

A STUDY TO ASSESS THE EFFECTIVENESS OF AN INFORMATION BOOKLET REGARDING KNOWLEDGE AND PRACTICE OF DIABETIC PATIENTS TOWARDS THE SELF-CARE ACTIVITIES FOR QUALITY OF LIFE IN SELECTED CLINICS AND HOSPITALS IN KOTA (RAJ)

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ABSTRACT

The present study was aimed to assess the effectiveness of an information booklet regarding knowledge and practice of diabetic patients towards the selfcare activities for quality of life in selected clinics & hospital in Kota, Rajasthan. The research approach evaluative and pre experimental 1 group design pre and post test was adopted the research design Quasi Experimental for the study. 600 male and female diabetic patients was selected by using simple random sampling. Socio-Demagogic profile was used to assess to personal information of diabetic patients and self structured questionnaire was used to assess knowledge and practice of diabetic patients. Pre and post test was conducted to assess the diabetic patients towards the self care activities for quality of life. Followed by an information booklet on self care activities of diabetic patients was taken. The study was found that effectiveness of an information booklet on self care activities of diabetic patients improved the self care activity for quality of life in selected clinic and hospitals in Kota, Rajasthan.

Keywords: Diabetic Mellitus, Self Care Activity, Information Booklet, Knowledge and Practice

INTRODUCTION

The main goals of the world health day 2016 campaign are to increase awareness about the rise in diabetic. In 2014 the global prevalence of diabetic was estimated to be the 9% among adult age 18 plus year. W.H.O. Report, 2013 estimated 8% of type 2 diabetes is preventable by changing diet, increasing physical activity and improving the living environment without effective prevention & control programme, the incidence of diabetes is likely to continue rising globally.

In 2012 estimated 1.5 million death were directly caused by diabetes type 2. More than 80% of diabetes death occur in low and middle income countries. WHO projects that diabetes will be 7th leading cause of death in 2030. The prevalence estimated of diabetes for all the age group was estimated in 2013 to be 2.85% & 4.4% in 2030.

OBJECTIVES OF THE STUDY

1. To assess the knowledge of diabetic patient towards the self care activities for quality of life.
2. To measure the practices of diabetic patient towards the self-care activities for quality of life.
3. To prepare and administer an information booklet towards the assessment of effective knowledge of self-care activities for quality of life.
4. To evaluate the effectiveness of an information booklet regarding practice of diabetic patient towards the self-care activities for quality of life by comparing pre-test results with the post test results.
5. To find out the association of mean pretest knowledge score of selected demographic variables of diabetic patient towards the self-care activities for quality of life.
6. To find out the association of mean pretest practice score of selected demographic variables of diabetic patient towards the self-care activities for quality of life.
7. To find out the co-relation between knowledge and practice score of diabetic patient towards the self-care activities for quality of life.

MATERIAL AND METHODS

Research approach – Evaluative Research approach

Research Design – Quasi Experimental Research Design

Method – Pre-experimental 1 Group design pre & post test

Setting – Diabetic clinic & MBS hospital, Kota, Rajasthan

Population – Diabetic patient at diabetic clinic & MBS hospital, Kota, Rajasthan

Sample – All male, female diabetic patients of diabetic clinic & MBS hospital, Kota, Rajasthan

Sample size – 600 male & female diabetic patients

Sample technique – Simple random sampling

Tool & data collection – Part I Socio-demographic Performa,

Part II Structured questionnaire on knowledge

Part III Observation checklist (Practice)

Data collection – Data were collected from September 2014 to December 2015 at diabetic clinic & MBS hospital, Kota, Rajasthan

Plan for data analysis – The obtained data was analysed in term of the objectives and hypothesis of the study be both descriptive and inferential statistics

RESULTS

Section: 1. Description of the socio demographic characteristics of the study subjects

Table: 1. Distribution of Subjects According To Their Age

N=600

Variables	Frequency	Percentage (%)
40-50	365	60.83
51-60	169	28.17
61-70	57	9.50
71 and above	9	1.50
Total	600	100.00

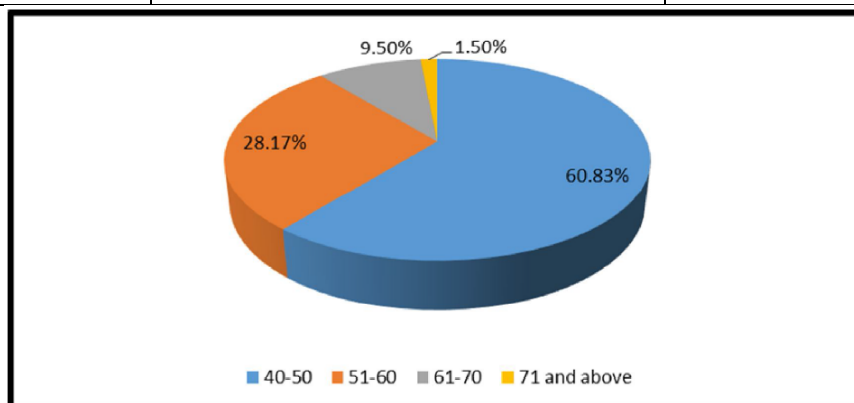


Figure: 1. Distribution of Subjects According To Their Age

Table: 2. Distribution of Subjects According to Their Gender.

N=600

Variables	Frequency	Percentage (%)
Male	331	55.17
Female	269	44.83
Total	600	100.00

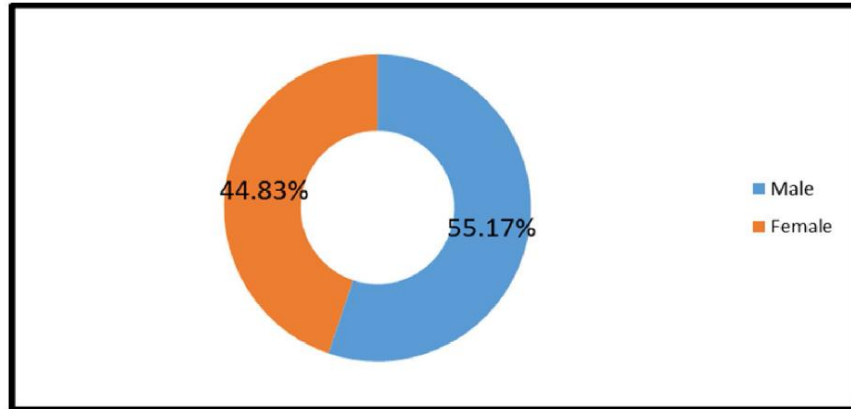


Figure: 2. Distribution of Subjects According To Their Gender

Table: 3. Distribution of Subjects According To Their Marital Status

N=600

Variables	Frequency	Percentage (%)
Single	52	8.67
Married	452	75.33
Widow	87	14.50
Divorced	9	1.50
Total	600	100.00

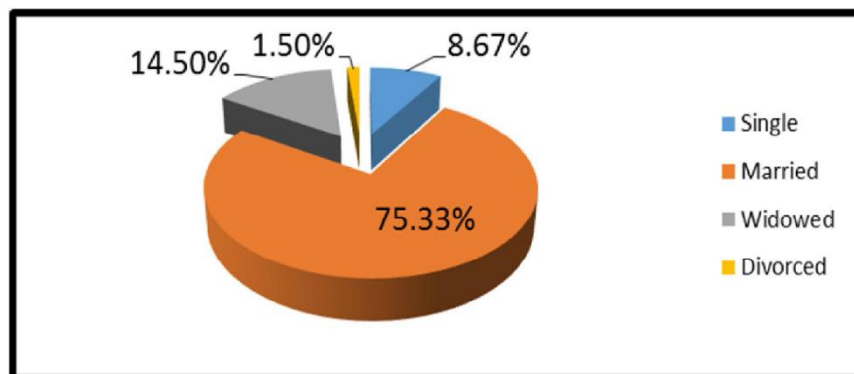


Figure: 3. Distribution of Subjects According To Their Marital Status

Table: 4. Distribution of Subjects According To Their Religion

N=600

Variables	Frequency	Percentage (%)
Hindu	420	71.00
Muslim	112	18.66
Christian	49	7.17
Any Others	19	3.17
Total	600	100.00

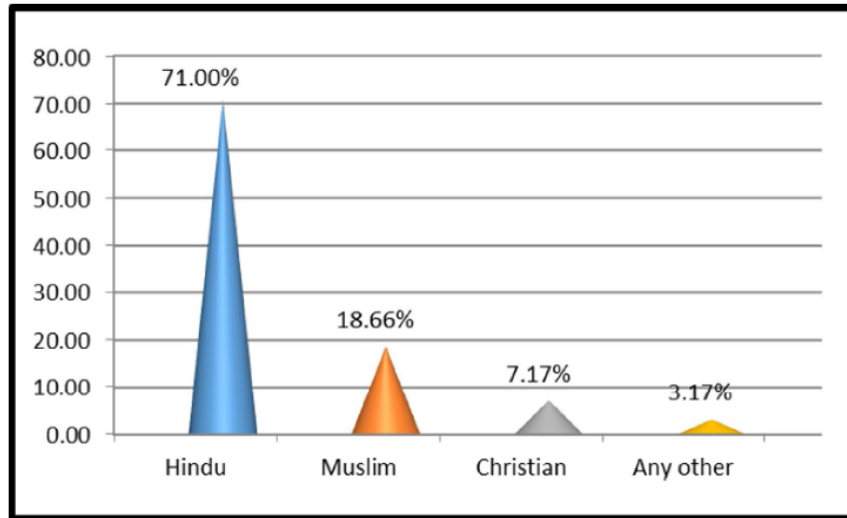


Figure: 4. Distribution of Subjects According To Their Religion

Table: 5. Distribution of Subjects According To Their Education Status

N=600

Variables	Frequency	Percentage (%)
Primary education	165	27.50
Secondary education	204	34.00
Graduate	90	15.00
Post graduate	108	18.00
No formal study	33	5.50
No formal study	600	100.00

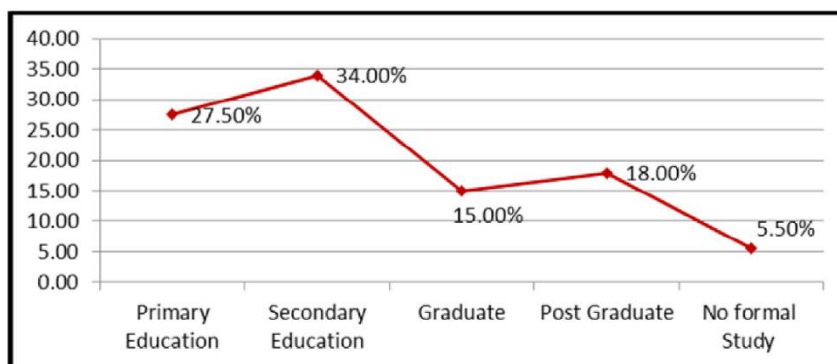


Figure: 5 Distribution of Subjects According To Their Education Status

Table: 6. Distribution of Subjects According To Their Area of Residence

N=600

Variables	Frequency	Percentage (%)
Urban	479	79.83
Rural	121	20.17
Total	600	100.00

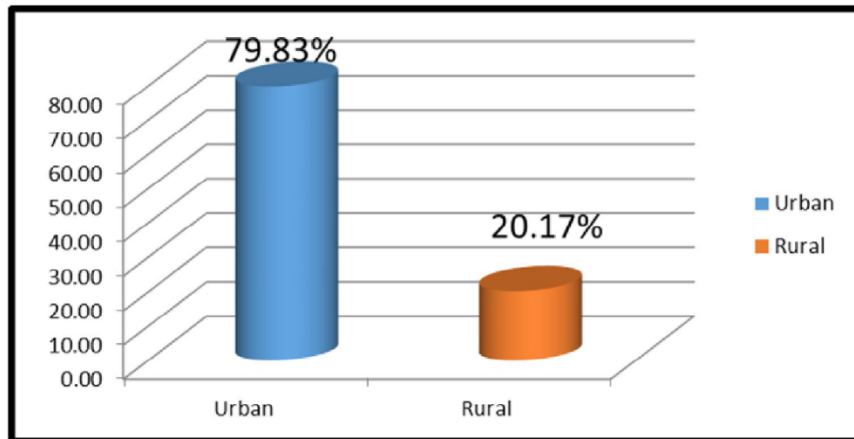


Figure: 6. Distribution of Subjects According To Their Area Of Residence

Table: 7. Distribution of Subjects According To Their Family Status.

N=600

Variables	Frequency	Percentage (%)
Nuclear family	357	59.50
Joint family	243	40.60
Total	600	100.00

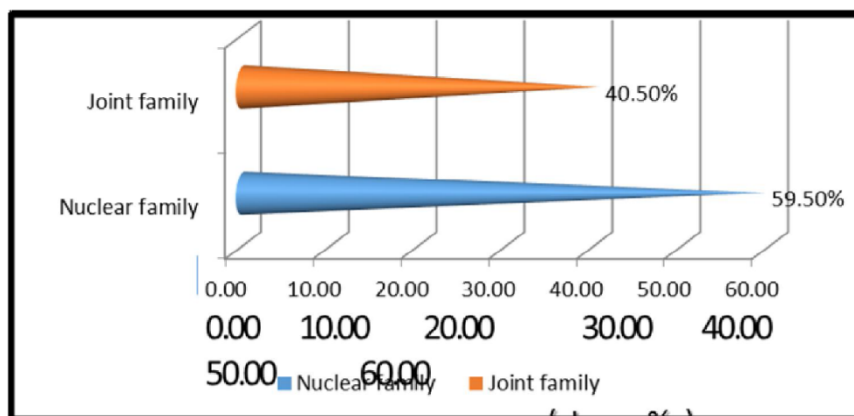


Figure: 7. Distribution of Subjects According To Their Family Status

Table: 8. Distribution of Subjects According To Their Occupation.

N=600

Variables	Frequency	Percentage (%)
Private employee	268	44.67
Businessman	107	17.83
Govt. employee	75	12.50
Agriculture	50	8.33
Total	600	100.00

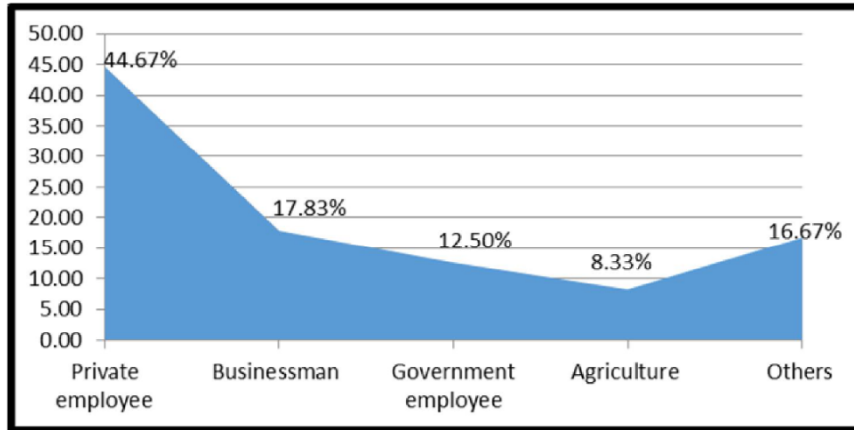


Figure: 8. Distribution of Subjects According To Their Occupation

Table: 9. Distribution of Subjects According To Their Family Monthly Income.

N=600

Variables	Frequency	Percentage (%)
Rs. 2500-5000	95	15.83
Rs. 5001-10000	127	21.17
Rs. 10001-20000	220	36.67
Rs.20001-and above	158	26.33
Total	600	100.00

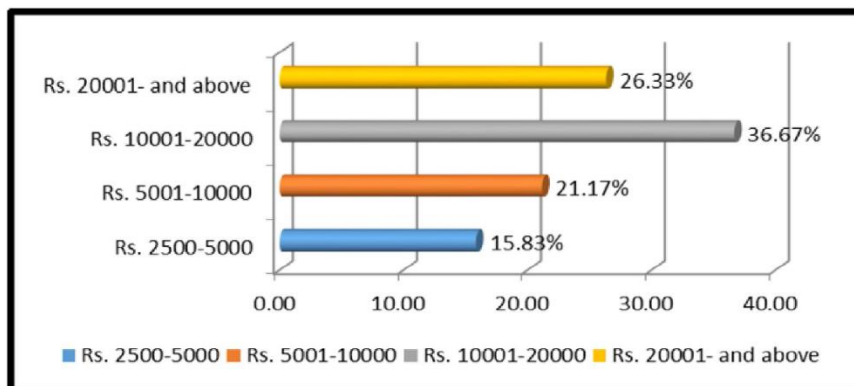


Figure: 9. Distribution of Subjects According To Their Family Monthly Income

Table: 10. Distribution of Subjects According To Their Source of Information

N=600

Variables	Frequency	Percentage (%)
Radio	155	25.83
T.V.	185	30.64
Newspaper	143	23.83
Magazine	50	8.33
Friends	67	11.17
Total	600	100.00

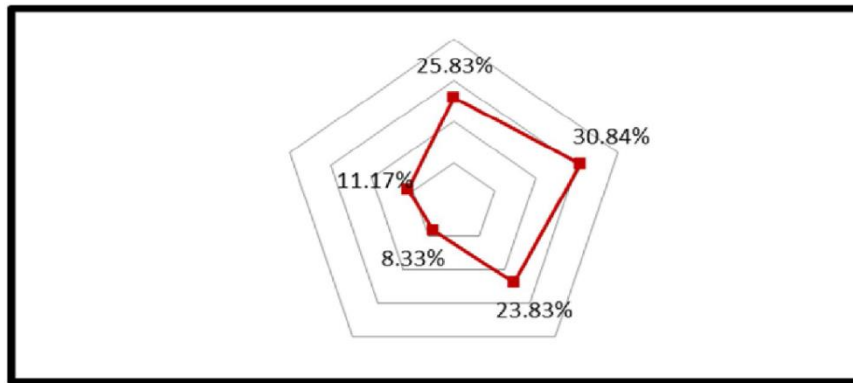


Figure: 10. Distribution of Subjects According To Their Source of Information

Table: 11. Distribution of Subjects According To Their Family History of Diabetes

N=600

Variables	Frequency	Percentage (%)
Yes	408	68.00
No	192	32.00
Total	600	100.00

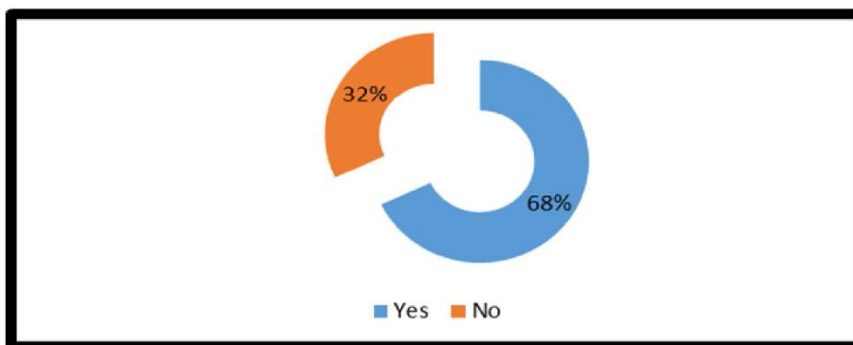


Figure: 11. Distribution of Subjects According To Their Family History of Diabetes

Table: 12. Dimension Wise Pre-test and Post-test Score Comparison on Knowledge Questionnaire.

N=600

Dimension	Test	Mean	SD	Difference mean	t value	d.f.	p-value	Significance
Diet	Pre-test	2.41	1.39	-2.31	-37.87	599	<0.001	Extremely significant S**
	Post-test	4.73	0.522					
Medication	Pre-test	4.67	1.90	-2.87	-30.56	599	<0.001	Extremely significant S**
	Post-test	7.54	1.18					
Personal Hygiene	Pre-test	0.69	0.46	-0.46	-12.86	599	<0.001	Extremely significant S**
	Post-test	1.16	0.71					
Exercise	Pre-test	1.33	0.64	-1.79	-46.31	599	<0.001	Extremely significant S**
	Post-test	3.13	0.71					
Testing for blood sugar	Pre-test	1.88	0.74	-1.01	-23.97	599	<0.001	Extremely significant S**
	Post-test	2.91	0.73					

Significant P<0.001 level

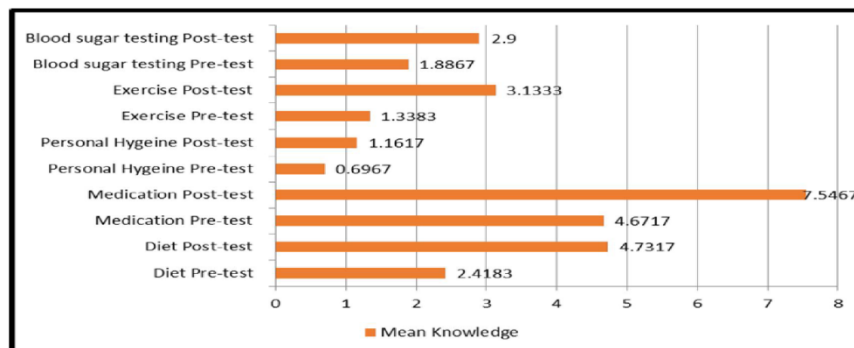


Figure: 12 Dimension Wise Knowledge Mean Scores of Pre & Post Test

Section: 3. Dimension Wise Pre Test & Post Test Score Comparison on Practice (Observation Checklist) of Self Care Activities Questionnaire

Table: 13. Dimension Wise Pre-test and Post-test Score Comparison of (Practice) Observation Checklist of Self-care Activities Questionnaire

N=600

Dimension	Test	Mean	SD	Difference mean	t value	d.f.	p-value	Significance
Diet	Pre-test	27.33	4.37	-10.68	-70.55	599	<0.001	Extremely significant S**
	Post-test	44.15	3.62					
Medication	Pre-test	15.59	3.00	-10.99	-96.79	599	<0.001	Extremely significant S**
	Post-test	35.54	4.26					
Personal Hygiene	Pre-test	14.24	3.40	-10.44	-43.66	599	<0.001	Extremely significant S**
	Post-test	28.68	7.24					
Exercise	Pre-test	24.95	3.90	-20.10	-93.06	599	<0.001	Extremely significant S**
	Post-test	45.95	3.85					
Testing for blood sugar	Pre-test	18.24	5.13	-10.72	-76.63	599	<0.001	Extremely significant S**
	Post-test	35.53	2.11					

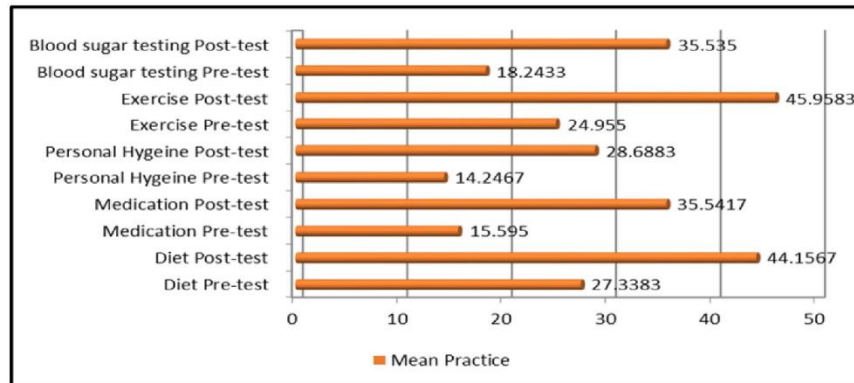


Figure: 13. Dimension Wise Practice Mean Scores of Pre & Post Test

Section: 4. -Association between Knowledge Score and Selected Socio Demographic Variables

Table: 14. Association between Knowledge Scores and Selected Demographic Variables

N=600

Variables	Pretest		Level of Significance
	d.f.	χ^2 value	
Age	12	11.5	Not Significant
Gender	4	7.64	Not Significant
Marital status	12	16.43	Not Significant
Religion	12	14.27	Not Significant
Education	16	29.26	Significant
Area of Residence	4	12.69	Significant
Family Status	4	11.06	Significant
Occupation	16	29.9	Significant
Family monthly income	12	30.7	Significant
Source of information	16	30.54	Significant
Family History of Diabetes	4	18.97	Significant

Significant P<0.001 level NS<0.05

Section 5: Association between Practice Score & Selected Demographic Variables

Table: 15. Association between Practice Scores and Selected Demographic Variables.

N=600

Variables	Pretest		Level of Significance
	d.f.	χ^2 value	
Age	12	12.7	Not Significant
Gender	4	4.93	Not Significant
Marital status	12	14.53	Not Significant
Religion	12	11.45	Not Significant
Education	16	29.26	Significant
Area of Residence	4	12.69	Significant
Family Status	4	11.06	Significant
Occupation	16	29.9	Significant
Family monthly income	12	30.7	Significant
Source of information	16	30.54	Significant
Family History of Diabetes	4	18.97	Significant

Significant P<0.001 level NS<0.05

Section: 6: Correlation between knowledge and practice of self-care activities scores

Table : 16. Distribution of Co-Relation between Pre-test & Post-test Scores of Knowledge & Practice

N=600

S.No.	Scales	Total pretest correlation knowledge	Total posttest correlation practice
1.	Pretest knowledge & practice score	$r=0.24^*$	1
2.	Posttest knowledge & practice score	1	$r=0.71^*$

DISCUSSION

The study pre-test finding that Diabetic patients had regarding knowledge and practice towards the self care activities of quality of life, the findings of data present indicates that there was improvement of the knowledge and practice (Observation checklist) of the diabetic patients regarding self care activities of longevity of life with the effectiveness of an information booklet.

The finding of the study all to conducted effectiveness of other educational methods can be evaluated similar study could be considered on the family members of diabetic mellitus in the community setting.

CONCLUSION

The study was carried out to assess the effectiveness of an information booklet on the knowledge & practice towards the self-care activities changes that are required to the disease among diabetes patients with the aim of preparing on educational module on self-care activities among Diabetes Mellitus.

Findings showed that an information booklet resulted in knowledge gain improved practice in a favourable direction. The correlation between knowledge and practice was positive indicating that increased knowledge improved the positive practice. There were select socio demographic variables having statistically significant association with post-test knowledge and practice score.

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