



Presenting the quality of life model related to the health of patients with type 2 diabetes based on disease perception, BMI and demographic characteristics with the mediating role of self-care behaviors

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Abstract

Aim: The aim of this study was to provide a health-related quality of life model for patients with type 2 diabetes based on disease perception, BMI and demographic characteristics with the mediating role of self-care behaviors. **Method:** The research method was descriptive-correlation type. The statistical population of the research was type 2 diabetes patients who had visited the hospitals of Tankabon and Ramsar. The sample of the study was 350 patients with type 2 diabetes who were selected by available sampling method. Data were collected using health-related quality of life questionnaires (Baroghs et al., 2004), disease perception (Weinman et al., 1996), self-care behaviors (Tobert et al., 2000), body mass index, and demographic characteristics questionnaire. Data analysis was done by structural equation modeling method. **Results:** The findings showed that the structural model of the health-related quality of life of patients with type 2 diabetes based on disease perception, BMI and demographic characteristics (age, education level, age of disease onset, duration of disease) with the mediating role of self-care behaviors fits with experimental data. **Conclusion:** Therefore, since the quality of life is considered an important health outcome, it is necessary to consider it as a main issue in the care of different patients, including patients with diabetes.

Keywords: health-related quality of life, type 2 diabetes, disease perception, BMI, demographic characteristics, self-care behaviors

Introduction

Since diabetes has very strong behavioral and emotional components, daily diabetes management is not simple for patients and often leads to psychological pressures, significantly affecting the patient's quality of life (Shayeghian et al., 2013). According to existing studies, the most important underlying factor for mortality in diabetic patients is the lack of self-care. Self-care leads to improved general health of the patient, active participation in the self-care process, and ultimately a reduction in healthcare costs (Bigdeli et al., 2015). The extent of patients' readmissions and the individual and societal consequences of self-care have necessitated the examination and identification of factors associated with self-care (Klinsinger, 2018) and health-related quality of life in diabetic patients, turning it into a research necessity. This approach can be beneficial for enhancing the knowledge of healthcare providers, including psychologists, psychiatrists, and other therapeutic groups, enabling them to implement educational and supportive interventions for patients and their families, thereby reducing the burden of stress and anxiety patients feel about their physical condition. It can also help create a supportive environment that leads to the improvement of their quality of life. Considering the short-term and long-term complications and the considerable costs of this disease, the present study aimed to determine the role of predictive factors for health-related quality of life in these patients and ultimately presented a structural model based on illness perception, body mass index, and demographic characteristics with the mediating role of self-care behaviors.

Method

The research method was descriptive-correlation type. The statistical population of the research was type 2 diabetes patients who had visited the hospitals of Tankabon and Ramsar. The sample of the study was 350 patients with type 2 diabetes who were selected by available sampling method. Data were collected using health-related quality of life questionnaires (Baroghs et al., 2004), disease perception (Weinman et al., 1996), self-care behaviors (Tobert et al., 2000), body mass index, and demographic characteristics questionnaire. Data analysis was done by structural equation modeling method.

Results

The findings showed that the structural model of the health-related quality of life of patients with type 2 diabetes based on disease perception, BMI and demographic characteristics (age, education level, age of disease onset, duration of disease) with the mediating role of self-care behaviors fits with experimental data.

Conclusion

The current research aimed to present a model of health-related quality of life for patients with type 2 diabetes based on illness perception, body mass index, and demographic characteristics, with the mediating role of self-care behaviors. The findings indicate that the overall fit of the model is confirmed, and the structural model and measurement model have suitable quality in explaining the research variables.

In summary, the result of the present study demonstrates that the structural model of health-related quality of life for patients with type 2 diabetes, based on illness perception, body mass index, and demographic characteristics, with the mediating role of self-care behaviors, fits the empirical data. As every research has its

limitations, it is necessary to mention some of these and propose solutions. For instance, one of the limitations of this research was the use of a non-probabilistic (convenience) sampling method; it is recommended that future studies use random sampling methods. Also, since this research was cross-sectional, it poses limitations in terms of interpretations and causal attributions of the variables under study, and it is suggested that longitudinal studies be conducted to examine the stability of correlations of the current research variables over time. Given that the primary focus of healthcare professionals treating diabetic patients is on their physical issues, and despite the high percentage of reported psychological problems in these patients, it is recommended that more attention be paid to the psychological issues of these patients alongside regular medical visits. To this end, greater collaboration between physicians and psychologists is advised, so that individuals with psychological problems can be referred to a psychologist.

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