



## Reference

- Arnold, R. & Burke, B. (1983). Popular education handbook. Ontario: CUSO Development Education.
- Banpuan, W. (2004). Effectiveness of empowerment program for key community leaders for prevention and solution of amphetamine problems in Sai Ma sub-district, Muang district, Nonthaburi province. Master's thesis, Faculty of Science, Kasetsart University.
- Bishop, A., Huntley, A., Isaac, S., & Johnson, M. (Eds.). Bishop, A. (1988). Basic & tool: a collection of popular education resources and activities. Ontario: CUSO Education Department.
- Boonyakongrat, A. (2001). Effects of hypertension and diabetes mellitus participative screening service on consuming rate and satisfaction of clients, Hunkha district, Chainat province. Master's thesis, Faculty of Nursing, Chulalongkorn University.
- Chuchat, A., Suwannapong, N., & Koykawpring, W. (1995). Educational techniques for participatory development. Bangkok: Amarin Printing and Publishing.
- Chupraphawan, C. (2000). Health status of Thai people. Nonthaburi: Health Systems Research Institute.
- Department of Medical Services. (1998). Quality improvement of hypertension and diabetes care and treatments. Nonthaburi: Pattana Wichakarn Publishing.

Endocrine Society of Thailand. (2000). Guidelines of care for diabetes patients.

Bangkok: Medical Services Publishing, Department of Medical Services,  
Ministry of Public Health.

Homchan, W. (2002). Effectiveness of empowerment program towards self-care behaviors in diabetes patients of Lom Sak hospital, Petchaboon province.

Master's thesis, Faculty of Science, Kasetsart University.

Intarasomwang, C. (2000). Effectiveness of empowerment program on disease prevention among pregnant women in ANC unit of Phra Mongkut Klao hospital. Thesis of Postgraduate Program in Health Education and Behavioral Science, Faculty of Public Health, Mahidol University.

Kamolpetch, S., Chawanaraset, P., & Kongsuebchat, W. (1999). Effectiveness of empowerment program among key leprosy contact cases to search for new cases in Nakhon Ratchasima province. (1<sup>st</sup> ed.). Nakhon Ratchasima: Office of Communicable Disease Control Region 5, Department of Communicable Disease Control.

Ministry of Public Health. (2004). Healthy Thailand. Bangkok: Naruemit Soul Company Limited.

Mongkolsin, C. (2001). Effectiveness of health promoting exercise program among traders and businessmen in Somdej Municipality, Kanlasin Province. Master's thesis, Faculty of Public Health, Mahidol University.

Muangkhum, P. (2002). Participatory empowerment of Lua Hill Tribe community in hookworm disease prevention in Chalerm Prakiet district, Nan province. Master's thesis, Faculty of Public Health, Mahidol University.

- Pensirinipha, N. (2001). Manual of empowerment in public health practices. Paper presented at Training of Trainers for Empowerment Program in Public Health Practices, Krabi Provincial Health Office, Krabi, 9-11 August 2001.
- Petchrak, B. & Thongpetchsri, N. (2001). Program development of mental health promotion by empowering health volunteers on mental health community prevention in Phang Nga province. Nonthaburi: Mental Health Department.
- Pungtien, T. (2000). Basic statistics and research methodologies. Bangkok: Suit Pisarn Publishing.
- Satawatcharawanij, P. (2003). Outcomes of strengthened smoking prevention program for students of pratom 6 in Nonthaburi province. Master's thesis, Faculty of Public Health, Mahidol University.
- Sitthipong, S. & Charoenyud, C. (1996). Study of community nursing activities in health promotion unit of community hospitals in Thailand. Journal of Nursing Education. 3(21), 61-62.
- Somchokchai, O. (1994). Manual for organizing meetings to brainstorm ideas for village development: village development by people's empowerment. Bangkok: Thailand Development Research Institute.
- Taechaathik, S. (1997). Ideal tambon administrative organizations. Bangkok: Charoenvit Publishing.
- Taecharin, P. (1984). Policy and community participation in development strategies: current people's participation in development. Bangkok: Sak Sopha Publishing.

- Teeralarb, A. (1985). Causal analysis of people's participation in rural development: case study of Wibulmungsaharn district, Ubon Ratchathanee province. Master's thesis, Faculty of Political Science, Thammasat University.
- Traetulakarn, W. (1998). The application of self-efficacy and participatory learning to exercise for health of the first year nursing students Boromarajanani college of nursing, Srithunya Nonthaburi Province. Master's thesis, Faculty of Public Health, Mahidol University.
- Wallerstein, N. & Bernstein, E. (1988). Empowerment education: freire ideas adapted to health education. Health Education Quarterly. 15(4), 379-394.
- Wallerstein, N. & Bernstein, E. (1994). Introduction to community empowerment, participatory education and health. Health Education Quarterly. 21(2), 141-148.
- Wanichbancha, K. (2001). SPSS for Windows for data analysis. (5<sup>th</sup> ed.). Bangkok: CK and S Photo Studio Publishing.
- Warapongsathorn, T. (1993). Research methodologies and public health sample cases. (1<sup>st</sup> ed.). Bangkok: Chulalongkorn University Printing House.
- World Health Organization [WHO]. (1991). Strengthening self-care at home. New Delhi, India : Regional Office for South-East Asia.

## **APPENDICES**

## Appendix A:

### Empowerment Training Program for Key Community Leaders

#### Schedule of the empowerment training program for key community leaders

Day/Month/Year	Activity/ Content	Objective of the activity
<b>23 Dec. 2004</b>		
08.30 – 09.00 hrs	<ul style="list-style-type: none"> <li>▪ Registration</li> </ul>	
09.00 – 09.30 hrs.	<ul style="list-style-type: none"> <li>▪ Opening ceremony</li> </ul>	
09.30 – 10.00 hrs.	<ul style="list-style-type: none"> <li>▪ Getting to know each other</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will learn about names and certain characteristics of other participants.</li> </ol>
10.00 – 10.15 hrs.	<ul style="list-style-type: none"> <li>▪ Break</li> </ul>	
10.15 – 11.00 hrs.	<ul style="list-style-type: none"> <li>▪ Sweet dreams and bad dreams</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will be encouraged to express their opinions and expectations about this training; both negative and positive.</li> <li>2. Participants will learn to open their mind and accept activities and approaches used in this training.</li> <li>3. Resource persons will introduce objectives and approaches used in this training and present their expectations to participants.</li> </ol>
11.00 – 12.00 hrs.	<ul style="list-style-type: none"> <li>▪ My ideal village</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will have an opportunity to create a picture of their ideal village.</li> <li>2. Participants will understand an importance of the overall social framework and a significance of participatory contributions for the</li> </ol>

Day/Month/Year	Activity/ Content	Objective of the activity
12.00 – 13.00 hrs.	<ul style="list-style-type: none"> <li>▪ Lunch</li> </ul>	<p>social framework.</p> <ol style="list-style-type: none"> <li>3. To create goals for their village improvement.</li> <li>4. To provide techniques and train participants to cognitively focus on any specific issues to accompany their speech.</li> </ol>
13.00 – 13.30 hrs.	<ul style="list-style-type: none"> <li>▪ Shellfish and shells</li> </ul>	<ol style="list-style-type: none"> <li>1. To stimulate participants to become active and alert.</li> <li>2. Participants will learn about group gatherings and abandonment.</li> <li>3. This activity can be used to divide participants into small groups.</li> </ol>
13.30 – 15.30 hrs.	<ul style="list-style-type: none"> <li>▪ Life stream</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will learn more about others from different angles.</li> <li>2. Participants will share and learn about their goals, philosophy and life experiences.</li> <li>3. To make participants understand and accept one another.</li> <li>4. Participants will develop their own concepts, goals and philosophy about life.</li> </ol>
15.30 – 15.45 hrs.	<ul style="list-style-type: none"> <li>▪ Break</li> </ul>	
15.45 – 16.15 hrs.	<ul style="list-style-type: none"> <li>▪ Whispering</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will learn about communication and roles of the sender and receiver of information in the communication process.</li> <li>2. Participants will learn some</li> </ol>

Day/Month/Year	Activity/ Content	Objective of the activity
16.15 – 16.30 hrs.	<ul style="list-style-type: none"> <li>▪ Reflections</li> </ul>	<p>techniques about how to be a good sender and receiver.</p> <ol style="list-style-type: none"> <li>1. Participants will think and reflect on what they have learned or their past experiences, so that they have better understanding on these issues.</li> <li>2. To provide an opportunity for participants to clarify doubts or strengthen any conflicts during the training which can affect the learning atmosphere in the next day.</li> <li>3. To obtain data to improve the training program to meet their needs.</li> </ol>
<p><b>24 Dec. 2004</b></p> <p>08.30 – 08.45 hrs</p>	<ul style="list-style-type: none"> <li>▪ Welcome a new day</li> </ul>	<ol style="list-style-type: none"> <li>1. To stimulate and motivate participants to have positive thinking and attitudes.</li> <li>2. To promote their participation in the training.</li> <li>3. Participants will practice their public speaking and presentation skills.</li> </ol>
08.45 – 10.15 hrs.	<ul style="list-style-type: none"> <li>▪ Knowledge about hypertension and diabetes mellitus</li> </ul>	<ol style="list-style-type: none"> <li>1. To educate participants about hypertension and diabetes mellitus and encourage people, especially those aged 40 and older to acquire knowledge about hypertension and diabetes mellitus and have annual screening.</li> </ol>
10.15 – 10.30 hrs.	<ul style="list-style-type: none"> <li>▪ Break</li> </ul>	
10.30 – 12.00 hrs.	<ul style="list-style-type: none"> <li>▪ Magic stones (on issues about</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will acquire knowledge simply by exchanging their</li> </ol>



Day/Month/Year	Activity/ Content	Objective of the activity
13.00 – 13.30 hrs.	<p>“feelings and intentions to have annual screening and experiences or persuasion/ influence)</p> <ul style="list-style-type: none"> <li>▪ Life boat</li> </ul>	<p>experiences with others.</p> <ol style="list-style-type: none"> <li>2. Participants will be encouraged to express their thoughts, feelings and attitudes towards problems or any specific issues.</li> <li>3. Participants will practice their listening skills and will learn to accept other people’s opinions.</li> </ol> <ol style="list-style-type: none"> <li>1. To make participants become active and alert.</li> <li>2. Participants will learn how to work together in group.</li> <li>3. To encourage participants to help one another and give others a chance.</li> <li>4. This activity can be used to divide participants into small groups.</li> </ol>
13.30 – 16.00 hrs.	<ul style="list-style-type: none"> <li>▪ Playing VCD and presenting posters</li> <li>▪ Linking problems</li> <li>▪ Problem solving guidelines; “how to successfully educate over-40-year-old people on hypertension and diabetes mellitus and encourage them to have annual screening”</li> </ul>	<ol style="list-style-type: none"> <li>1. Participants will learn how to reflect their feelings.</li> <li>2. Participants will learn how to analyze causes of problems.</li> <li>3. Participants will clearly understand that factors are inter-connected and can cause problems in the overall social framework.</li> <li>4. Participants will clearly understand causes of problems and they can formulate solutions.</li> <li>5. Participants will learn how to analyze the solutions which they have developed in the linking problem</li> </ol>

Day/Month/Year	Activity/ Content	Objective of the activity
16.00 – 16.30 hrs.	<ul style="list-style-type: none"> <li>▪ Commitments</li> </ul>	<p>activity.</p> <p>6. Participants will understand how they can solve the problems and get rid of factors which are related to the problem in each stage.</p> <p>7. Participants will learn and understand more about techniques to continually solve the problem in each stage.</p> <p>8. Participants will plan a series of activities together to solve the problems which have been identified in the linking problems activity.</p> <p>9. Participants will develop and practice planning and teamwork skills which will be a preliminary preparation for them before implementing the prevention in the community.</p> <p>1. Participants will set their work goals and make social commitments which will unite and also remind them of their collaborations.</p>

## Appendix B:

### Questionnaire for Key Community Persons

#### Questionnaire for Key Community Persons (Before Training)

No.....

Topics: Knowledge about hypertension and diabetes mellitus, self-efficacy expectations and behaviors in providing knowledge and influencing other people to have screening for hypertension and diabetes mellitus.

.....

This questionnaire consists of 4 parts as follows;

1. General information
2. Knowledge about hypertension and diabetes mellitus
3. Self-efficacy expectations
4. Behaviors in prevention and control of hypertension and diabetes mellitus.

#### **Part 1: General information**

**Instruction:** Please complete the answer in the provided space or tick ✓ in the bracket ( ) which best represents your answer.

1. Age ..... years
2. Sex ( ) 1. Male ( ) 2. Female
3. Education
  - ( ) 1. Not attend school
  - ( ) 2. Pratom 1-6
  - ( ) 3. Matayom 1-3
  - ( ) 4. Matayom 4-6/ vocational certificate

- 5. Certificate/ high vocational certificate/ diploma
  - 6. University's degree or higher
4. Primary occupation
- 1. Unemployment
  - 2. Agriculture
  - 3. Business
  - 4. Freelance/ contractual employment
  - 5. Others; please specify.....
5. Average monthly income
- 1. Less than 5,000 baht
  - 2. 5,000 – 9,999 baht
  - 3. More than 10,000 baht
6. Roles and responsibilities in the community
- 1. Sub-district headmen, village headmen, assistants to the  
village headmen
  - 2. Members of Tambol Administration Organization
  - 3. Health volunteers
  - 4. Others; please specify .....
7. How long have you been taken such roles and responsibilities (in question 6)  
in the community?
- Less than 6 months
  - Over 6 months

## Section 2: Knowledge about hypertension and diabetes mellitus

**Instruction:** Please tick ✓ either in the column “True” or “False” which best represents your answer.

Statements	True	False
1. Frequent consumption of salty food; such as, salted fish and beef and fermented food, is a risk factor contributing to hypertension.		
2. Alcohol, beer and liquor consumption is not a risk factor for hypertension.		
3. Symptoms of hypertension are headache, especially in the back of the head and numbness in the hands or feet.		
4. Regular exercises can prevent hypertension.		
5. Diet which is high in saturated fat; such as, pig trotter, meat with some fat and food with coconut cream, can pose a risk factor for hypertension.		
6. Hypertension, if not treated continuously, can progress and cause heart disease and complications.		
7. People with hypertension do not need to control their weight.		
8. If you have hypertension and do not have any abnormal symptoms, you do not need to see a doctor as scheduled.		
9. Tension and stress are not risk factors of hypertension.		

Statements	True	False
10. It is not possible for underweight people to have hypertension.		
11. People who do not have any abnormal symptoms do not need to have blood pressure screened.		
12. People with hypertension should eat a lot of vegetable and fruits as they can reduce blood pressure to the normal level and prevent complications.		
13. Over-consumption, constant hunger, frequent thirst and weight loss are signs of diabetes mellitus.		
14. Diabetes mellitus can be permanently cured with herbal medications.		
15. Exercises and relaxation can prevent diabetes mellitus.		
16. Diabetes mellitus is a communicable disease which can be transmitted through intimate contact and from drinking urine of diabetes patients.		
17. Diet control and appropriate exercises can be one of diabetes mellitus treatments.		
18. An early symptom of diabetes mellitus is frequent and excessive urination.		
19. People with diabetes have a high risk of having heart disease and cardiovascular disease.		

Statements	True	False
20. For people with diabetes mellitus, bruises at feet are slow to heal.		
21. Diabetes mellitus occurs only to people who like to eat sweet desserts.		
22. People with diabetes mellitus can eat all kinds of vegetable and fruits.		
23. Hypertension and diabetes mellitus are often found in people aged over 40.		
24. Tasting urine or leaving urine to attract ants is the best technique of diabetes mellitus diagnosis.		

### Part 3: Self-efficacy expectations

**Instruction:** Please tick ✓ at the column which best describes your answer.

Statements	Yes	Not sure	No
1. I cannot manage and allocate time for public health services of hypertension and diabetes mellitus prevention and control.			
2. I am willing and happy to participate in a health promotion campaign against hypertension and diabetes mellitus.			

Statements	Yes	Not sure	No
3. I am not confident that I can provide accurate information about hypertension and mellitus to my neighbors.			
4. I have confidence in my capabilities to influence my neighbors to have screening for hypertension and diabetes mellitus.			
5. I am not confident that I can accurately answer questions or inquiries regarding hypertension and diabetes mellitus from my neighbors.			
6. I am confident that I can solve problems regarding hypertension and diabetes mellitus in my community.			

**Part 4: Behaviors in providing knowledge and influencing other people to have screening for hypertension and diabetes mellitus**

**Instruction:** Please tick ✓ in the  which best represents your answer.

1. Within the past 6 months, have you ever provided information about hypertension and diabetes mellitus to your neighbors?

Yes

No



2. Within the past 6 months, have you ever influenced your neighbors aged 40 and older to have screening for hypertension and diabetes mellitus?

Yes

No

.....

### Questionnaire for Key Community Persons (After Training)

No.....

Topics: Knowledge about hypertension and diabetes mellitus and self-efficacy expectations

.....

This questionnaire consists of 2 parts as follows;

1. Knowledge about hypertension and diabetes mellitus
2. Self-efficacy expectations

#### Section 1: Knowledge about hypertension and diabetes mellitus

**Instruction:** Please tick ✓ either in the column “True” or “False” which best represents your answer.

Statements	True	False
1. Frequent consumption of salty food; such as, salted fish and beef and fermented food, is a risk factor contributing to hypertension.		
2. Alcohol, beer and liquor consumption is not a risk factor for hypertension.		
3. Symptoms of hypertension are headache, especially in the back of the head and numbness in the hands or feet.		
4. Regular exercises can prevent hypertension.		

Statements	True	False
5. Diet which is high in saturated fat; such as, pig trotter, meat with some fat and food with coconut cream, can pose a risk factor for hypertension.		
6. Hypertension, if not treated continuously, can progress and cause heart disease and complications.		
7. People with hypertension do not need to control their weight.		
8. If you have hypertension and do not have any abnormal symptoms, you do not need to see a doctor as scheduled.		
9. Tension and stress are not risk factors of hypertension.		
10. It is not possible for underweight people to have hypertension.		
11. People who do not have any abnormal symptoms do not need to have blood pressure screened.		
12. People with hypertension should eat a lot of vegetable and fruits as they can reduce blood pressure to the normal level and prevent complications.		
13. Over-consumption, constant hunger, frequent thirst and weight loss are signs of diabetes mellitus.		
14. Diabetes mellitus can be permanently cured with herbal medications.		
15. Exercises and relaxation can prevent diabetes mellitus.		

Statements	True	False
16. Diabetes mellitus is a communicable disease which can be transmitted through intimate contact and from drinking urine of diabetes patients.		
17. Diet control and appropriate exercises can be one of diabetes mellitus treatments.		
18. An early symptom of diabetes mellitus is frequent and excessive urination.		
19. People with diabetes have a high risk of having heart disease and cardiovascular disease.		
20. For people with diabetes mellitus, bruises at feet are slow to heal.		
21. Diabetes mellitus occurs only to people who like to eat sweet desserts.		
22. People with diabetes mellitus can eat all kinds of vegetable and fruits.		
23. Hypertension and diabetes mellitus are often found in people aged over 40.		
24. Tasting urine or leaving urine to attract ants is the best technique of diabetes mellitus diagnosis.		

**Part 2: Self-efficacy expectations****Instruction:** Please tick ✓ at the column which best describes your answer.

Statements	Yes	Not sure	No
1. I cannot manage and allocate time for public health services of hypertension and diabetes mellitus prevention and control.			
2. I am willing and happy to participate in a health promotion campaign against hypertension and diabetes mellitus.			
3. I am not confident that I can provide accurate information about hypertension and mellitus to my neighbors.			
4. I have confidence in my capabilities to influence my neighbors to have screening for hypertension and diabetes mellitus.			
5. I am not confident that I can accurately answer questions or inquiries regarding hypertension and diabetes mellitus from my neighbors.			
6. I am confident that I can solve problems regarding hypertension and diabetes mellitus in my community.			

.....

### Questionnaire of Key Community Persons (After Experimental)

No.....

Topic: Behaviors in providing knowledge and influencing other people to have screening for hypertension and diabetes mellitus.

.....

This questionnaire consists of 2 parts as follows;

1. Knowledge about hypertension and diabetes mellitus
2. Behaviors in prevention and control of hypertension and diabetes mellitus.

#### Section 1: Knowledge about hypertension and diabetes mellitus

**Instruction:** Please tick ✓ either in the column “True” or “False” which best represents your answer.

Statements	True	False
1. Frequent consumption of salty food; such as, salted fish and beef and fermented food, is a risk factor contributing to hypertension.		
2. Alcohol, beer and liquor consumption is not a risk factor for hypertension.		
3. Symptoms of hypertension are headache, especially in the back of the head and numbness in the hands or feet.		
4. Regular exercises can prevent hypertension.		

Statements	True	False
5. Diet which is high in saturated fat; such as, pig trotter, meat with some fat and food with coconut cream, can pose a risk factor for hypertension.		
6. Hypertension, if not treated continuously, can progress and cause heart disease and complications.		
7. People with hypertension do not need to control their weight.		
8. If you have hypertension and do not have any abnormal symptoms, you do not need to see a doctor as scheduled.		
9. Tension and stress are not risk factors of hypertension.		
10. It is not possible for underweight people to have hypertension.		
11. People who do not have any abnormal symptoms do not need to have blood pressure screened.		
12. People with hypertension should eat a lot of vegetable and fruits as they can reduce blood pressure to the normal level and prevent complications.		
13. Over-consumption, constant hunger, frequent thirst and weight loss are signs of diabetes mellitus.		
14. Diabetes mellitus can be permanently cured with herbal medications.		
15. Exercises and relaxation can prevent diabetes mellitus.		

Statements	True	False
16. Diabetes mellitus is a communicable disease which can be transmitted through intimate contact and from drinking urine of diabetes patients.		
17. Diet control and appropriate exercises can be one of diabetes mellitus treatments.		
18. An early symptom of diabetes mellitus is frequent and excessive urination.		
19. People with diabetes have a high risk of having heart disease and cardiovascular disease.		
20. For people with diabetes mellitus, bruises at feet are slow to heal.		
21. Diabetes mellitus occurs only to people who like to eat sweet desserts.		
22. People with diabetes mellitus can eat all kinds of vegetable and fruits.		
23. Hypertension and diabetes mellitus are often found in people aged over 40.		
24. Tasting urine or leaving urine to attract ants is the best technique of diabetes mellitus diagnosis.		



**Part 2: Behaviors in providing knowledge and influencing other people to have screening for hypertension and diabetes mellitus**

**Instruction:** Please tick ✓ in the  which best represents your answer.

1. Within the past 6 months, have you ever provided information about hypertension and diabetes mellitus to your neighbors?

Yes

No

2. Within the past 6 months, have you ever influenced your neighbors aged 40 and older to have screening for hypertension and diabetes mellitus?

Yes (go to question 3)

No (end of the questionnaire)

3. List the name of neighbors whom you influenced to have screening for hypertension and diabetes mellitus.

3.1.....

3.2.....

3.3.....

3.4.....

3.5.....

3.6.....

3.7.....

3.8.....

3.9.....

3.10.....

3.11.....

3.12.....

3.13.....

3.14.....

.....

**Appendix C:**  
**Questionnaire for People Aged 40<sup>+</sup>**

No.....

Topics: Knowledge about hypertension and diabetes mellitus and behaviors in having screening for hypertension and diabetes mellitus.

.....

This questionnaire consists of 3 parts as follows;

1. General information
2. Knowledge about hypertension and diabetes mellitus
3. Behaviors in prevention and control of hypertension and diabetes mellitus.

**Part 1: General information**

**Instruction:** Please complete the answer in the provided space.

1. Name - Surname .....
2. Address Moo..... Tambon.....
3. Age.....years

**Section 2: Knowledge about hypertension and diabetes mellitus**

**Instruction:** Please tick ✓ either in the column “True” or “False” which best represents your answer.

Statements	True	False
1. Frequent consumption of salty food; such as, salted fish and beef and fermented food, is a risk factor contributing to hypertension.		

Statements	True	False
2. Alcohol, beer and liquor consumption is not a risk factor for hypertension.		
3. Symptoms of hypertension are headache, especially in the back of the head and numbness in the hands or feet.		
4. Regular exercises can prevent hypertension.		
5. Diet which is high in saturated fat; such as, pig trotter, meat with some fat and food with coconut cream, can pose a risk factor for hypertension.		
6. Hypertension, if not treated continuously, can progress and cause heart disease and complications.		
7. People with hypertension do not need to control their weight.		
8. If you have hypertension and do not have any abnormal symptoms, you do not need to see a doctor as scheduled.		
9. Tension and stress are not risk factors of hypertension.		
10. It is not possible for underweight people to have hypertension.		
11. People who do not have any abnormal symptoms do not need to have blood pressure screened.		
12. People with hypertension should eat a lot of vegetable and fruits as they can reduce blood pressure to the normal level and prevent complications.		

Statements	True	False
13. Over-consumption, constant hunger, frequent thirst and weight loss are signs of diabetes mellitus.		
14. Diabetes mellitus can be permanently cured with herbal medications.		
15. Exercises and relaxation can prevent diabetes mellitus.		
16. Diabetes mellitus is a communicable disease which can be transmitted through intimate contact and from drinking urine of diabetes patients.		
17. Diet control and appropriate exercises can be one of diabetes mellitus treatments.		
18. An early symptom of diabetes mellitus is frequent and excessive urination.		
19. People with diabetes have a high risk of having heart disease and cardiovascular disease.		
20. For people with diabetes mellitus, bruises at feet are slow to heal.		
21. Diabetes mellitus occurs only to people who like to eat sweet desserts.		
22. People with diabetes mellitus can eat all kinds of vegetable and fruits.		
23. Hypertension and diabetes mellitus are often found in people aged over 40.		

Statements	True	False
24. Tasting urine or leaving urine to attract ants is the best technique of diabetes mellitus diagnosis.		

**Part 3: Behaviors in having screening for hypertension and diabetes mellitus**

**Instruction:** Please tick ✓ in the  which best represents your answer.

1. Within the past 6 months, have you ever taken any screening for hypertension and diabetes mellitus?

Yes

No

---

## Curriculum Vitae

**Name :** Mr. Pornnarong Horkul

**Date of Birth :** 04-02-1970

**Place of Birth :** Thai

**Educational Background :** B.P.H., Bachelor of Public Health, 1994  
Sukhothai Thammathirat Open University

**Present Position :** Bankortong Health Center, Koa-Din Sub-District,  
Kao Panom district, Krabi Province

