Effects of Peer-support, Self-management Program on Self-management Behavior and Blood Pressure of Older Adults with Essential Hypertension

Nichakarn Songthai^{1*}, Rarcharneeporn Subgranon², Waree Kangchai² and Edwin Rosenberg³

ABSTRACT

This study aimed to evaluate the effectiveness of peer-support, self-management program on the self-management behavior and blood pressure of older adults with essential hypertension. A randomized control trial was designed. Eighty-one older adults with hypertension were randomly assigned to two experimental groups and one control group of 27 older adults each. At the fourth and sixteenth week after completing a peer-support, self-management program, participants in the two experimental groups demonstrated statistically significant improvements in self-management behavior and reduced blood pressure that were also significantly different from those of the control group. peer-support, self-management program helped maintain self-management behaviors and reduce blood pressure in older adults with hypertension.

Keywords: Peer-support, Self-management program, Randomized control trials, Self-management behaviors, Blood pressure, Peer-led, Community health workers.

INTRODUCTION

Hypertension is a chronic problem highly prevalent in the elderly. According to the Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (JNC 7), hypertension was observed in a majority of all adults aged 60 and older worldwide (Chobanian et al., 2004). In Thailand, the National Statistics Office (2008) reported lower, but still high rates (31.5%) of hypertension in adults aged 60 and older, in 2007. Furthermore, most elderly patients could not control hypertension (Thanakwang and Kunnasit, 2009), resulting in an increasing risk of fatal complications, such as cardiovascular and cerebrovascular morbidity and mortality (Chobanian et al., 2004) and growing dependence on family and society. As hypertension is long lasting and routinely needs treatment, it often has negative mental, social and economic impacts on elderly patients and their families, as well as imposes an increasing cost burden on the health system.

 $^{^{1}}$ Faculty of Nursing, Burapha University, Chon Buri 20130, Thailand.

²Faculty of Nursing, Burapha University, Chon Buri 20130, Thailand.

³Department of Sociology, Appalachian State University, Boone, NC 28608, USA.

^{*}Corresponding author. E-mail: nsongthai@gmail.com