg)				S23
2. FHLS prepared fried and deep fired food for you.				S24
3. FHLS prepared curry with coconut milk for you.				S25
4. FHLS prepared sweet taste fruits for you.				S26
5. FHLS prepared sweets and desserts for you.				S27
6. FHLS prepared drinks such as alcohol, beer, sweet juice, soft drinks, and tea or coffee added sugar for you.				S28

Part 2: Social support received of diabetic patients from the family healthcare leaders within the past 1 month (cont.)

Activities with social support provision from family healthcare leaders (FHLSS)	No social support received	Received social support from FHLS	Number of social support received	For the author's use
2.3.2 Exercise				
1. FHLS took you to practice exercise regularly at least 3 times a week.				S29
2. FHLS took you to practice exercise regularly at least 15 minutes for each exercise session.				S30
2.3.3 Medicine				
1. FHLS reminded you to take medicine or prepared medicine for you.				S31
2. FHLS adjusted medicine dosage for you.				S32
3. FHLS prepared other medicines which help reducing your blood sugar level such as packaged medicines and herbal medicines.				S33
2.3.4 Skin and foot care				
1. FHLS helped examining your skin and foot.				S34
2. FHLS helped you in practicing foot exercise.				S35

Part 2 : Social support received of diabetic patients from the family healthcare leaders within the past 1 month (cont.)

Activities with social support provision from family healthcare leaders (FHLSS)	No social support received	Received social support from FHLS	Number of social support received	For the author's use
2.3.5 Follow up				
1. FHLS accompanied you for medical examination.				S36
2. You did blood test or urine test every time you went for medical examination.				S37
2.3.6 Prevention and basic care for the complications				
1. You were taken care of when you have developed complications.				S38

Record form for social support provision to diabetic patients by family healthcare leaders

Month :2000

Caretaker :

Instruction: Please mark / in a box corresponding to the date and the types of social support provided to diabetic patients.																																			
Patient care aspects	Date																															For the author use only			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
1. Dietary control																																			S1
1.1 Quantity of rice catered for the patient. - Rice exceeding 6 spoons per meal.																																			
- Sticky rice exceeding 6 handfuls per meal (1 handful = 1 egg unit)																																			S2
1.2 Cater fried food for the patient																																			S3
1.3 Cater curries for the patient																																			S4
1.4 Cater sweet fruits for the patient e.g. durian, longan, rambutan, sweet mango, jack fruit or others (specify).....																																			S5
1.5 Cater deserts for the patient e.g. sticky rice with sweet topping, grilled sticky rice, cakes, and various Thai sweets.																																			S6
1.6 Cater the following drinks for the patient: whisky, beer, soft drinks, tea or coffee with added sugar.																																			S7

Record form for social support provision to diabetic patients by family healthcare leaders

Month :2000 Caretaker :

Instruction: Please mark / in a box corresponding to the date and the types of social support provided to diabetic patients.																																			
Patient care aspects	Date																															For the author use only			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
2. Exercise help taking the patient for exercise e.g. jogging, walking, aerobics or others specify..... each session with a minimum of 15 mins.																																			S8
3. Medicine - Forget to administer medicines																																			S9
- Adjust the dose of medicines																																			S10
- Administering different types of drug for patient e.g. broadspectrum medicine, herbal medicine etc.																																			S11
4. Skin and foot care - Check the skin and feet for the patient.																																			S12
- Help the patient exercise the feet.																																			S13
5. Follow up - Take the patient for medical examination on every appointment																																			S15
- Ensure the patient receiving blood and urine test during the session.																																			S16

6. Prevention and basic care for the complications

Instruction:

Column 1 is for recording the date on which the complication is observed.

Column 2 is for recording any apparent signs of the complications.

Column 3 is for recording types of basic care given to the patient responding to the occurring sign.

Date	Signs of the complications	Basic care
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		

Date	Signs of the complications	Basic care
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		

CURRICULUM VITAE

Name : Prakongluke Jaklang

Date of Birth : 13-03-1963

Sex : Female

Nationality : Thai

Marital Status : Married

Education Background : Bachelor of Nursing, 1976
Nakornratchasima Nursing Colledge

Present Position : Registered Nurse

Organization : Phuwiang Hospital; Khon Kaen Province