ABSTRACT

The purpose of this study was to develop an instrument for assessing empowerment related to the health of Thai female factory workers. The study was based on the following research questions: (1) What are the components of an empowerment scale related to the health of female factory workers in Thailand? and (2) How valid and reliable is this newly developed empowerment scale related to the health of female factory workers in Thailand? Regarding the purpose and questions of the study, the researcher applied both qualitative and quantitative methods. Initially, the scale was developed from integrating the literature reviews with the in-depth individual interviews of 12 Thai female factory workers. Later, the steps of DeVellis (1991) were followed in order to construct the items of the scale. The 1,384 subjects were randomly recruited from ten factories in the manufacturing industry, which employs a total of 117,242 female factory workers in the south of Thailand.

For the components of the WHES, the four factors consisted of 59 items and explained a total variance of 39.276%. The resulting four factors included: (1) Assurance to control action of personal well-being, (2) The ability to influence a reciprocal community support in solving health problems, (3) Actions to achieve
visions and goals of health, and (4) Increasing a sense of self-awareness to become and remain healthy. The psychometric properties of the WHES included (1) a content validity index of 0.94, (2) construct validity using EFA on the total sample and then splitting the sample into two groups and performs it again. The results showed the similarity in factor items, factor loadings, variance percentage, eigenvalue and communalities, (3) hypothesis testing displayed significant correlations for most of the demographic variables and the WHES total score, (4) Cronbach’s coefficient alpha internal consistency reliability demonstrated the alpha of the four factors and displayed a total scale ranging from 0.811-0.956 indicating a highly reliable internal consistency, and (5) test-retest techniques showed the reliability coefficient of the WHES subscales and total scale ranged from 0.606-0.724 (p < .001). The innovative empowerment scale developed as a result of this study can be used to determine the extent of empowerment related to the health of Thai female factory workers. The information can be used to enable health care providers, particularly nurses, to promote and maintain women’s health such as improving health and safety in the workplace. Furthermore, the WHES can be used to advocate further research in various fields, such as nursing practice, education, research, and theory development.