

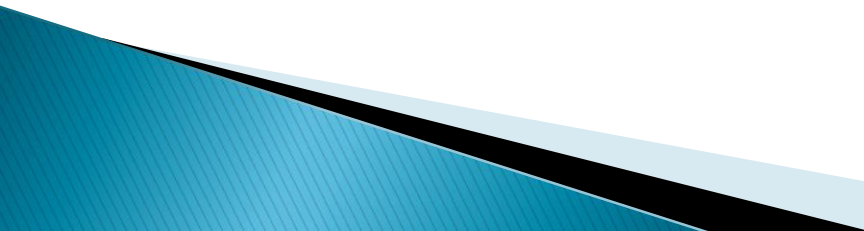


# Diabetes Self Management and Patients' Characteristics: Evidence from the Ramallah Governorate Clinics, Occupied Palestine

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# Background

- Diabetes Mellitus (DM) is one of the leading causes of morbidity and mortality in the Occupied Palestine.
  - According to the Palestine STEPwise Survey 2010–2011, the prevalence of (DM) among adults aged 25–64 years was 12.5%.
  - The 2011 health report of the (MoH) demonstrated that DM was the 4<sup>th</sup> leading cause of death in West Bank.
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# Why Is Self Management Important ?



# Study Objectives

1

- To assess the level of diabetes self management

2

- To examine the association between diabetes self management practices and demographic /socio-economic characteristics

3

- To recommend policy options for improving diabetes mellitus management



# Field work



# Methodology

- Cross sectional clinic-based survey
- A sample of 517 Adult men and non pregnant women with type 2DM( M= 166, F= 351)
- 11 primary health care clinics :  
Ministry of Health (MoH), Joint MoH– Non Governmental Organizations (NGOs), and United Nations Relief and Works Agency (UNRWA) in the Ramallah Governorate.

# Study Instrument

- Use of International Questionnaire to assess the level of self-management practices:  
The Summary of Diabetes Self Care Activities (SDSCA).

# SDSCA Questionnaire



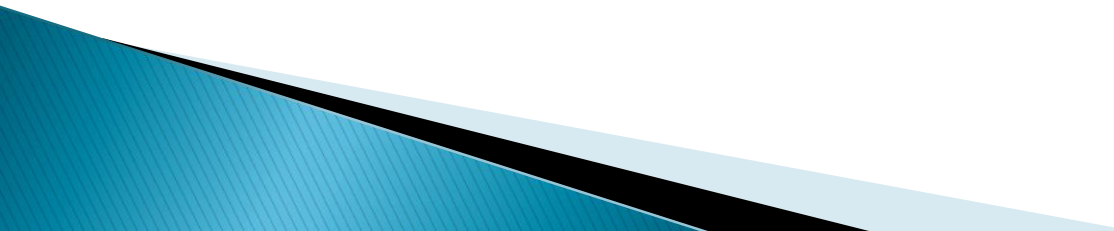
## 7 aspects of diabetes regimen

Calculating a standard score for each of the following subscales:

- ✓ General Diet
- ✓ Specific Diet
- ✓ Exercise/Physical activity
- ✓ Blood sugar testing
- ✓ Foot care
- ✓ Medication adherence
- ✓ Smoking



# Variables Definition

- Self care activities:
    1. No performance
    2. Partial/complete performance  
(during the previous week preceding the survey)
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# Variables Definition.....(cont)

## **1- Age:**

<65 vs.  $\geq$  65 years old)

## **2- Sex (M/F)**

## **3- Educational level:**

- Low
- Middle
- High

## **4- Standard of Living (STL) index**

- Low
- Middle
- High

## **5-Marital status**

- Married
- Not married & other

# Methodology (Cont....)

- ▶ **Descriptive Statistics**

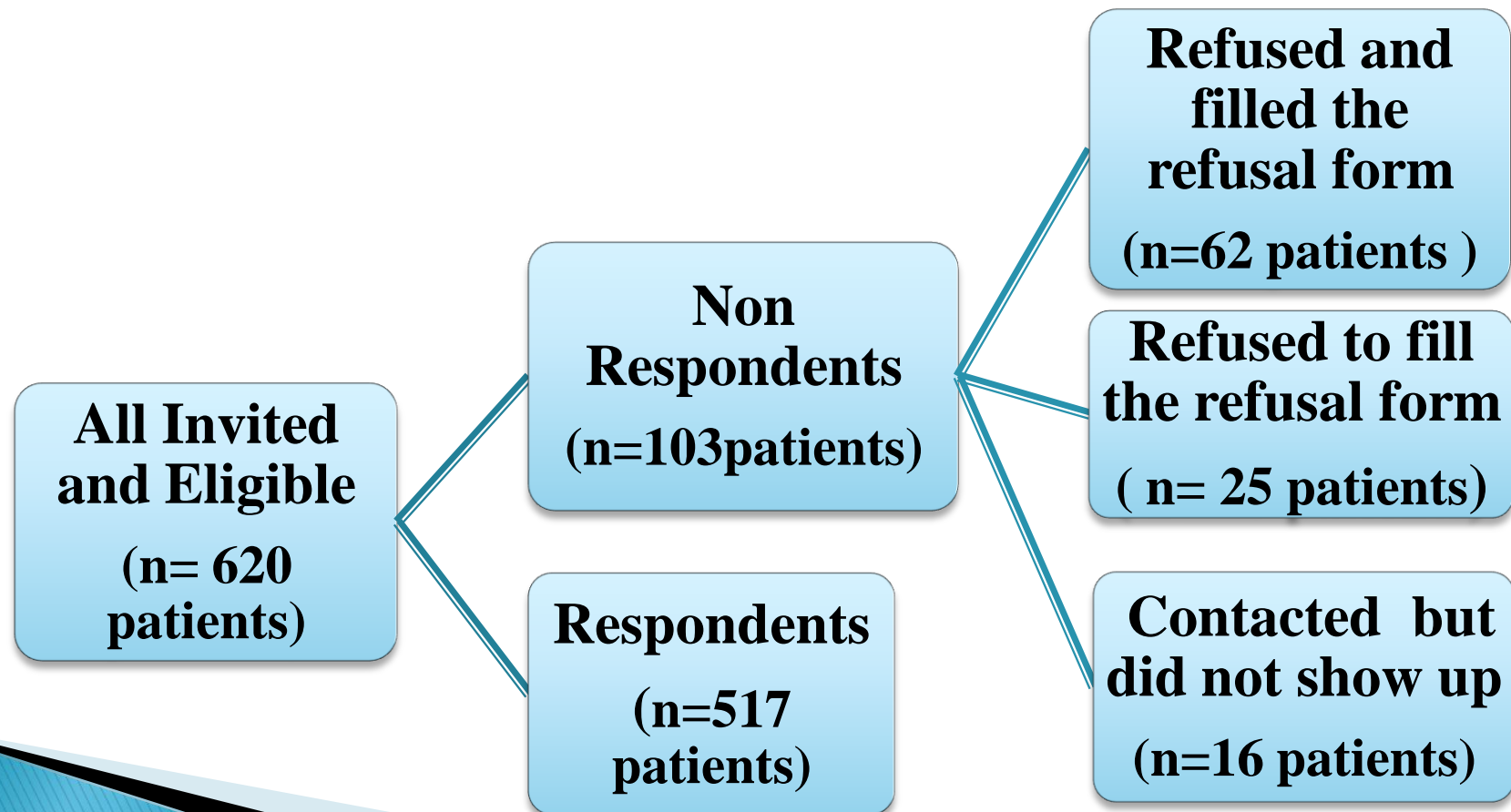
(mean and SD for continuous variables & proportions (%) for categorical variables)

- ▶ **Bivariate analysis**

(Chi-2 test & Confidence Intervals)

# Study Findings

Response rate : 83.4%

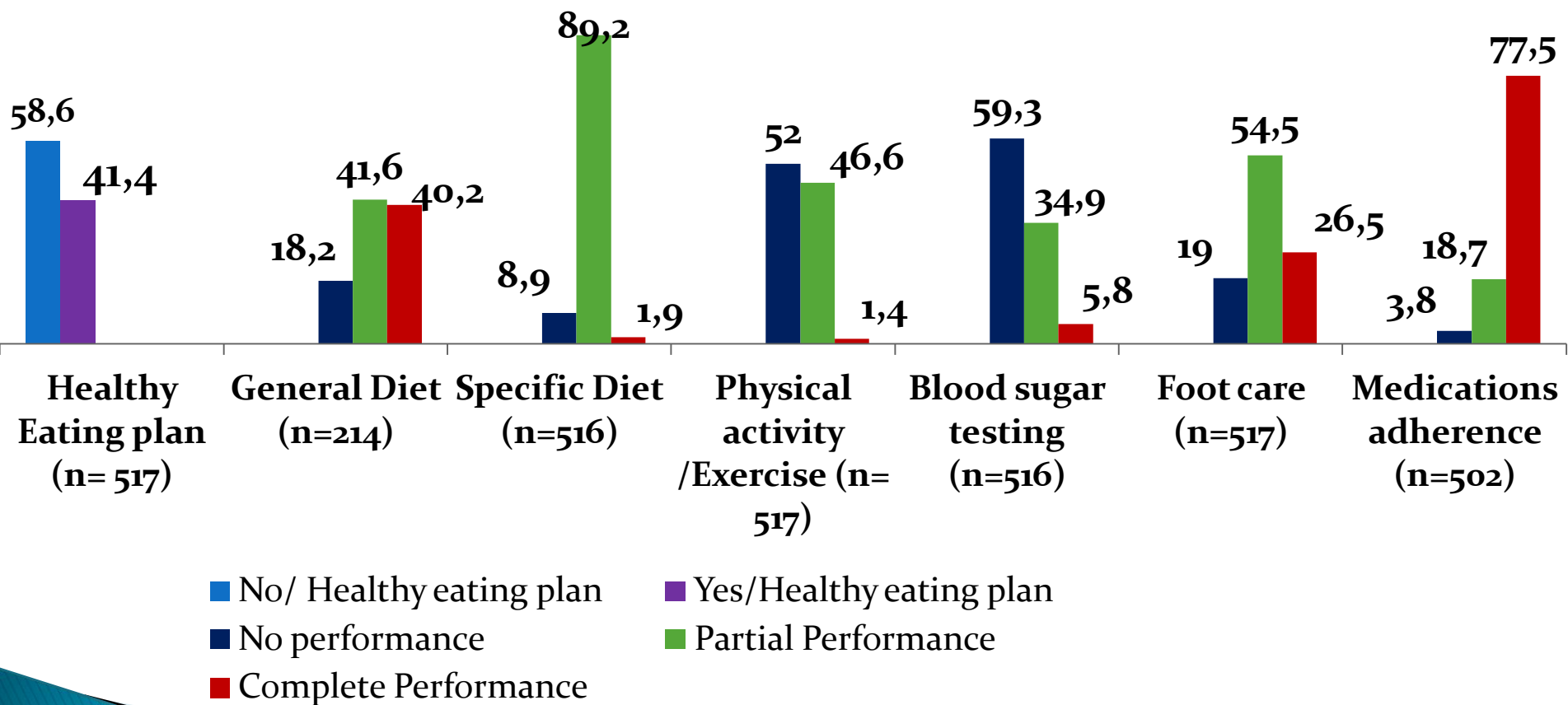


# Sample Characteristics

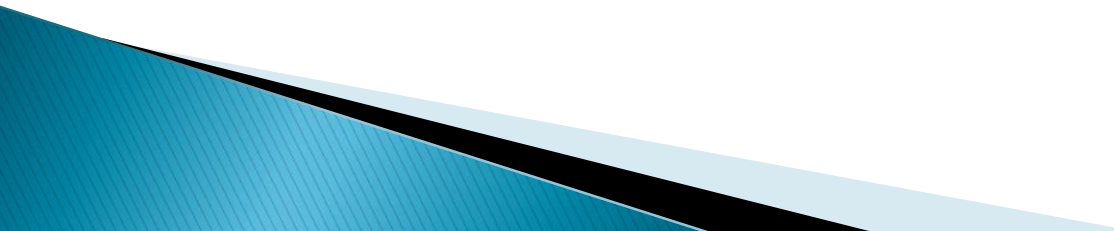
	category	Total
Sex (N=517)	Males	166(32.1)
	Females	351(67.9)
Age ( N=515)	<65	385(74.8)
	≥ 65 years	130(25.2)
Marital status (N=	Never Married& others	119(23.0)
	Married	398(77.0)
Education (N=515)	Low	89 (17.3)
	Middle	236(65.3)
	High	90 (17.4)
STL* index (N=517)	Low	253 (48.9)
	Medium	209(40.5)
	High	55(10.6)



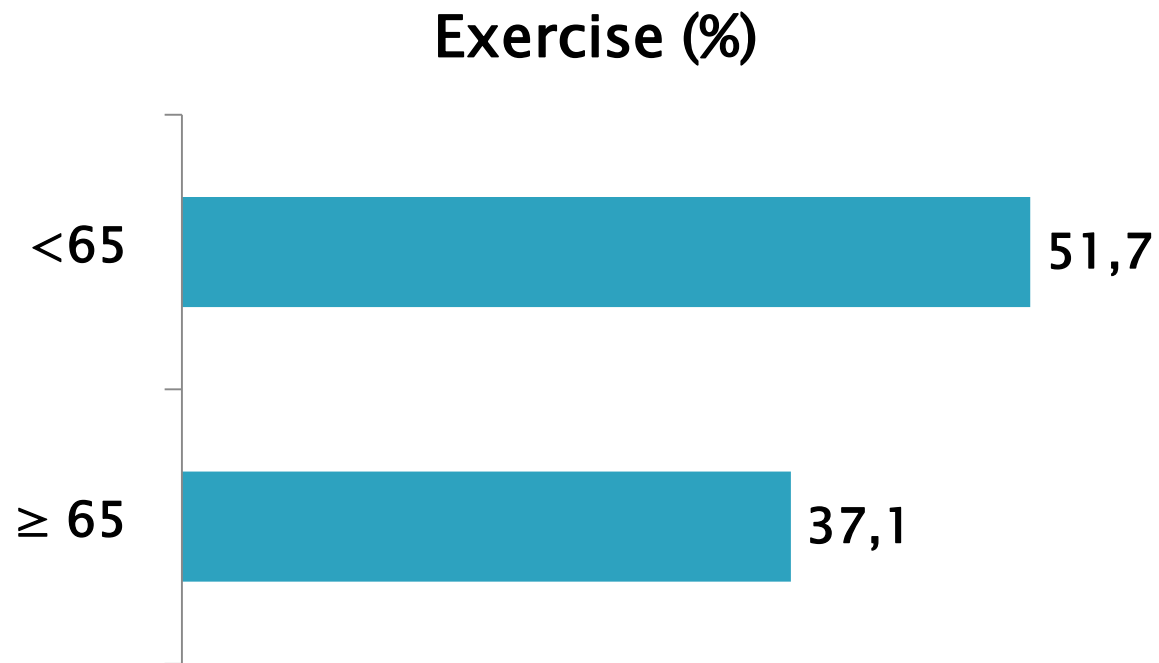
# Sub-optimal levels of diabetes self management (%)



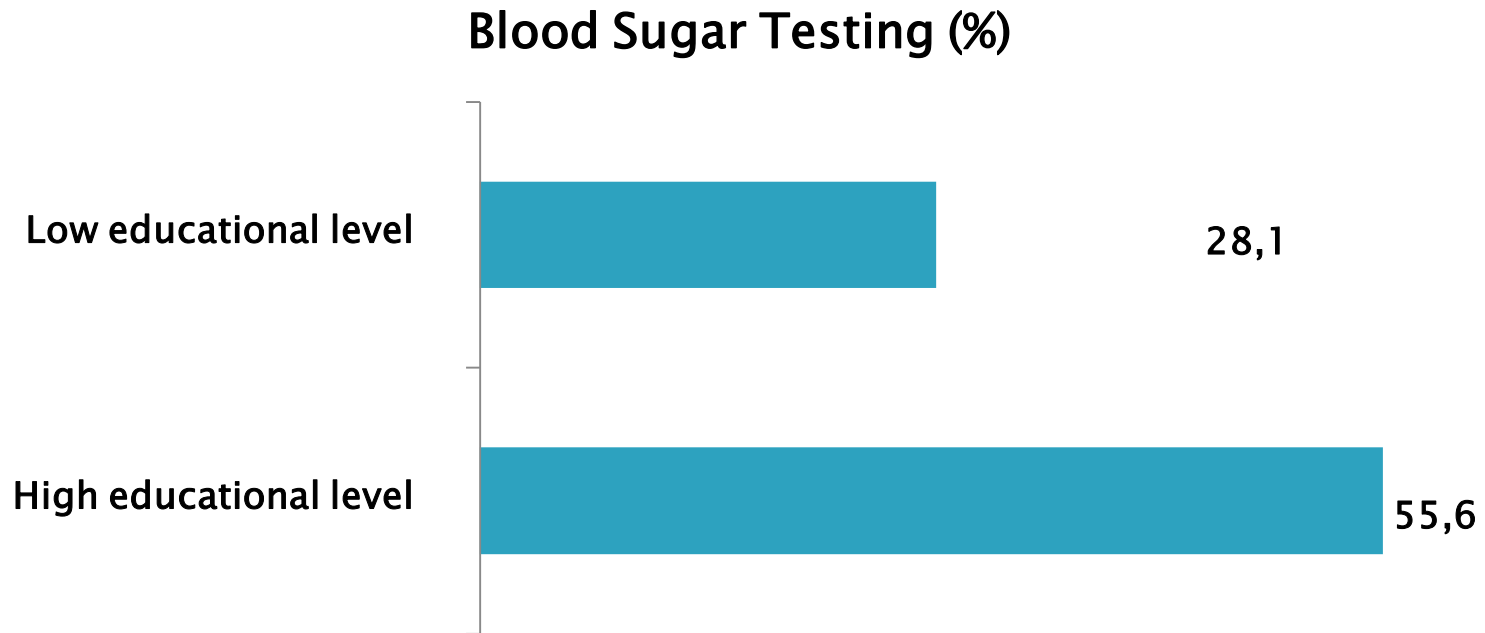
# Results

- No Association was found between the different self care practices and sex, or marital status. However, smoking was more common among males.
  - Age was associated only with exercise & blood sugar testing (BST) .
  - Education & STL index were associated only with BST.
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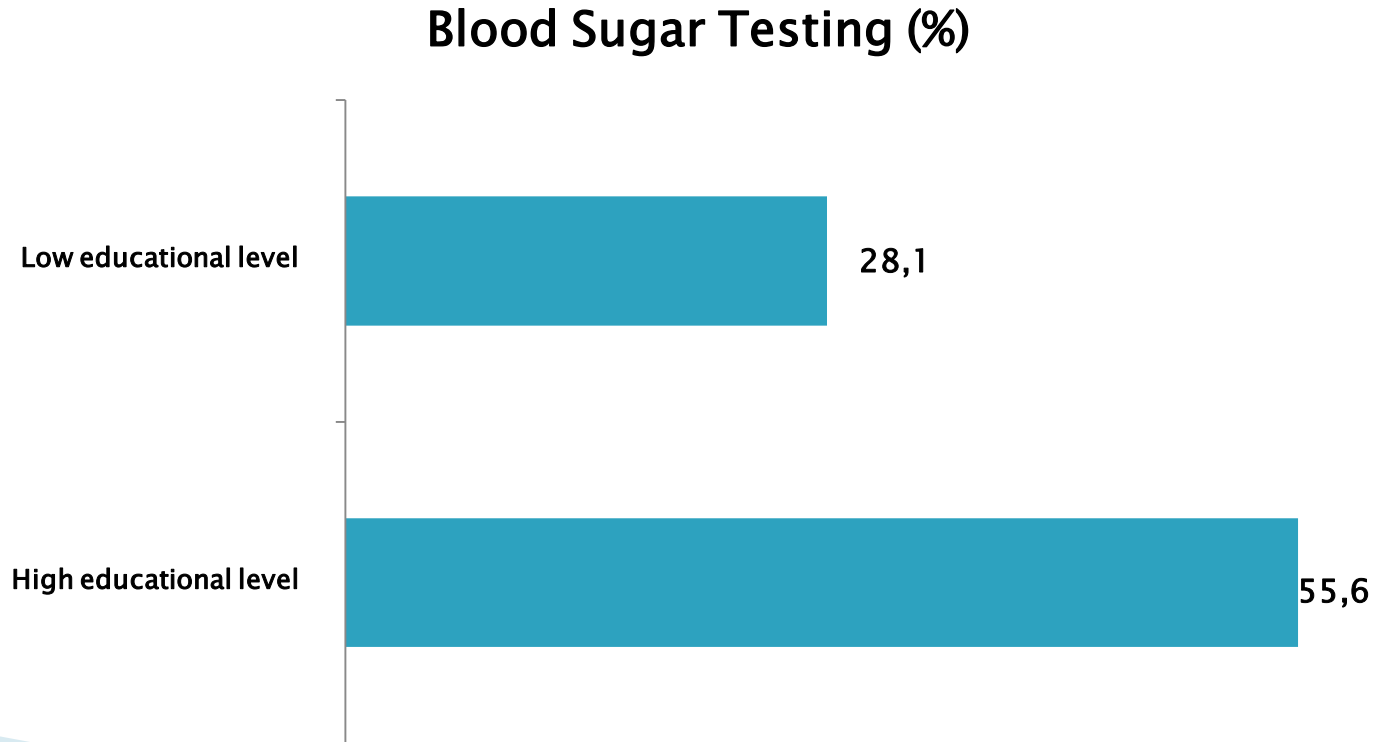
# Younger Patients were more likely to exercise



# Younger Patients were less likely to test their blood sugar

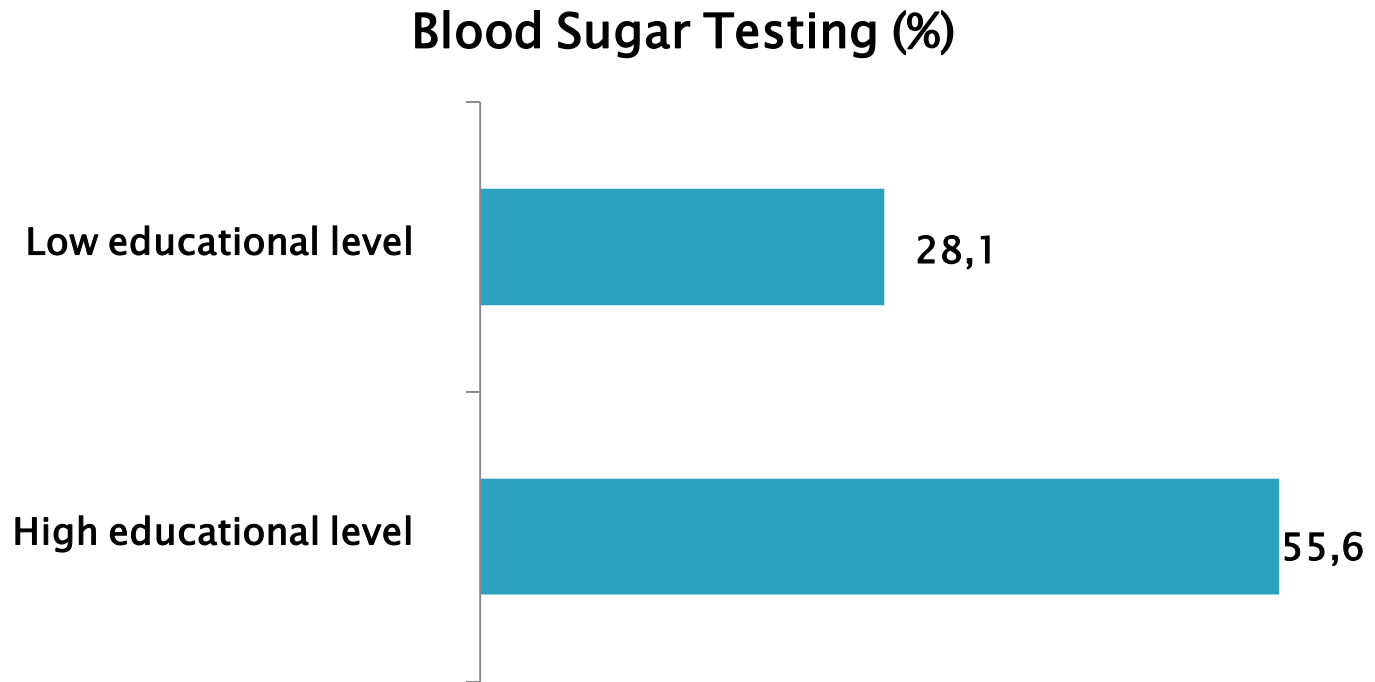


# Patients with higher educational level were more likely to test their blood sugar

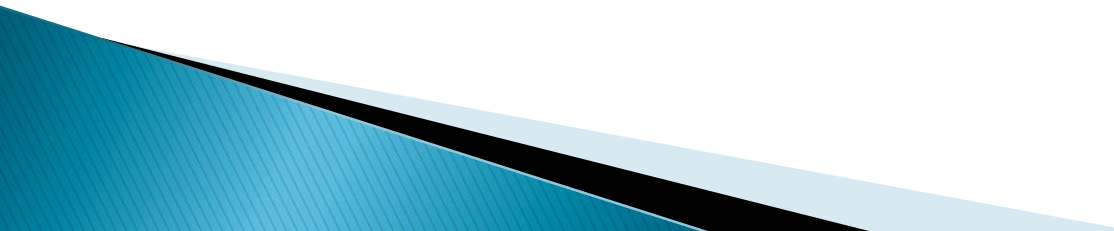





# Patients from high STL index educational level were more likely to test their blood sugar



# Conclusion

- Sub-optimal levels of self management was observed
  - Medication adherence was the most frequent aspect of self care performed by patients.
  - Elderly T2DM patients, less educated patients, T2DM patients, or patients from low STL index were less likely to perform diabetes self-care practices.
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# Study Recommendations

- The need of a more comprehensive healthcare system rather than a pure biomedical model.
  - The need of proper health education of DM patients.
  - The need of further exploration of diabetes self management practices among type 2 diabetes mellitus patients in Palestine.
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# Acknowledgments

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- Research and Administrative Team



Thank You



unite for diabetes