

The hypertension self-care profile: A practical tool to measure hypertension self-care (HBP SCP Questionnaire)

C14914

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Unmet Need

Significant economic burdens arise from multiple complications and premature mortality from hypertension (HBP) for hypertensive individuals, their families, and society. Despite numerous published HBP management and behavioral treatment guidelines, blood pressure control rates are generally low in the United States, particularly among racial/ethnic minorities (17%) compared with the general population (30%). Current self-care tools are not comprehensive, often exclusively addressing medication-taking behavior, or have incongruent theoretical frameworks and inadequate psychometric quality. Given the rapidly growing aging population and the sharp increase in the prevalence of HBP in the United States, there is need in art to establish a theoretically grounded, valid, and reliable instrument that

Technology ID

C14914

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Medical Instruments and Questionnaires

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captures the multiple critical domains of self-care behaviors in people with HBP.

Technology Overview

Johns Hopkins researchers have developed a new instrument called Hypertension Self-Care Profile (HBP SCP), to measure domains of HBP self-care critical to adequate blood pressure control and is reflective of the most current HBP management guidelines. Based on two popular theoretical approaches, Orem's self-care model and Motivational Interviewing, this instrument has three distinctive scales (20 items each) to assess HBP self-care behavior, motivation, and self-efficacy. The items in each scale was written at the sixth-grade reading level. These scales can be used together or independently.

Stage of Development

The inventors tested HBP SCP on 213 English-speaking inner-city residents with HBP (mean age, 68.6 years; 76.1% women; 81.7% African American). Rigorous psychometric testing supports that the HBP SCP is reliable, valid, and significantly correlated with theoretically selected variables. The HBP SCP–Behavior scale also successfully discriminated between those with or without blood pressure control.

References

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