CHAPTER V
DISCUSSION

This chapter presents the major findings of this study and discusses them in relation to similar studies conducted by other researchers.

Aim of the study was to evaluate the effectiveness of self management training program on type II diabetes mellitus among diabetic patients in terms of knowledge, attitude and Practice. Data collection and analysis were carried out based on the objectives and hypotheses of the study.

Findings of study have been discussed with reference to the objectives and hypotheses stated under the following sections.

Section 1: Findings related to sample characteristics.

Section 2: Findings related assessment of knowledge, attitude and Practice.

Section 3: Findings related to effectiveness of self management training program on knowledge, attitude and practice.

Section 4: Findings related to association between pre-test level of knowledge, attitude and practice with selected socio-demographic variables.

Section 5: Findings related to correlation between knowledge, attitude and practice.

1. Findings related to sample characteristics.
   - **Age** - Majority of samples in both experimental & control groups (174 & 170) were aged between 55-63 whereas less number of samples in both groups (15 & 25) were aged between 31-39.
   - **Gender** – Majority of the samples in both experimental & control groups (183 & 195) were female.
   - **Marital status** - Majority of the samples in experimental & control groups (307 & 279) were married.
   - **Area of residence** – Majority of respondents in experimental & control groups (347 & 323) were residing in rural area.
   - **Education** - Majority of samples in experimental & control groups (180 & 151) had primary education.
- **Occupation**: Majority of the samples in experimental & control groups (138 & 157) were farmers by their occupation.

- **Family Income**: Majority of the samples in experimental group (157) had family income between Rs 5001 - 10000 & less than 5000 Rs in control group (124).

- **Family history of diabetes**: Majority of the samples both in experimental group & control group (269 & 229) did not had any family history of diabetes.

- **Duration of DM**: Majority of the samples in both experimental group (119) & control group (128) were suffering from DM, duration of which ranges between 1-5 years.

- **Treatment of DM**: Majority of the samples in experimental & control group (268 & 305 respectively) were on oral hypoglycemic treatment.

- **Co morbidity**: Majority of the samples in both groups (172 in experimental & 233 in control group respectively) are having vascular diseases along with Diabetes.

- **Life style habits**: Majority of the samples in experimental & control group (181 & 173) do not have any bad life style habits whereas average number of samples are having unhealthy life style habits such as smoking, drinking alcohol.

- **Source of knowledge**: Majority of the information in both groups related to the management of Diabetes was provided by health care professionals (204 in experimental & 170 in control).

- **Self assessment**: Majority of the samples in both groups (247 & 303) had poor self assessment regarding management of DM.

2. **Findings related to assessment of knowledge, attitude and Practice.**

   Findings of pre-test knowledge scores shows that, out of 360 participants in experimental group 126 falls under poor, 225 in moderate, and 09 in good category. Similarly in control group, out of 351 participants, 135 belong to poor, 208 belong to average and 08 in good knowledge category.

   It was observed from the pre-test attitude scores that out of 360 participants in experimental group, 41 falls in poor, 259 in moderate, and 60 in good category. Similarly in control group out of 351 participants, 38 belong to poor, 218 belong to average and 95 in good attitude category.
Overall pre-test practice scores of both groups’ shows that out of 360 participants in experimental group 246 falls under poor, 109 in moderate, and 05 in good category. Similarly in control group out of 351 participants, 233 belong to poor, 96 belong to average and 22 in good attitude category.

3. Findings related to effectiveness of self management training program on knowledge, attitude and practice.

Since the population was not normally distributed, Mann Whitney ‘U’ test was used to find effectiveness of self management training program. It was evident that the median post test KAP scores of experimental group were higher than the control group. P value was less at 0.01 level of significance. There was a significant difference exists between median values of experimental & control group with respect to knowledge, attitude & practice scores. Hence the research hypothesis was failed to reject & concluded that difference between populations median was statistically significant.

“Recent studies highlight barriers of diabetes educational programs in Iran and also present some successful experiences carried out for improving the knowledge, attitude, and practice (KAP) of type-2 diabetic patients. The results of this study showed that recent educational programs in Iran improved KAP level. Patients’ KAP increases as their condition worsens/progresses. Hence education should be considered as a priority for newly diagnosed patients and those with lower KAP levels before occurrence of diabetes complications\(^{122}\).”

“A study has been conducted to obtain goals such as management of type 2 diabetes mellitus includes ability and empowerment of the patient to change lifestyle, maintain an adequate diet and physical activity, manage the disease therapeutic patient education (TPE) is considered a crucial element not only in the treatment but also in the prevention of type 2 diabetes\(^{133}\).”

4. Findings related to association between pre-test level of knowledge, attitude and practice with selected socio - demographic variables.

Analysis with the pre - test knowledge scores of demographic variables shown that the obtained chi square value was less than the table value at 0.05 level of
significance. There was no significant association between pre test knowledge scores with demographic variables such as age, gender, and marital status, area of residence, Education status, occupation, family income, life style habits & family history of DM. Hence the research hypothesis was rejected.

It was evident from the pre-test attitude scores of demographic variables that the obtained chi square value was more than the table value in selected variables such as area of residence, Education status & family income at 0.05 level of significance. There was significant association in above 3 variables & hence the research hypothesis was failed to reject. Obtained chi square value was less than the table value in selected variables such as age, gender, marital status, occupation, life style habits & family history of DM & there was no significant association in those variables hence the research hypothesis was rejected.

Pre test practice scores of demographic variables shows that the obtained chi square was more than the table value in selected variables such as marital status, Education status, Occupation & family income at 0.05 level of significance. There was significant association in above variables & hence the research hypothesis was failed to reject. Obtained chi square is less than the table value in selected variables such as age, gender, area of residence, life style habits & family history of DM & there was no significant association in those variables hence the research hypothesis was rejected.

5. Findings related to correlation between knowledge, attitude and practice of type 2 diabetes mellitus patients.

It was observed that Mild positive correlation (0.06) exists between post test knowledge & attitude scores & Moderate positive correlation between post test knowledge & practice scores (0.66).

“A cross sectional study was conducted to assess knowledge, attitude and self-care practices related to diabetes in an urban population in Pakistan. The results show that most participants had a negative attitude and very little knowledge regarding diabetes. There is a need for increased diabetes related education and for developing positive attitudes towards reduction of diabetes related complications\textsuperscript{134}.

A cross sectional study was conducted to find the effect of diabetic knowledge & attitude on self management & quality of life of people with type 2 diabetes mellitus
(T2DM). The findings suggest a theoretical basis to direct the development of appropriate health programs & interventions for improving QOL in people with T2DM & warrant replication in diverse samples\textsuperscript{135}.

A cross sectional study was conducted to examine a model describing the relationship between diabetes knowledge, attitudes, self management & QOL of people with T2DM based on previous research linking pairs of variables. Results shown that diabetes knowledge, attitude & self management are important factors that can impact the QOL among people with type 2 diabetes\textsuperscript{136}.

A cross sectional study was carried out to evaluate the knowledge, attitude & Practices among type 2 diabetics attending outpatient diabetes clinic. The results shown that attitude related to diabetes was acceptable in the majority of the sample while knowledge & self care practices were insufficient. It was concluded that patients need to be educated on how to prevent diabetes complications. Health care providers should promote self care activities in the process of diabetic education\textsuperscript{137}.

“A study was conducted to evaluate the knowledge, attitude & practice of type 2 diabetes patients regarding self care practices towards diabetes. The results shown that the patients who regularly followed self care practices had sound knowledge regarding the disease, achieved better glycemic control\textsuperscript{138}.

A cross sectional study was conducted to assess the knowledge, attitude & Practice among type 2 diabetes mellitus patients regarding diabetes. Results revealed that the knowledge among the respondents was poor. The attitude & practices were not satisfactory. There felt a need for regular conduct of awareness programs to improve attitude & Practices of diabetic patients to promote better compliance towards diet, exercise & medications\textsuperscript{139}.”