

STUDY TO ASSESS THE KNOWLEDGE LEVEL OF DIABETIC PATIENTS REGARDING SELF-CARE ACTIVITIES IN A SELECTED DIABETIC CLINIC, AGARTALA, WEST TRIPURA

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ABSTRACT

The researcher conducted "A study to assess the knowledge level of diabetic patients regarding self-care activities in a selected diabetic clinic, Agartala, West Tripura". The objectives of the study were to assess the knowledge of diabetic patients regarding self-care activities & to find out the association of knowledge score of diabetic patients regarding hand & respiratory hygiene among school children with their selected demographic variables. Simple Random sampling technique was used. Data were collected from 60 diabetic patients in selected diabetic clinic at Office Lane, Agartala, West Tripura. Self-structured knowledge questionnaire was administered to assess the knowledge level of diabetic patients regarding self-care activities in a selected diabetic clinic. Result showed that out of 60 diabetic patients 60% of diabetic patients were male, 40% of diabetic patients were female and 91.7% of study sample were from Hindu religion, 8.3% were from Muslim religion. According to age group, (30-40) years were 23.3% sample, (41-50) years were 30% sample, (51-60) years were 36.7% sample & (61-70) years were 10% sample. In educational status, no formal education is 11.7% sample, primary education is 21.7% sample, higher secondary education is 31.6% sample & graduate & above education is 35% sample. 38.3% sample had govt. job, 20% sample had private job, 16.7% sample were daily worker & 25% sample were housewife. 76.7% diabetic patients belong to nuclear family, 23.3% diabetic patients belong to joint family. In family income (per month), Rs. <5,000/- were had 25% sample, Rs. (5,000-10,000)/- were had 30%, Rs. (10,000-15,000)/- were had 6.7%, & above Rs. 15,000/were had 38.3%. In Marital status, married were 86.7% sample, unmarried were 5% sample, widowed were 8.3% sample. According to family history of diabetes mellitus, yes for 63.3% sample & no for 36.7%. Source of Information, from friends 5%, from mass media 11.7%, from health personal 76.7% & from others 6.6%. Out of 60 Diabetic patients 58.3% patients had moderate knowledge & 41.7% patients had inadequate knowledge & no one had adequate



knowledge regarding self-care activities of diabetic patients. There was significant relationship between knowledge score with gender, educational status, family history of diabetic mellitus (demographic variables) & other demographic variables were not maintained significant relationship with knowledge score. Therefore, the research hypothesis was accepted & null hypothesis was rejected. The study can be concluded that the diabetic patients gain knowledge regarding self-care activities..

Keywords: Assess, Knowledge, self-care activities, diabetes mellitus, patient



INTRODUCTION

Diabetes Mellitus is a clinical syndrome characterized by hyperglycaemia due to absolute, or relative deficiency of insulin. Lack of insulin effects the metabolism of carbohydrates, protein & fat and cause a significant disturbance of water and electrolyte homeostasis. According to statistics from the International Diabetes Federation (IDF), India has more diabetes than any other Nation of the World. Current estimates page number of the diabetes in the country at about 62 million an increase of over 10 million from 2011 when estimates suggested that about 50.8 million people in the country were suffering from the disease. If you think the disease has already reached endemic proportions in the country, consider this. By the year 2030, over 100 million people in India are likely to suffer from Diabetes, said by researcher.

OBJECTIVES OF THE STUDY

- 1. To assess the knowledge of diabetic patients regarding self-care activities.
- 2. To find out the association of knowledge score of diabetic patients regarding self-care activities with their selected demographic variables.

RESEARCH METHODOLOGY

Research approach for the study was Non-Experimental research approach. The design adopted for this study was descriptive design. The final study was conducted in a diabetic clinic, Office Lane, Agartala, West Tripura. Target population was diabetic patients who are attending in Diabetic clinic. In this study sample was Diabetic patient. Sample consists of 60 (Sixty) diabetic patients who were visited in diabetic clinic. Simple random sampling technique was used to select the sample. Tools were developed and used for data collection were socio-demographic data, & structured questionnaire.

RESULTS

The data are organized & presented in the following sections.

Section: -1: Findings related to demographic data among diabetic patients.

60% of diabetic patients were male, 40% of diabetic patients were female and 91.7% of study sample were from Hindu religion, 8.3% were from Muslim religion. According to age group, (30-40) years were 23.3% sample, (41-50) years were 30% sample, (51-60) years were 36.7% sample & (61-70) years were 10% sample. In educational status, no formal education is 11.7% sample, primary education is **21.7%** sample, higher secondary education is **31.6%** sample &



graduate & above education is **35%** sample. **38.3%** sample had govt. job, **20%** sample had private job, **16.7%** sample were daily worker & **25%** sample were housewife. **76.7%** diabetic patients belong to nuclear family, **23.3%** diabetic patients belong to joint family. In family income (per month), Rs. <5,000/- were had **25%** sample, Rs. (5,000-10,000)/- were had **30%**, Rs. (10,000-15,000)/- were had **6.7%**, & above Rs. 15,000/- were had **38.3%**. In Marital status, married were **86.7%** sample, unmarried were **5%** sample, widowed were **8.3%** sample. According to family history of diabetes mellitus, yes for **63.3%** sample & no for **36.7%**. Source of Information, from friends **5%**, from mass media **11.7%**, from health personal **76.7%** & from others **6.6%**.

Section: -2: Findings related to assess the knowledge level regarding self-care activities among diabetic patient.

Table-1: Frequency & percentage	distribution	of knowledge score o	f diabetic patients
N = 60			

Level of knowle	dge scoring	Knowledge level of diabetic patient				
Level of Knowledge	Scoring	Number of diabetic patients	Percentage			
Adequate	(19-26)	0	0			
Knowledge						
Moderate	(10-18)	35	58.3%			
Knowledge						
Inadequate	(1-9)	25	41.7%			
Knowledge						
Total	26	60	100%			

Maximum score: 26, Minimum score: 1



<u>Table-2</u>: Aspect wise mean score of knowledge level of diabetic patients regarding selfcare activities.

N=60

Sl. No.	Knowledge	Statements	Max	Diabetic patient's knowledge		
	aspect		score	Mean Mean %		SD
1.	Diabetes, its causes,	4	4	1.8	3	0.87
	sign &symptoms					
2.	Diet pattern	4	4	1.07	1.8	0.66
3.	Exercise	5	5	2.9	4.8	1.48
4.	Medication	8	8	5.23	8.72	3.65
5.	Foot care	3	3	0.98	1.63	0.60
6.	Oral care	1	1	0.73	1.22	0.69
7.	Bowel pattern	1	1	0.13	0.22	0.29
8.	Total	26	26	12.9	21.5	2.78

<u>Section: -3:</u> Findings related to association between knowledge level on self-care activities among diabetic patients & demographic variables.

Table: -3: Chi-square (χ^2) on knowledge score of diabetic patients regarding self-careactivitieswiththeirselecteddemographicvariables.N= 60

Sl.	Sample	Category	Sam	Knowledge scores of diabetic patients				Calcula
Ν	character		ple	Inadequ	Percent	Moder	Percent	ted
0.				ate	age	ate	age	χ^2 -value
				(N)	(%)	(N)	(%)	
1.	Gender:	Male:	25	15	25	10	16.7	10.15*
		Female:	35	28	46.7	7	11.6	
2.	Religion :	Hindu:	55	27	45	28	46.7	0.74 NS
		Muslim:	5	2	3.3	3	5	
3.	Age	(30-40)	14	8	13.3	11	18.3	0.0518
	<u>group</u>	(41-50)	18	3	5	16	26.7	NS



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		(51-60)	22	8	13.3	5	8.3	
			6	6	10	3	5	
		(61-70)						
4.	Types of	Nuclear:	46	35	58.3	11	18.3	0.05 NS
	<u>family</u>	Joint:	14	5	8.3	9	15	
5.	Educatio	- No	7	2	3.3	5	8.3	10.78*
	<u>nal status</u>	formal						
		educatio	13	8	13.3	5	8.3	
		n						
		- Primary	21	15	25	6	10	
		educatio		10		0	10	
		n	19	9	15	10	16.7	
		- Higher	19	9	15	10	10.7	
		educatio						
		n						
		- Graduat						
		e &						
		above						
6.	<u>Occupati</u>	- Private	12	8	13.3	4	6.7	1.805
	<u>onal</u>	job	23	9	15	14	23.3	NS
	<u>status</u>	- Govern						
		ment	10	5	8.3	5	8.3	
		job						
		- Daily	15	3	5	12	20	
		worker						
		- House						
		wife						
7.	Family	<5,000	15	8	13.3	7	11.7	5.59 NS
/.	income	5,001-	18	10	16.7	8	13.3	5.57115
			4	10		8 3	5	
	(<u>per</u>	10,000			1.7			
	<u>month)</u>	10,001-	23	8	13.3	15	25	
		15,000						
		Above						
		15,000						



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8.	<u>Marital</u>	Married	52	30	50	22	36.7	4.52 NS
	<u>status</u>	Unmarried	5	3	5	2	3.3	
		Widowed	0	0	0	0	0	
		Divorced	3	1	1.7	2	3.3	
9.	Family	Yes:	38	8	13.3	30	50	8.811*
	<u>history of</u>							
	<u>diabetes</u>	No:	22	12	20	10	16.7	
	<u>mellitus</u>							
10	Source of	- Friends	3	1	1.7	2	3.84	1.727
	<u>informati</u>	- Mass	7	2	3.3	5	8.3	NS
	<u>on</u>	media						
		- Health	46	10	16.7	36	60	
		professi						
		onal						
		- Others	4	1	1.7	3	5	

NB: NS – Not Significant, *Significant at 0.05 level (i.e. p<0.05).

SUMMARY:

This chapter dealt with the analysis & interpretation based on the objectives of the study. The data were analysed using descriptive & inferential statistics & presented under three sections with tables. The study findings indicate that research hypothesis & null hypothesis was rejected. All the participants & the doctor of diabetic clinic were very co-operative & met the final study smooth & successful.



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