



## DEVELOPING AN INNOVATIVE BUDDHIST COMMUNICATION PROCESS TO PROMOTE THE QUALITY OF LIFE OF DIABETIC PATIENTS USING THE 7 BOJJHAṄGA

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### Abstract

**Background and Objective:** Diabetes is a chronic non-communicable disease found in all nations and has increased yearly. This disease could be inherited through genetics or by adopting a lifestyle that increases the risk of the disease. Diabetes was an incurable and extremely dangerous condition that gradually destroyed the patient's health, causing serious complications that could even lead to death. In Buddhist teachings, health and quality of life were emphasized, as the Buddha had said, "Being free from disease is the greatest blessing (Ārogyaparamā lābhā)," which meant being free from both physical and mental illness. Therefore, promoting quality of life with the 7 Bojjhaṅga, along with medical and public health knowledge, was considered essential for diabetic patients in a way that could be effectively applied to their daily lives. This research aimed to study the current situation and develop and present the process of Buddhist innovation in communication to promote the quality of life of diabetic patients.

**Methodology:** A mixed-method research approach was used, consisting of qualitative research that collected data from documents and field data through in-depth interviews and quantitative research in the form of quasi-experimental research. Data on general, illness, quality of life, and Buddhist innovation to promote quality of life were gathered through interviews with questionnaires. Activities were organized to promote quality of life for a study group of 35 participants across six sessions, each 1 month apart. The data were analyzed and presented using frequencies, percentages, means, and statistical tests, including the independent t-test and the Paired Samples t-test.

**Main Results:** 1) Public health service institutions had not integrated Buddhist principles into public health work. Before organizing the skill promotion activities, it was found that the quality of life of the study group and the control group did not differ; 2) Skill promotion activities were organized to integrate medical work, public health, and Buddhist principles. The message was conveyed by monks and personnel, using the content of the message "the 7 Bojjhaṅga" with the study group, and various activities were organized through related media channels, and 3) When measuring quality of life scores, it was found that the study group had higher scores for "physical,"



"mental," "social relationships," and "overall quality of life," resulting in an average score significantly higher than that of the control group.

**Involvement to Buddhadhamma:** Applied Buddhism integrated the use of Buddhist principles to benefit society, particularly through the practice of the 7 Bojjhaṅga (The Seven Factors of Enlightenment), which included: Sati, Dhammavicaya, Viriya, Pīti, Passaddhi, Samādhī, and Upekkhā. Additionally, it emphasized the application of the seven qualities of a good friend or the 7 Kalyāṇamitta (Piyo, Garu, Bhāvanīyo, Vattā ca, Vacanakkhamo, Gambhīraṅca katham kattā and No caṭṭhāne niyojaye) in providing compassionate and understanding care to patients-treating in conjunction with medical and public health knowledge to promote quality of life for diabetic patients through various communication methods.

**Conclusions:** Promoting the quality of life for diabetic patients required a holistic approach that addressed both physical and mental well-being, enabling patients to incorporate effective practices into their daily lives in a meaningful and sustainable way. Diabetes was an incurable and life-threatening disease. Given the seriousness of this condition, there was a clear and urgent need for innovative strategies that support long-term health and well-being. This research, therefore focused on developing an innovative Buddhist communication process, grounded in the principles of the 7 Bojjhaṅga, to promote and enhance the quality of life for diabetic patients. By integrating spiritual and psychological dimensions with health care, this approach offered a more comprehensive and compassionate support model for those with diabetes.

**Keywords:** Innovative Buddhist Communication, Quality of Life, Diabetic Patients, 7 Bojjhaṅga (The Seven Factors of Enlightenment), Buddhist Health Promotion

## Introduction

Diabetes is a chronic non-communicable disease that can be found in all nations and is increasing every year. In particular, non-insulin-dependent diabetes is the most common, accounting for approximately 95 percent of all diabetic patients. (Witthayanarat et al., 1984) This disease can be inherited through genetics and the way of life of people today, which is eating well, living well, and not exercising, a lifestyle that contributes to the development of diabetes. (Anukul, 1985) Diabetes is a chronic, incurable, and extremely dangerous disease that gradually destroys the patient's health, causing serious complications that can even lead to death. It is also a major of significant economic and social loss. (Intharampan, 1985)

The WHO stated that the basic conditions and resources necessary for health include peace, housing, education, food, income, ecological balance, sustainable resources, social justice, and equality. (Bureau of Elderly Health, 2021) Therefore, quality of life has received more attention as a way to improve the lives of diabetic patients because the value of life does not lie in longevity but in the quality or happiness of the remaining life. (Taylor, 1987) The WHO stated, "Health does not merely mean the absence of disease and disability, but also includes the individual's physical, mental, and social well-being. Together with information in Buddhism, which also emphasizes health or quality of life, as the Buddha said that "being free from disease is the greatest blessing (Ārogyaparamā



lābhā)" (MN. (Thai) 13/216/254) (Mahachulalongkornrajavidyalaya University, 1996), which means being free from both physical and mental illness.

Given these issues, this research explores the development of a Buddhist communication process aimed at promoting the quality of life for diabetic patients. By integrating the 7 Bojjhaṅga (The Seven Factors of Enlightenment) with medical and public health knowledge, this approach seeks to help diabetic patients apply these teachings effectively in their daily lives, enhancing their physical, mental, social, and spiritual well-being.

### **Objective**

This research aimed to study the current situation and develop and present the process of Buddhist innovation in communication to promote the quality of life of diabetic patients.

### **Methodology**

This research study was conducted at the Nai Khlong Bang Plakot Subdistrict Health Promoting Hospital in Samut Prakan Province. This was a mixed-method study, consisting of qualitative research methods involving the collection of data from documents related to Buddhism, medicine and public health that promote the quality of life of diabetic patients and field data collection by in-depth interviews with personnel. The quantitative part utilized a quasi-experimental design, which included organizing activities to promote the quality of life for diabetic patients. These activities included home visits and data collection through interviews and questionnaires. The collected data were analyzed to assess the effectiveness of Buddhist communication innovations in promoting the quality of life of diabetic patients, particularly focusing on the application of the 7 Bojjhaṅga (The Seven Factors of Enlightenment).

### **Population and Sample**

The population studied consisted of diabetic patients in the area under the responsibility of the Nai Khlong Bang Plakot Subdistrict Health Promoting Hospital. The sample group was obtained by purposive sampling, consisting of a study group (Diabetic Patients Who Received Skill Promotion), a control group (Diabetic Patients Who did not Receive Skill Promotion), and a reference group (Patients without Underlying Diseases), with 35 patients in each group, all of whom voluntarily participated in the project.

### **Research Tools and Data**

The qualitative data were collected using in-depth interviews with personnel, while the quantitative data were collected using two sets of questionnaires. Set one, administered to the sample group, consisted of 4 parts: General information, illness information, quality of life information: WHOQOL-BREF (The WHOQOL group, 1995); (World Health Organization Quality of Life Assessment Group, 1996) (Reliability = 0.90) and Buddhist innovation data to promote quality of life of diabetic patients with the 7 Bojjhaṅga (The Seven Factors of Enlightenment) (Reliability = 0.89) and Set two, administered to the personnel, consisted of 2 parts: General information and personnel communication with the 7 Kalyāṇamitta (The Seven Qualities of a Good Friend) (Reliability = 0.93). The results were analyzed and presented using descriptive statistics



(Frequencies, Means, and Percentages) and inferential statistics, including the independent t-test and the Paired Samples t-test with a significance level of  $\alpha = 0.05$ .

### **Quasi-experimental Research**

The Buddhist innovative communication process to promote the quality of life of diabetic patients involved organizing training activities aimed at enhancing skills for holistic quality of life—both physical and mental—conducted simultaneously by monks and healthcare personnel. The training provided knowledge and skills related to Buddhist health-promotion methods, specifically the 7 Bojjhaṅga (The Seven Factors of Enlightenment) (Somdej Phra Buddhaghosachan (P.A. Payutto), 2024) along with related activities conducted with the study group 6 times, at one-month intervals. Various tools (Communication Formats) were used during workshops and home visit activities. Additionally, a one-day training session was organized to develop the knowledge and communication skills of personnel using Buddhist communication methods based on the 7 Kalyanamitra (Somdej Phra Buddhaghosachan (P.A. Payutto), 2023).

## **Results and Discussion**

The research results found that:

### **1. Study of the current situation regarding the Buddhist innovative communication process to promote the quality of life of diabetic patients**

#### **Buddhist Innovative Communication Process**

A research study on the Buddhist innovation communication process at the Nai Khlong Bang Plakot Subdistrict Health Promoting Hospital, based on in-depth interviews with 12 staff members, found that:

Most personnel were not yet familiar with Buddhist teachings or practices, specifically the "7 Bojjhaṅga (The Seven Factors of Enlightenment)" and the "7 Kalyāṇamitta (The Seven Qualities of a Good Friend)", that could be applied in caring for diabetic patients and supporting healthcare staff. Only one person recognized the "7 Bojjhaṅga (The Seven Factors of Enlightenment)", identifying it as a prayer. Some had heard the term "Kalyanamitra" but believed it referred to making good friends in everyday life and did not associate it with healthcare services. They had never previously understood how it could be applied in providing services to diabetic patients or in interactions between healthcare personnel and patients.

The Nai Khlong Bang Plakot Subdistrict Health Promoting Hospital is a primary care unit operating within a general public health service framework, similar to other nationwide agencies that focus primarily on physical health care. There is no provision for mental health services in a holistic form that integrates both physical and mental care. There is also no integration of Buddhist principles with public health work, which is viewed as distant due to a lack of knowledge about relevant Dhamma teachings. Most personnel are educated primarily in scientific disciplines. They are modern individuals who generally do not attend temples or listen to Dhamma teachings. They carry out their duties based on their professional roles and responsibilities.



### Quality of life of diabetic patients

In the context of diabetes, the pathology of the disease causes physical deterioration of various organs in diabetic patients, leading to complications in key organs such as eyes, feet, kidneys, blood vessels, and nerves, which reduces their overall functional capacity compared to healthy individuals. As the duration of the illness and associated complications increase, the patient's quality of life gradually declines. This study compared the quality of life scores of a reference group (n = 35) with those of diabetic patients (n = 70), including both the study and control groups. Quality of life was assessed across four domains as well as overall. The reference group had significantly higher quality of life scores than all groups of diabetic patients, as shown in Table 1.

**Table 1** Shown mean and standard deviation of quality of life scores in the reference group and diabetic patients group classified by aspects and overall, before skill promotion activities

Quality of Life	Reference Group	Diabetic Patients Group	p-value*
Overall Quality of Life (100 points)	86.29±08.19	72.49±10.48	<0.001
Physical	85.82±08.15	69.08±12.37	<0.001
Mental	90.83±07.75	75.18±11.23	<0.001
Social Relations	84.76±12.21	70.95±13.44	<0.001
Environment	83.75±09.12	74.77±12.53	<0.001

\*Independent t-test

The quality of life scores of the 35-person control group and study group were measured before the activity to promote skills based on the 7 Bojjhaṅga (The Seven Factors of Enlightenment) was conducted. As shown in Table 2, the quality of life in all four aspects and the overall quality of life did not differ significantly between the two groups.

**Table 2** Shown mean and standard deviation of quality of life scores in the control group and study group classified by aspects and overall before skill promotion activities

Quality of Life	Control Group	Study Group	p-value*
Overall Quality of Life (100 points)	71.06±11.37	73.39±09.25	0.257
Physical	67.96±12.92	70.20±11.87	0.452
Mental	72.62±12.14	77.74±09.74	0.056
Social Relations	69.05±14.23	72.86±12.52	0.238
Environment	74.64±12.79	74.91±12.44	0.929

\*Independent t-test

### 2. Develop an Innovative Buddhist communication process to promote the quality of life of diabetic patients

Development of a Buddhist innovative communication process to promote the quality of life of diabetic patients using the 7 Bojjhaṅga (The Seven Factors of Enlightenment). Various related



activities were conducted based on David K. Berlo's communication model, which consists of the following components:

## 2.1 Source

2.1.1 Monks who had obtained a Doctorate in Buddhist Studies from Mahachulalongkornrajavidyalaya University from Wat Yai, Nai Khlong Bang Plakot Subdistrict, were invited to provide knowledge to hospital personnel in a one-day session. The purpose was to encourage a more positive attitude through the use of the 7 Kalyāṇamitta (The Seven Qualities of a Good Friend) and to provide knowledge relevant to this research study, including Buddhist communication innovations, the 7 Bojjhaṅga (The Seven Factors of Enlightenment), and methods for measuring quality of life.

2.1.2 Activities to promote family and social relationships were conducted through home visits by hospital personnel to understand the context of the study group and to communicate with participants, family members, or neighbors, as well as to follow up on medication adherence and health behavior (Diet, Exercise, Prayer).

2.1.3 Activities were carried out to develop skills in the Buddhist innovative communication process including, knowledge-sharing and quality of life enhancement activities for the study group, with facilitators consisting of monks and healthcare personnel, developing both physical and mental aspects simultaneously by integrating medical knowledge, public health, and Buddhist principles (The 7 Bojjhaṅga: The Seven Factors of Enlightenment). The activities were conducted 6 times, once a month, with each session lasting approximately 4 hours.

## 2.2 Message

2.2.1 In medicine and public health, knowledge and promotion of behavior are given, focusing only on the physical aspect while neglecting the mental aspect. Life consists of "body and mind" which must be developed together as a "holistic" whole. Therefore, Buddhist messages must be incorporated using the 7 Bojjhaṅga (The Seven Factors of Enlightenment) for the study group (Recipients) so that patients can apply them alongside conventional medicine and public health practices and use them appropriately in daily life according to each element of Dhamma. Details are as follows:

2.2.1.1 Sati (Mindfulness) is considered important. For example, when diabetic patients have high blood sugar levels, they will be anxious and think about various things. Therefore, they must use Sati to bring their mind back to awareness and in the present moment.

2.2.1.2 Dhammavicaya (Truth Investigation), selecting kusala dhamma (Wholesome States) and reflecting on goodness. However, if a patient has diabetes and cares for relatives, they may worry about elevated blood sugar levels and potential disease symptoms, which could lead to various complications.

2.2.1.3 Viriya (Energy): When negative conditions such as illness arise, the mind may become pessimistic. Diligence must be applied, without discouragement, along with patience. Mental care must be maintained alongside physical care.



2.2.1.4 Piti (Rapture) arise along with a feeling of contentment. It is nourishment for the mind, improving physical well-being, creating relaxation. The body becomes light, and the mind feels fulfilled.

2.2.1.5 Passaddhi (Tranquility): A sense of relaxation and calmness arises after the experience of elation. When the mind is relaxed, the body also becomes relaxed and light.

2.2.1.6 Samadhi (Concentration) unifies body and mind, resulting in concentration and focus on wholesome states.

2.2.1.7 Upekkhā (Equanimity), the arising of insight and equanimity, is the calm neutrality of the mind, free from bias, rooted in understanding. It is the equanimity that comes from knowing.

2.2.2 Regarding the sender, namely service personnel, Buddhist messages should be added to promote readiness in providing services both physically and mentally. The 7 Kalyāṇamitta (The Seven Qualities of a Good Friend) should be used to provide services to patients with understanding as if serving family and friends with an emphasis on service excellence, with details for each Dharma element as follows:

2.2.2.1 Piyo (Endearing) is endearing. As a communicator, he is approachable and warm-hearted, encouraging people to seek advice and ask questions.

2.2.2.2 Garu (Respectable) is respected for behaving appropriately according to his role and status, creating a sense of warmth, trust, and safety.

2.2.2.3 Bhāvanīyo (Adorable) means admirable or commendable in virtue, reflecting true knowledge and wisdom. He is both a sender and a receiver of the message who constantly improves himself. He should be imitated, remembered, and mentioned with gratitude and pride.

2.2.2.4 Vattā ca (Being a Counselor) refers to effective communication, knowing how and when to explain things clearly, offer advice, give warnings or constructive criticism, and act as a reliable counselor.

2.2.2.5 Vacanakkhamo (Being a Patient Listener) means being patient in communication and willing to listen to advice, questions, suggestions, or criticism calmly, without boredom or irritation.

2.2.2.6 Gambhīraṇca kathaṃ Kattā (Able to Deliver Deep Discourses) refers to the ability to communicate profound and complex matters in an understandable way, facilitating deeper learning.

2.2.2.7 No caṭṭhāne niyojaye (Not Leading on Spurring onto a Useless End) means avoiding communication that leads to harm or deterioration and refraining from giving advice on trivial or inappropriate matters.

### 2.3 Channel

This research needs to focus on both physical and mental aspects simultaneously. There must be a promotion of the mental aspect through Buddhism. Therefore, service channels



or knowledge, skills, etc. Must be adjusted or expanded from regular practices. There must be continuous learning during service delivery or additional training in various departments throughout each stage of patient care. Alternatively, specific training courses should be developed, and the use of various media should be increased. Details are as follows:

2.3.1 Personal media (Lecturers by Monks and Public Health Personnel) consist of knowledge provision, skill enhancement, and home visits. Buddhist communication innovations focus on monks providing contemporary lectures or sermons, using easy-to-understand language and deep engagement with the Dharma, and public health personnel delivering knowledge about diabetes, exercise, and skills enhancement through demonstrations or guided training. There are also home visits to patients to build relationships between service providers and patients, their family members, or neighbors, enabling them to understand various problems and solve them more accurately.

#### 2.3.2 Video media (YouTube)

2.3.2.1 The 7 Bojjhaṅga (The Seven Factors of Enlightenment):  
Buddhist Methods for Promoting Health

2.3.2.2 Diabetes and Self-care, Consumption principles and food to avoid

2.3.2.3 Exercise for Diabetic Patients and the Elderly

2.3.2.4 Chanting the 7 Bojjhaṅga (The Seven Factors of Enlightenment)

2.3.3 Social media via Line group to send informational content, for communication consultation on various issues, and for creating interaction between personnel, patients, and family members.

2.3.4 Cardboard with plastic lamination of the 7 Bojjhaṅga (The Seven Factors of Enlightenment) mantras with translations for use in chanting.

2.3.5 Various educational materials related to diabetes, the 7 Bojjhaṅga (The Seven Factors of Enlightenment), etc.

### 2.4 Receiver

The recipients were diabetic patients who were the study group, and their family members participated in this research study, totaling 35 individuals.

### 3. Present Buddhist Innovation Process in Communication to Promote the Quality of Life of Diabetic Patients

After promoting the Buddhist innovative communication process to improve the quality of life of diabetic patients through the 7 Bojjhaṅga (The Seven Factors of Enlightenment) to the study group and evaluating the results, it was found that the quality of life in each aspect, namely "physical," "mental," "social relationship" and "overall quality of life," had significantly higher scores than the control group, while the "environmental" aspect was not significantly different, as shown in Table 3.



**Table 3** Shown mean and standard deviation of quality of life scores in the control group and study group classified by aspects and overall after skill promotion activities

Quality of Life	Control Group	Study Group	p-value*
<b>Overall Quality of Life (100 points)</b>	<b>71.60±11.37</b>	<b>77.64±07.62</b>	<b>0.006</b>
Physical	67.96±12.92	74.39±09.43	0.020
Mental	72.62±12.14	83.21±07.39	<0.001
Social Relations	69.05±14.23	76.43±09.15	0.012
Environment	74.64±12.79	76.52±11.23	0.517

\*Independent t-test

A comparison of the quality of life scores of the study group before and after the skill promotion activities found that the quality of life scores in all four aspects and the overall quality of life were significantly higher than before the skill promotion activities, as shown in Table 4.

**Table 4** Shown mean and standard deviation of quality of life scores of the study group before and after the promotion of skills, classified by aspects and overall

Quality of Life	Before	After	p-value*
<b>Overall Quality of Life (100 points)</b>	<b>73.39±09.25</b>	<b>77.64±07.62</b>	<b>&lt;0.001</b>
Physical	70.20±11.87	74.39±09.43	<0.001
Mental	77.74±09.74	83.21±07.39	<0.001
Social Relations	72.86±12.52	76.43±09.15	0.004
Environment	74.91±12.44	76.52±11.23	0.027

\*Paired Samples t-test

After activities were carried out to develop skills in the Buddhist innovative communication process, including knowledge-sharing and quality of life, I have done this 6 times. The assessment of the study group to apply the 7 Bojjhaṅga (The Seven Factors of Enlightenment) in daily life, classified by Dharma topic, as follows:

Sati (Mindfulness): "You understand diabetes and seek continuous medical treatment." "You create an environment around you to ensure safety for your lifestyle and health care." and "If you know you are under stress, you can manage to reduce that stress in ways that are good for your health."

Dhammavicaya (Truth Investigation): "You recommend that your relatives accept your illness information to help them take care of your health properly." "You can choose to receive news or stories as you wish each day." and "You can choose products and services that suit your family's income."

Viriya (Energy): "You can exercise or engage in various physical activities to meet your set goals." "You try to eat food that is suitable for your body and any illnesses you may be suffering from." and "In your daily life, you can perform your daily activities as you wish."



Piti (Rapture): "You are delighted to be able to discuss or consult about health care with your relatives or close friends." "You can meet and talk with others in the society where you live normally and happily." and "You have a sense of pride in yourself."

Passaddhi (Tranquility): "The surrounding environment has a positive effect on your health, making you feel relaxed and calm." "Even if you have diabetes, you still feel content with life." and "You have ample and suitable time to rest and comfortably."

Samadhi (Concentration): "You can sleep easily and normally without needing sleeping pills." "You can concentrate well on your tasks." and "You can do various tasks efficiently according to your own ability."

Upekkhā (Equanimity): "When you have bad feelings in life, such as disappointment or depression, but you can understand those feelings and manage them well." "When receiving medical treatment, you have to wait, checkup, and prescribe medication for a long time because there are many patients, but you understand." and "If you travel and encounter heavy traffic, you understand well. It's because the environment of the community where you live is urban."

The study group that participated in activities to promote the 7 Bojjhaṅga (The Seven Factors of Enlightenment) was able to apply it to their daily lives, classified by Dharma topic. It was found that they had the highest average score in "Piti" followed by "Upekkhā" and "Sati", respectively, and the lowest average scores in "Viriya" and "Passaddhi" as shown in Table 5.

**Table 5** Shown mean and standard deviation of scores on the application of the 7 Bojjhaṅga (The Seven Factors of Enlightenment) in the daily lives of the study group after skill promotion, classified by Dhamma topic

7 Bojjhaṅga	Mean±S.D.
<b>7 Bojjhaṅga Overall (105 points)</b>	<b>88.97±11.24</b>
Sati (15 points)	13.03±1.65
Dhammavicaya	12.54±1.72
Viriya	11.80±1.95
Pīti	13.60±1.75
Passaddhi	12.14±2.43
Samādhī	12.63±2.04
Upekkhā	13.23±1.75

After conducting activities to develop skills in the Buddhist innovative communication for the hospital personnel, conducting an assessment of the apply the 7 Kalyāṇamitta (The Seven Qualities of a Good Friend) in patient service, classified by Dharma topic as follows:

Piyo (Endearing): "You have a humble and charming personality that can communicate, which leads to diabetic patients coming to consult and ask about various problems continuously." "You understand the feelings and needs of diabetic patients very well, so you can communicate the feelings of the patients." and "When diabetic patients come to use our services, you have



physical and verbal compassion, making the patients feel like you are friends, thus feeling refreshed, not in awe."

Garu (Respectable): "You have excellent knowledge and profession skills, able to communicate and follow the patient's correct and complete guidelines." "You can communicate or recommend appropriate exercises for each patient to actually take home." and "Your organization has scheduled and monitored annual health checkups for patients: laboratory tests, eye, foot and dental checks to monitor their health status continuously."

Bhāvaniyo (Adorable): "You self-communicate or follow good life examples, such as regular exercise, which makes your body strong, healthy, and BMI not exceeding standards.", "You can communicate, which is to provide advice, consultation, and knowledge to patients about their physical problems or discomfort, in a way that is appropriate to the condition of each individual patient." and "You have the personality, good personality, good behavior, when a patient see you, it gives them encouragement and a sense of self-esteem, and they are an example, so they want to follow suit."

Vattā ca (Being a Counselor): "When you find out that the patient has a physical condition, such as blurred vision and numbness in the hands, feet, you provide advice and monitor the patient's.", "If the patient's laboratory test results show abnormally high blood sugar levels, you try to ask about eating and medications habits and suggest improvement." and "If you find that the patient has not taken the full course of medication continuously, it leaves them with medicine, you try to explain to the patient and their relatives to recognize the importance of taking medication."

Vacanakkhamo (Being a Patient Listener): "You communicate within yourself, which is using wisdom to reflect, solving problems that occur with the patient during their services, which is very well and appropriately done." "You love to the service, so you want to help patients escape both physical and mental suffering." and "You endure criticism, which mean you are ready to receive information or listen to advice, consult questions, and provide feedback. You can endure criticism and listen, never get bored, never get angry."

Gambhīraṇca katham Kattā (Able to Deliver Deep Discourses): "You communicated with the patients to gain knowledge and understanding about diabetes until they understood that If they cannot maintain or control blood sugar levels to normal levels, it harm to various organ such as the eyes, kidneys, feet, nerves and other.", "You recommended medication for each item until the patient understands how important each item is in treating the disease." and "If you know that the patient is eating foods that increase their blood sugar levels, you will provide advice to reduce and stop consuming those foods."

No caṭṭhāne niyojaye (Not Leading or spurring on to a Useless End): "If patient buy certain medications and supplements to take themselves, which are drugs and supplements that patient's should not take, you will communicate or immediately inform the patient to refrain from taking them.", "You can communicate or advise patient to avoid activities that wounds make them prone to sores on their hands and feet, because diabetic wounds are rare to treat." and "You can



communicate or encourage patients abstain to drink alcohol and abstain from smoking absolutely."

Knowledge and skill promotion for personnel using the "7 Kalyāṇamitta (The Seven Qualities of a Good Friend)" as a framework for providing services (Communication) to diabetic patients was also implemented. A comparison of average scores before and after skill promotion revealed that the average scores increased statistically significantly in the category "7 Kalyāṇamitta Overall" and in 2 individual Dhamma topics: "Bhāvanīyo" and "Vacanakkhamo" as shown in Table 6.

**Table 6** Shown mean and standard deviation of scores before and after promoting the skills of using "7 Kalyāṇamitta (The Seven Qualities of a Good Friend)" in providing services, classified by Dharma topic

7 Kalyāṇamitta	Before	After	p-value*
<b>7 Kalyāṇamitta Overall (105 points)</b>	<b>85.08±10.33</b>	<b>88.50±7.88</b>	<b>0.037</b>
Piyo (15 points)	11.75±1.91	12.25±1.36	0.256
Garu	12.50±1.73	12.75±1.54	0.571
Bhāvanīyo	10.75±2.53	11.92±1.62	0.027
Vattā Ca	12.83±1.85	13.08±1.44	0.339
Vacanakkhamo	12.08±1.68	13.00±1.48	0.026
Gambhīrañca Kathaṃ Kattā	11.92±2.11	12.33±1.70	0.241
No Caṭṭhāne Niyojaye	13.25±1.21	13.25±1.48	0.999

\*Paired Samples t-test

A review of related literature and previous research studies revealed quasi-experimental research studies integrating medical knowledge and public health with Buddhist principles in a concrete manner. Which is consistent with the research result of Phra Thammoli (2008) who conducted research on "Analytical Study of The Way of Life, Health Behavior and Holistic Health Care of Monks As Stated In The Tripitaka," Phrakhrū Phibulkijjarak Tongmak Chanthia & Phramaha Surasak Puccantaseno (2019) who conducted research on "Care Center for Cancer Patients in the Integrated Buddhist Perspective," Trongsoon & Noppiboon (2023) who conducted research on "The Model Development of Holistic Care of The Sangha by The Participation of Community Network in Sikhoraphum District, Surin Province," Mahayotsanan (2020) who conducted research on "An Approach in Buddhist Health Care for Diabetes at Thawangpha Hospital, Thawangpha District, Nan Province" and Phrakhrū Inthasarnwichak (2007) who conducted research on "Treatment of Disease with Herbal Medicine and Dharma Medicine as Appeared in Buddhist Scriptures." In summary developing quality of life requires simultaneous development in both physical and mental dimensions. However, this research is semi-experimental, which does not random sampling. This makes it difficult to control external variables and sample characteristics, which may affect the reliability of the research results and yet unable to rigorously control variables, like experimental research, it makes it impossible to clearly conclude whether the changes are truly due to the variables being studied or from other external variables.



## Originality and Body of Knowledge

From the results of this research, new knowledge has been found about the Buddhist communication innovation process for promoting the quality of life of diabetic patients consisting of 4 components: Source, message, channel, and receiver. The source (Personnel) should receive and internalize the message of the 7 Kalyāṇamitta (The Seven Qualities Of a Good Friend) (Piyo, Garu, Bhāvanīyo, Vattā ca, Vacanakkhamo, Gambhīraṅca kathaṃ Kattā, and No caṭṭhāne niyojaye) while the receiver (Diabetic Patients) should receive and apply the message of the 7 Bojjhaṅga (The Seven Factors of Enlightenment) were (Sati, Dhammavicaya, Viriya, Piti, Passaddhi, Samādhī, Upekkhā) conveyed through various media channels appropriate to the modern context as shown in Figure 1



**Figure 1** Shown the Buddhist Communication Innovation Process for Promoting the Quality of Life of Diabetic Patients

## Conclusions and Recommendations

This research concluded that the current situation develops and presents the Buddhist innovation process in communication to promote the quality of life of diabetic patients at the Nai Khlong Bang Plakot Subdistrict Health Promoting Hospital. From the research results, after organizing the promotion activities with the 7 Bojjhaṅga (The Seven Factors of Enlightenment) for the study group, it resulted in the quality of life in all aspects, including physical, mental, social relationships, and overall quality of life, showed significant improvement, with average scores higher than those of the control group at a statistical significance level. Developing quality of life requires simultaneous development in both physical and mental dimensions. This is clearly demonstrated by the increased scores in mental health and social relationships, which also contributed to an improvement in overall quality of life. Notably, the greatest improvement was observed in the average score for mental quality of life. Promoting quality of life must be achieved



by combining medical and public health approaches with Buddhist principles since holistic health consists of physical and mental aspects, enabling their application for practical benefit in daily life. Policy recommendations should encourage and support the establishment of "diabetes schools" or "diabetic patient clubs." When applying research results and organizing training programs for diabetic patients or other groups, it is essential to prioritize holistic development, that is, the simultaneous promotion of both physical and mental well-being. Consequently, every training program should include a teaching component on Buddhist principles (The Message) delivered by knowledgeable and experienced "monks" (Messengers) who shift from traditional sermons to "contemporary teaching" methods that align with the modern era. These teachings should be disseminated through appropriate communication channels. In terms of service providers, ongoing training is necessary to develop personnel and organizations to a professional standard, which will ultimately enhance patient's health and quality of life.

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