

SPIRITUAL WELL-BEING, COPING MECHANISM, AND SELF-CARE MANAGEMENT AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS IN MALAYSIA

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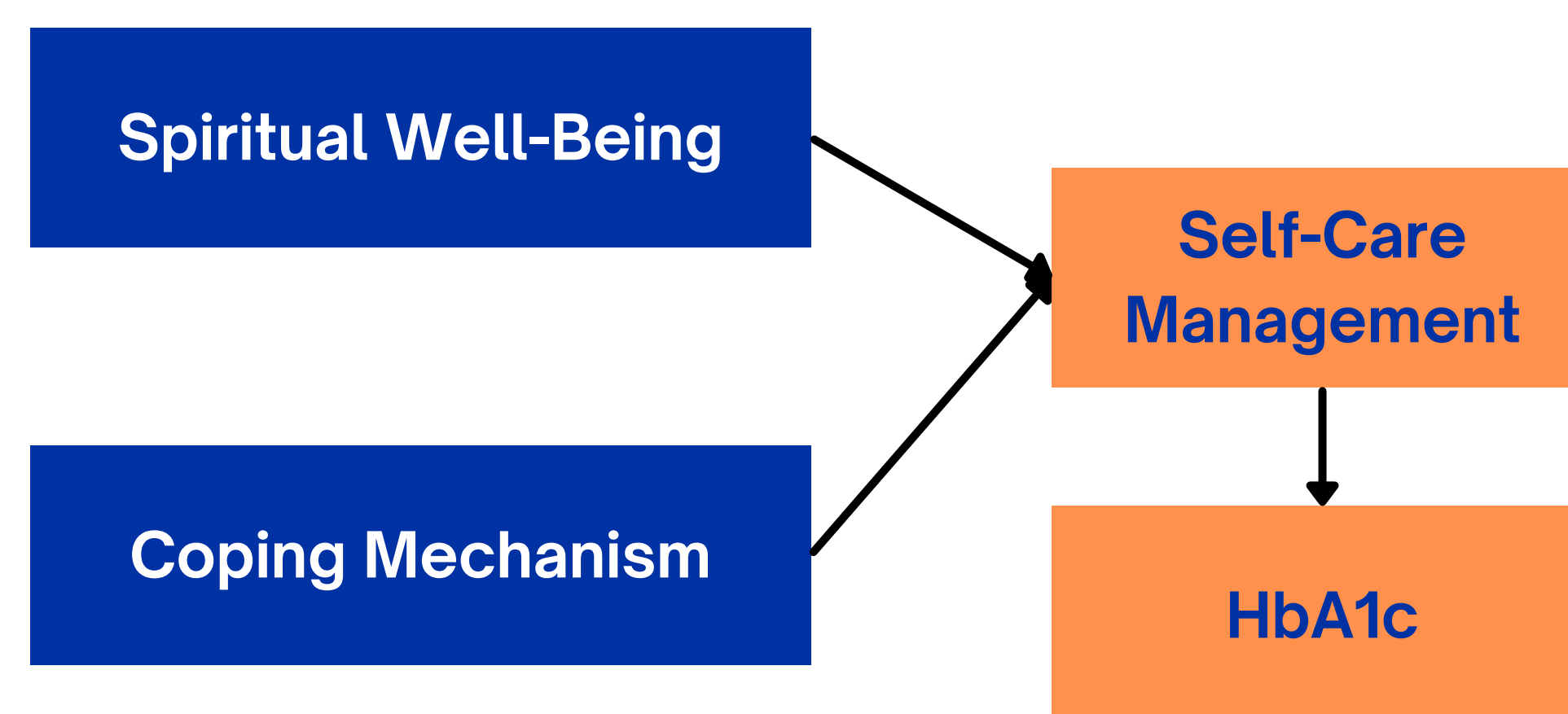
WHAT WE LEARNED

The purpose of this study was to determine how spiritual well-being and coping mechanisms influence self-care management among patients with Type 2 Diabetes Mellitus. This cross-sectional research study also examined how self-care management impacts HbA1c levels. The major conclusion of this study was that people with high spiritual well-being and coping mechanisms exhibit positive self-care management, which is later reflected in their HbA1c results.

INTRODUCTION

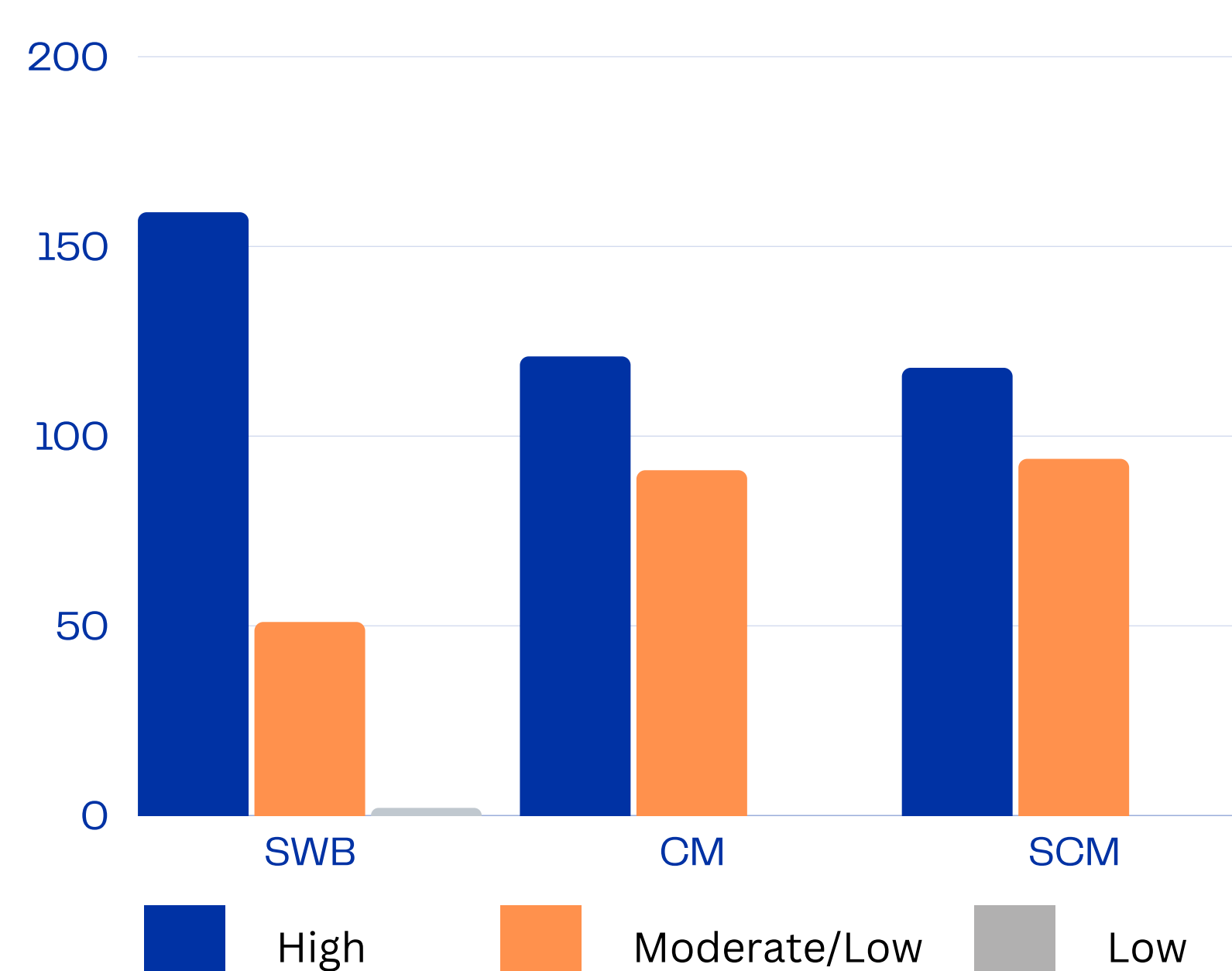
Type 2 Diabetes Mellitus (T2DM) is one of the major public health concerns in the 21st century in developing and developed countries³. In Malaysia, T2DM is a prevalent chronic condition⁵ with significant implications for individuals' well-being. A key factor in diabetes health outcomes is self-care, which leads to metabolic control of blood glucose levels⁸. Earlier studies have shown that self-care management^{1,2,6} influenced by spiritual well-being and coping mechanism. Amidst the multifaceted challenges of managing T2DM, exploring the intersections of spiritual well-being, coping mechanisms, and self-care management becomes imperative. This poster aims to delve into the nuanced relationship between these factors among T2DM patients in Malaysia.

FRAMEWORK



FINDINGS

Level of Spiritual Well-Being (SWB), Coping Mechanism (CM), & Self-Care Management (SCM)



Relationship between sociodemographic data and self-care management

Variables	Self-Care Management	
	χ^2	p-value
Religion	11.178	0.011*
Level of education	5.739	0.057

*P<0.05

- A positive correlation between self-care management with age ($\rho = 0.143, p, 0.05$)
- A negative medium correlation between self-care management with HbA1c ($\rho = -0.461, p < 0.001$)

Results of stepwise regression analysis related to the correlation of variables of coping mechanisms and spiritual well-being with self-care management in T2DM patients

Criterion variable	Predictive variables	R2	P-value	95% Confidence interval	
				Lower bound	Upper bound
Self-Care Management	Positive Coping	0.499	<0.001*	3.186	4.192
	Positive Coping	0.509	<0.001*	2.645	3.917
	Existential Well-Being		0.042*	0.016	0.941
	Positive Coping	0.524	<0.001*	2.652	3.907
	Existential Well-Being		0.001*	0.439	1.756
	Religious Well-Being*		0.011*	-1.540	-0.203

*P<0.05

STRENGTHS & LIMITATIONS

- Further improvement in diabetic management planning as it allows healthcare providers to understand patients' spiritual well-being and their coping mechanism towards the disease.
- Promote healthcare providers' awareness on the important role of spiritual well-being and coping mechanism in diabetic patients to empower patient handling the diabetes.
- The sampling method which was simple random sampling used in this study also enabled the samples to be representative of the population.
- Use of self-reported questionnaires in this study may introduce bias to the study.

IMPLICATIONS

- To ensure spiritual care provision is provided as needed for chronic patients such as T2DM.
- To be replicated on a larger scale of sample size due to the increased number of patients in this country.
- The use of a longitudinal design is recommended and is needed to examine the causal relationship.

OBJECTIVES

- To determine the level of spiritual well-being, coping mechanisms, and self-care management among patients with T2DM in HCTM.
- To identify the relationship between spiritual well-being and self-care management.
- To identify the relationship between coping mechanisms and self-care management.
- To identify the relationship between socio-demographic and self-care management.
- To identify the relationship between self-care management and HbA1c result.

METHODS

Design: Cross-sectional study.

Setting & Sample: A university hospital in Kuala Lumpur, Malaysia. 212 patients with T2DM recruited from Medical Wards and Orthopedics Wards used simple random sampling.

Data Collection:

- Socio-Demographic Data
- Spiritual Well-Being Scale (SWBS)⁷
- GlucoCoper⁴
- Diabetes Management Self-Efficacy Scale (DMSES)⁸
- HbA1c result

The data of the study were collected between March 2023 and June 2023.

Statistical Analysis

Descriptive and regression analysis.

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