



Perceptions and experiences of individuals with hypertension after attending a group health coaching programme: A qualitative study

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Aim

We aim to explore the perceived effects and experiences of group health coaching programme (GHCP) on individuals with hypertension.

Methods

The GHCP was conducted once weekly for four sessions on topics of hypertension management. Convenience sampling was used to recruit 19 participants (4 males, 15 females), aged between 60 to 92, who attended at least two sessions of the GHCP. Three focus group discussions were conducted at senior activity centres (SAC) between September to November 2019. Recordings were transcribed verbatim, translated and analyzed using open coding and inductive content analysis.

Results

Analysis resulted in five main categories and eleven subcategories describing participants' perceived effects and experiences of GHCP. The main categories were (i) catalysts for change, (ii) barriers of change, (iii) taking charge of own condition, (iv) disseminator of information, (v) not an influencer of change in others. Participants perceived that knowledge and motivation gained from GHCP served as catalysts for change in hypertension management, while persistent habits and external factors such as limited availability of healthy food in the community were barriers of change. Post-program, participants started taking charge of their own condition by adopting healthier dietary choices, actively engaging healthcare professionals during medical appointments, and self-monitoring of blood pressure at home. Participants were willing to disseminate information to others, especially those in close physical proximities. However, they perceived themselves as being incapable of effecting change in others as "everyone is different" and believed that change is an individual's responsibility. All noted an overall positive experience with GHCP.

Conclusion

The findings suggest that participants perceived GHCP as an acceptable engagement platform for their hypertension management and served as a catalyst for positive behavioural changes within themselves. Results helped to further inform strategies for future programme delivery and implementation such as collaborating with allied health professionals in GHCPs.

