

“Psychological problems facing diabetics “

scientific paper

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By :

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Abstract:

Diabetes is a long-term metabolic illness that has an effect on a person's physical, social, mental, and psychological well-being. Additionally, if left untreated, the psychosocial issues that are most prevalent in diabetes patients frequently have a serious detrimental influence on the patient's well-being and social life. As self-care for diabetes is the ultimate goal of patient management, addressing such psychosocial components of treatment treatments, including cognitive, emotional, Behavioural, and social factors, would assist overcome the psychological barriers associated with adherence. There is a wealth of knowledge on psychological therapies and self-management strategies for diabetes, but less is known about how psychological reactions and unresolved emotional distresses affect general health.

Methodology: The descriptive analytical method was used.

Sample: The sample population was considered a group of patients from Makkah Al-Mukarramah hospitals.

Results:

There is a statistically significant relationship between age and diabetes and the increase in psychological disorders in addition to the relationship between gender and mental disorders, as women are more exposed to psychological problems.

ملخص البحث :

مرض السكري هو مرض استقلابي طويل الأمد له تأثير على رفاهية الشخص الجسدية والاجتماعية والعقلية والنفسية. بالإضافة إلى ذلك ، إذا تركت دون علاج ، فإن المشكلات النفسية والاجتماعية الأكثر انتشاراً في مرضى السكري غالباً ما يكون لها تأثير ضار خطير على رفاهية المريض وحياته الاجتماعية. نظراً لأن الرعاية الذاتية لمرض السكري هي الهدف النهائي لإدارة المريض ، فإن معالجة هذه المكونات النفسية والاجتماعية للعلاجات ، بما في ذلك العوامل المعرفية والعاطفية والسلوكية والاجتماعية ، من شأنه أن يساعد في التغلب على الحواجز النفسية المرتبطة بالالتزام. هناك ثروة من المعرفة حول العلاجات النفسية واستراتيجيات الإدارة الذاتية لمرض السكري ، ولكن لا يُعرف الكثير عن كيفية تأثير ردود الفعل النفسية والاضطرابات العاطفية التي لم يتم حلها على الصحة العامة.

المنهج: تم استخدام المنهج الوصفي التحليلي.

العينة: تم اعتبار مجتمع العينة مجموعة من المرضى من مستشفيات مكة المكرمة .

نتائج: توجد علاقة ذات دلالة إحصائية بين العمر وداء السكري وتزايد الاضطرابات النفسية بالإضافة إلى

العلاقة بين الجنس والاضطرابات النفسية ، حيث أن النساء أكثر عرضة لمشاكل نفسية .

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Introduction:

Diabetes is a significant and complicated metabolic illness, and over the past few decades, its prevalence has increased to epidemic levels. The International Diabetes Federation estimates that 382 million people worldwide have diabetes, and that number will rise to 592 million by the year 2035.

The majority of diabetes treatment recommendations only target the medical aspects of beginning management, failing to take the patient's psychological needs into account. [2] Several studies, including The Diabetes Attitudes, Wishes, and Needs study, highlighted that psychological support in this group of patients is under-resourced and inadequate, leading to poor quality of life (QoL) and decreased general well-being. This is true even though many people with diabetes cope well and lead healthy lives. Many people find it difficult to accept that they must take medications constantly throughout their lives, which has a negative impact on how well they stick to their therapy and control their diabetes (2).

These psychosocial issues have the potential to progress into depressive disorders or other psychological conditions, which are linked to subpar self-care, subpar metabolic outcomes, higher mortality, functional limits, elevated medical costs, lost productivity, and subpar quality of life. Diabetes patients' emotional and psychological requirements are jeopardized when their own efforts to address these issues don't go as planned or when the disease's consequences negatively impact both their physical and mental (psychological) health (1).

Evidence suggests that psychological and psychiatric issues are closely related to diabetes and its complications. These include anxiety over hypoglycemia, poor eating practices, and sadness. Additionally, type 2 diabetes mellitus (T2DM) patients are two times more likely than healthy controls to experience comorbid

depression, which lowers their quality of life (QoL). Additionally, studies show that people with diabetes experience high levels of emotional stress related to their condition. Functional impairment, poor adherence to exercise, nutrition, and medicine, as well as insufficient glycemic management, are all linked to this.

Problem statement:

Evidence suggests that psychological and psychiatric issues are closely related to diabetes and its complications. These include anxiety over hypoglycemia, poor eating practices, and sadness. Additionally, type 2 diabetes mellitus (T2DM) patients are two times more likely than healthy controls to experience comorbid depression, which lowers their quality of life (QoL). Additionally, studies show that people with diabetes experience high levels of emotional stress related to their condition. Functional impairment, poor adherence to exercise, nutrition, and medicine, as well as insufficient glycemic management, are all linked to this. Not every patient with diabetes will react the same way to stress. The effects of stress are affected in patients with type 1 diabetes mellitus by abnormal regulation of stress hormones and the relative presence of insulin during the time of stress. This may also be due to individual psychological variances and the presence of anomalies of the autonomic nervous system linked to diabetic neuropathy. The scientific underpinnings of the connection between depression and diabetes have become better understood as a result of significant advancements over the past 20 years. 2 It's possible that there is a reciprocal association between type 2 diabetes and depression: just as having type 2 diabetes raises the likelihood of developing severe depression, having a major depressive disorder raises the risk of developing type 2 diabetes. 2 Additionally, diabetes distress is now understood to exist independently of severe depressive disorder.

A wide range of diabetes-related distresses are linked to having diabetes, including feeling overwhelmed by the diabetes routine, worrying about the future and the potential for catastrophic complications, and feeling guilty when control is failing. Even at levels of severity below the cutoff for a psychiatric diagnosis of depression or anxiety, this disease burden and emotional distress in people with type 1 or type 2 diabetes are linked to poor treatment compliance, poor glycemic control, higher rates of diabetes complications, and reduced quality of life.

Research Questions :

1. What are the causes of diabetes?
2. What are the effects of diabetes?
3. What are the right ways to avoid diabetes?

Research Hypotheses

In this research, it is hypothesized that

1. The psychological issues that diabetic patients experience are statistically related to their gender.
2. The age of diabetic patients and their psychological issues are statistically significantly correlated.

Motivation

Helping diabetics let go of their anger can lead to not hurting their loved ones, eliminating their depression, and eliminating their guilt.

Research Objectives and Aims

In an effort to assist diabetics release their rage, this could result in them hurting some of their loved ones. It could also make them depressed and make them feel guilty.

The purpose of this topic is to assist diabetics in bettering their psychological well-being, their physical health, and their ability to overcome anxiety, stress, and negative thoughts that impede psychological progress and cause cases to be delayed.

Literature Review

- Egede, L. E., & Dismuke, C. E. (2012). Serious psychological distress and diabetes: a review of the literature. *Current psychiatry reports*, 14(1), 15-22. Since the creation of a measurement of substantial psychological distress (SPD) in 2002, increased focus has been placed on the relationship between SPD and the results and procedures of care associated with diabetes. We examine the research on the connections between SPD and specific mental health diagnoses and diabetes processes of care and outcomes from 2010 to 2011 as well as the research on the connections between SPD and diabetes processes of care and outcomes. There is a wealth of research on the correlation between diabetes outcomes and mental health diagnoses, particularly for depression. Additional research is required to examine the relationship between SPD and diabetes outcomes and processes of care because the Kessler scale measures a much wider range of mental health issues than any specific DSM-IV/Structured Clinical Interview for DSM Disorders diagnosis and is intended to assess SPD at the population level.

- Van Duinkerken, E., Snoek, F. J., & De Wit, M. (2020). The cognitive and psychological effects of living with type 1 diabetes: a narrative review. *Diabetic Medicine*, 37(4), 555- Type 1 diabetes mellitus has a significant (neuro)psychological influence over the lifespan. Type 1 diabetes in children and adolescents might hinder psychosocial growth and academic achievement. In adulthood, it may affect one's ability to parent, maintain relationships, and work. A sizable number of individuals with type 1 diabetes struggle to cope and report feeling a lot of distress because of their diabetes. Type 1 diabetes is linked to moderate cognitive impairments as well as emotional disorders like depression and anxiety in both children and adults. The relationship between cognitive and psychological comorbidity and underlying mechanisms are only little explored in the literature. In order to provide recommendations for further research and clinical practice, the present narrative review sought to summarize the current state of the literature on both cognitive and psychological comorbidities in type 1 diabetes across the lifespan. It also looked at potential connections between the two areas of interest.
- Mulligan, K., McCain, H., LA Montagne-Godwin, F., Chapman, J., Flood, C., Haddad, M., ... & Simpson, A. (2018). Barriers to effective diabetes management—a survey of people with severe mental illness. *BMC psychiatry*, 18(1), 1-15.
People with severe mental illnesses (SMI) such as schizophrenia and bipolar disorder have an increased risk of developing type 2 diabetes and have poorer health outcomes than those with diabetes alone. To maintain good

diabetes control, people with diabetes are advised to engage in several self-management behaviors. The aim of this study was to identify barriers or enablers of diabetes self-management experienced by people with SMI. Adults with type 2 diabetes and SMI were recruited through UK National Health Service organizations and mental health and diabetes charities. Participants completed an anonymous survey consisting of: Summary of Diabetes Self-Care Activities (SDSCA); CORE-10 measure of psychological distress; a measure of barriers and enablers of diabetes self-management based on the Theoretical Domains Framework; Diabetes UK care survey on receipt of 14 essential aspects of diabetes healthcare. To identify the strongest explanatory variables of SDSCA outcomes, significant variables ($p < .05$) identified from univariate analyses were entered into multiple regressions.

- Ρεκλείτη, Μ., & Σαρίδη, Μ. (2014). A review of the literature on the impact of diabetes on the emergence of emotional problems. Περιεγχειρητική Νοσηλευτική-Το Επίσημο Περιοδικό του ΣΥ. Δ. ΝΟ. Χ., (Τεύχος 1 Ιανουάριος-Απρίλιος 2014), 23-34.

People with diabetes mellitus are more likely than those without the disease to experience emotional or Behavioural issues. The goal of glucose control is to avoid problems. However, diabetic patients manage their condition in a variety of ways, and not every nonadherence is indicative of a psychological issue.

Aim: The objective of this review of the literature was to investigate the most recent evidence on the relationship between depressive disorders and diabetes.

Methods: Valid databases (PubMed, Cochrane Library, CINAHL, Science Direct) were used to conduct an exhaustive evaluation of Greek and

international literature beginning in 2000. Depressive symptoms, diabetes mellitus, diabetic complications, comorbidity, financial outlay, and limited financial resources were some of the main terms used in the search (Mesh terms).

The daily struggles with managing diabetes can make it easier for depression to develop. Through early detection and treatment, tertiary prevention initiatives can also reduce the occurrence of problems. By enhancing patients' quality of life and mental and emotional health, continuing education through group or individual programmers can aid in the management of diabetes and the psychosocial support of patients and family.

Analytical framework:

This chapter describes the way in which research objectives are achieved. The main objective of this study is to know the effect of diabetes on the psychological aspect of patients. His chapter describes study methodology, including research design, population, sampling, instrumentation and measurements, data collection, analysis and reliability. Validity of the data collection tool.

Analytical study:

This chapter contains an overview of the study curriculum, the study community, the study sample, and the study tool, in addition to the study variables, the indications of validity and reliability, and the statistical treatments used in them.

Study methodology: The descriptive approach was used because it suits the subject of the study as it depends on the study of reality or phenomenon, as it exists on the ground, in addition to its accurate description in addition to its quantitative and qualitative expression.

The study sample:

The study sample consisted of 100 individuals, in addition to selecting the sample in a simple random way, from Makkah Al-Mukarramah hospitals to see the extent of the psychological impact of diabetes

Statistical methods:

- SMA
- standard deviation
- Measures of central tendency
- Alpha Cronbach

Research Instruments

With an objective description, the research instruments such as measurement scales, questionnaires and scoring systems must be defined. These instruments should be tested prior to their use, and it is mandatory for research personnel to use them correctly to prevent any bias. To anyone involved in the analysis, these tools should be clear and easily understandable (Cook & Beckman, 2006).

Typical methods of quantitative data collection include:

- Surveys of closed-end questions (e.g., face-to-face, mobile, mail, etc.) are performed.
- Well-defined event observation and recording
- Recapture of applicable information systems management files



Types of quantitative data collection

The research tool was self-questionnaires about psychological problems facing patients with diabetes. Three parts of the questionnaire were used in this study; The first part dealt with the social information related to the study. The second part consists of questions about literary studies and a theoretical part. The third part included statistical analysis. Questionnaire included

Three points (1 = strongly agree, 2 = agree, 3 = disagree) Rating Likert scale was used to check the effect of diabetes on psychological sensitivity.

The tools used in data collection (questionnaire, observation, etc.) and the variables examined and used in these tools, as well as the methods used to assess the validity and reliability of the tool.

Population study

Population refers to the sum total of people, things, events, etc., that is, units of observation that are of interest to the investigation and remain a subject. The group from which the study result can be extrapolated is this reference group or the target group. After determining this target population, the researcher has to determine whether all individuals can be studied in order to obtain a result. Usually, not everyone can be included, so a sample is taken from the research community. The important characteristic of the sample is that each person should have equal and non-zero probability of being included in the analysis. The survey must be performed separately, that is, one option does not affect the inclusion or exclusion of the other.

The sample population was considered a group of patients in from Makkah Al-Mukarramah hospitals.

Data collection

Collection of data is the collection process and evaluating information in a defined systematic fashion on variables of interest, which helps one to answer specified research questions, test hypotheses, and analyze. The research aspect of data collection is popular in all fields of study, including physical and social sciences, humanities, industry, etc. Although methods differ by discipline, the focus remains the same on ensuring precise and truthful selection. The purpose of all data collection is to capture quality information that then converts to rich data analysis and enables a compelling and credible response to questions that have been asked to be established. Accurate data collection is crucial to preserving the integrity of science, regardless of the field of study or preference for identifying data. The risk of errors occurring is minimized by both the selection of suitable data collection instruments (existing, updated, or newly developed) and clearly delineated instructions for their correct use.

Ethical Consideration

Diener and Crandall (1978) essentially divided ethical standards into four main areas:

- If the participants are at risk, it is the responsibility of the researcher to adequately assess the potential harm to the participants in the study and to minimize the potential harm to the extent possible. It guarantees that the identities and records of individuals and groups can be kept confidential.
- If there is a lack of informed consent: it is increasingly normal for researchers to obtain written consent by asking them to complete and sign a questionnaire, rather than verbal consent from study participants, particularly when research involves the collection of personal data. This is generally accompanied by an information sheet that explains what the research is about and how the researchers plan to do it.

- If there is a privacy breach: the prosecutor treats each case sensitively and independently, giving the respondent a real chance to withdraw.
- Where deception is involved: at the beginning of the interview, the respondent should be told if observation techniques or monitoring tools are to be used.

Design of Research

Research design helps researchers to establish boundaries for research, which involve defining the study environments, the type of research to be carried out, the analysis unit and the other research-related issues. A research design is a research project plan for investigating and responding to research questions. Three main types of research projects exist, namely: (1) descriptive (2) exploratory design and (3) incidental or explanatory design;

This study focuses mainly on testing an integrated model that identifies the factors affecting project success. The research problem and goal clearly indicates. In the next phase, a descriptive research concept was used to describe the respondents' characteristics and to determine the frequencies, percentages, mean and standard deviations of the buildings used. In this study, several hypotheses are quantitative based on critical success factors, theory of leadership styles and the success of projects. The empirical link between the independent variable, i.e. organizational factors, project team factors and the dependent variable, i.e. project success was evaluated by statistical analyses such as structural equation modelling.

A quantitative dataset and a survey approach have been used in this study Data were collected from individual employees in Saudi government interest on the factors affecting the success of the project in addition, the transversal study Fifth stage: development of a debate guide and discussion in a focus group. Stage 6: Finalization of the data analytical framework. Stage 7: the final research thesis 100 Writing and Editing Data were collected using the survey method. What method of

survey? It is used and wanted because it is designed to engage directly with ideas, The participants' feelings and views.

Frame for sampling

Sampling is a process in which researchers select a sample of available individuals from the population (eg a specified number of selected participants). Everyone is an employee of my patients in the hospital Each department was instructed to distribute a target response questionnaire. The required sample size was determined using SPSSs, sample size 100. For analysis, only 100 answers were obtained.

Gender:

Statistics		
Gender		
N	Valid	100
	Missing	0
Mean		1.10
Std. Deviation		.308
Variance		.095

It is clear from the above that the mean (gender) is 1.10, the standard deviation is 0.308, and the variance is 0.095.

Age:

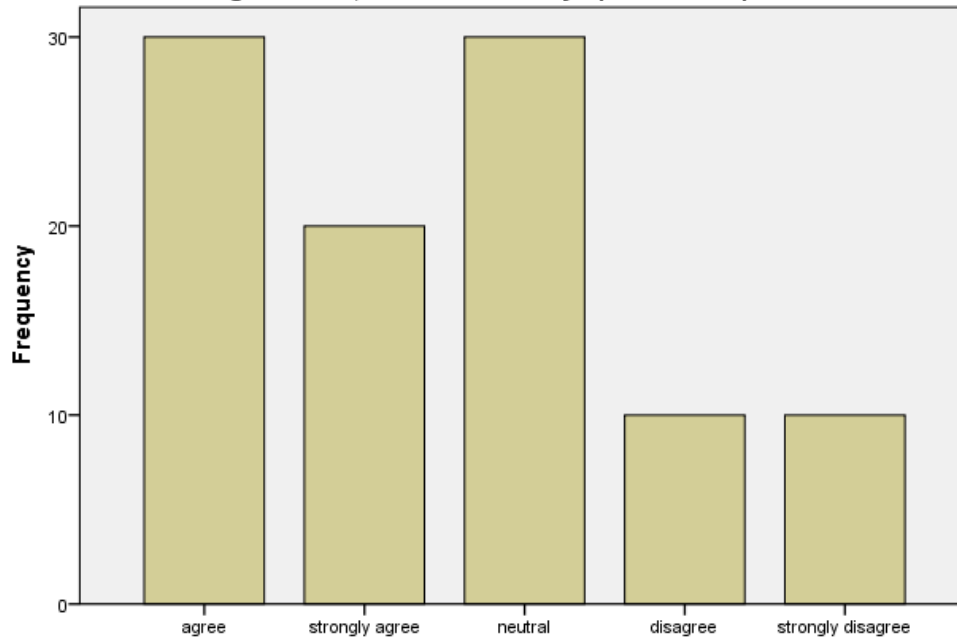
age					
		Freque ncy	Perce nt	Valid Percent	Cumulativ e Percent
Valid	40-50	58	90.0	90.0	90.0
	50-60	42	10.0	10.0	100.0
	Total	100	100.0	100.0	

From the previous table, we find that the highest percentage of those who are between 40 and 50 years' old

People with diabetes can develop stress due to the difficult requirements of controlling diabetes, which leads to symptoms of depression.		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	30	30.0	30.0	30.0
	strongly agree	20	20.0	20.0	50.0
	neutral	30	30.0	30.0	80.0
	disagree	10	10.0	10.0	90.0
	strongly disagree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

The answer to the question was that diabetic patients can become stressed by the difficult demands of diabetes control, leading to symptoms of depression. 30 Agree 30 percent, 20 Strongly agree 20 percent, 30 Neutral 30 percent, and 10 Disagree severely.

People with diabetes can develop stress due to the difficult requirements of controlling diabetes, which leads to symptoms of depression.



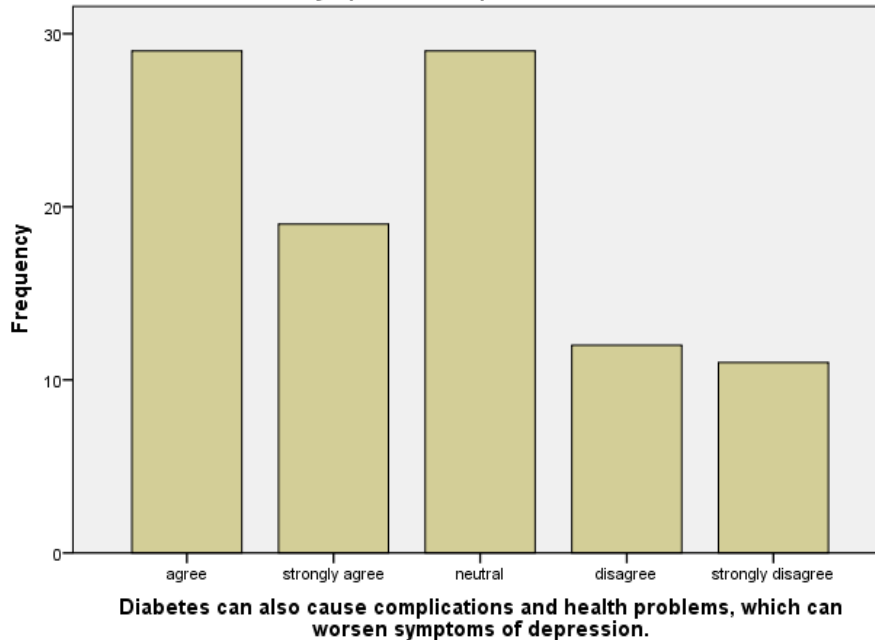
People with diabetes can develop stress due to the difficult requirements of controlling diabetes, which leads to symptoms of depression.

Diabetes can also cause complications and health problems, which can worsen symptoms of depression.					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	29	29.0	29.0	29.0
	strongly agree	19	19.0	19.0	48.0
	neutral	29	29.0	29.0	77.0
	disagree	12	12.0	12.0	89.0
	strongly disagree	11	11.0	11.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Diabetes can also cause complications and health problems, which can worsen symptoms of depression. 29 Agree with 29 percent,

19 Strongly Agree with 19 percent, 29 Neutral 29 percent, 11 Disagree, and 10 Strongly Agree.

Diabetes can also cause complications and health problems, which can worsen symptoms of depression.



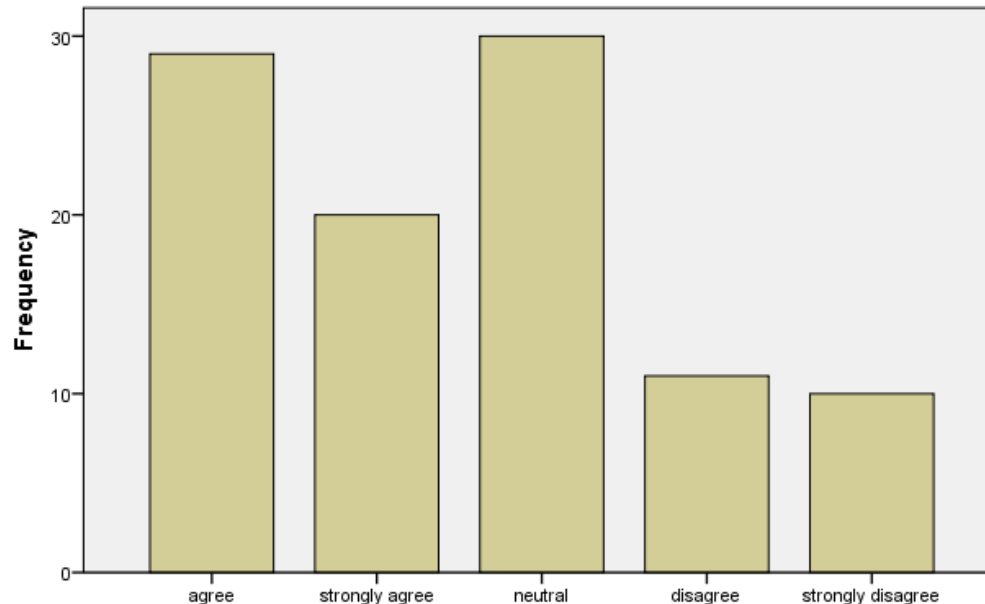
Depression can lead to poor lifestyle decisions, such as eating unhealthy food, lack of exercise, smoking and being overweight, all of which are risk factors for diabetes.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	29	29.0	29.0	29.0
	strongly agree	20	20.0	20.0	49.0
	neutral	30	30.0	30.0	79.0
	disagree	11	11.0	11.0	90.0
	strongly disagree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Depression can lead to poor lifestyle decisions, such as eating unhealthy food, lack of exercise, smoking and being overweight, all

of which are risk factors for diabetes. One hundred and 11 disagree, and 10 strongly agree.

Depression can lead to poor lifestyle decisions, such as eating unhealthy food, lack of exercise, smoking and being overweight, all of which are risk factors for diabetes.



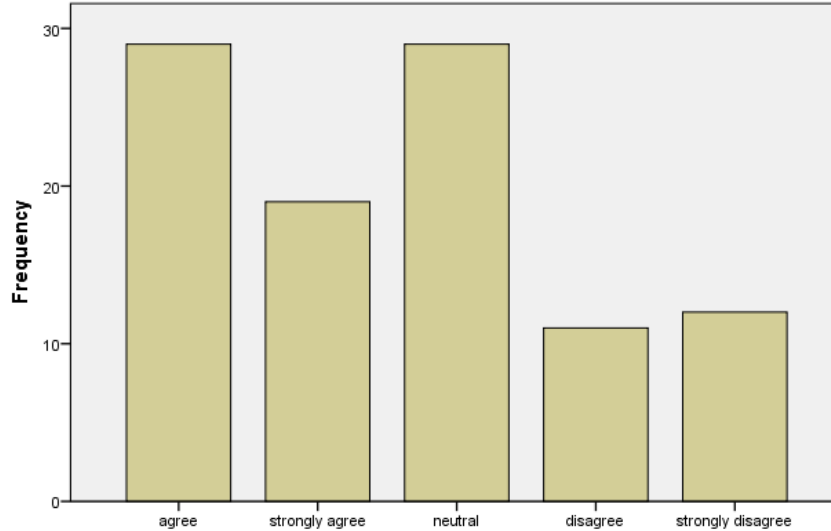
Depression can lead to poor lifestyle decisions, such as eating unhealthy food, lack of exercise, smoking and being overweight, all of which are risk factors for diabetes.

Depression affects your ability to perform tasks, communicate, and think clearly. This can interfere with your ability to successfully control your diabetes.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	29	29.0	29.0	29.0
	strongly agree	19	19.0	19.0	48.0
	neutral	29	29.0	29.0	77.0
	disagree	11	11.0	11.0	88.0
	strongly disagree	12	12.0	12.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Depression affects your ability to perform tasks, communicate, and think clearly. This could interfere with your ability to successfully manage diabetes. 29 Agree with 29 percent, 19 Strongly Agree with 19 percent, 29 Neutral, 29 percent Agree, 11 Disagree, and 12 Strongly Agree

Depression affects your ability to perform tasks, communicate, and think clearly.
This can interfere with your ability to successfully control your diabetes.



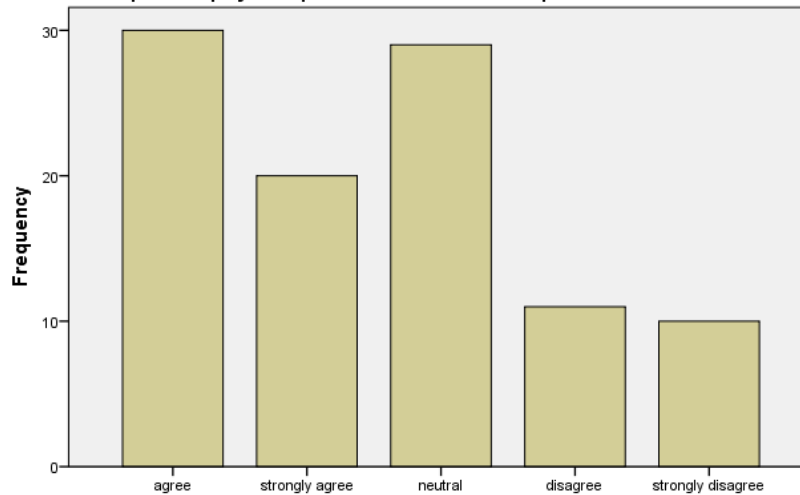
Depression affects your ability to perform tasks, communicate, and think clearly.
This can interfere with your ability to successfully control your diabetes.

If you have diabetes, watch for signs and symptoms of depression, such as a loss of interest in normal activities, feelings of sadness or hopelessness, and unexplained physical problems such as back pain or headaches.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	30	30.0	30.0	30.0
	strongly agree	20	20.0	20.0	50.0
	neutral	29	29.0	29.0	79.0
	disagree	11	11.0	11.0	90.0
	strongly disagree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

The answer to the question was If you have diabetes, look for signs and symptoms of depression, such as loss of interest in normal activities, feelings of sadness or hopelessness, and unexplained physical problems such as back pain or headaches: 30 Agree, 30 percent, Strongly Agree, 20 percent, 29 Neutral, 29 percent One hundred and 11 disagree, and 10 strongly agree.

If you have diabetes, watch for signs and symptoms of depression, such as a loss of interest in normal activities, feelings of sadness or hopelessness, and unexplained physical problems such as back pain or headaches.

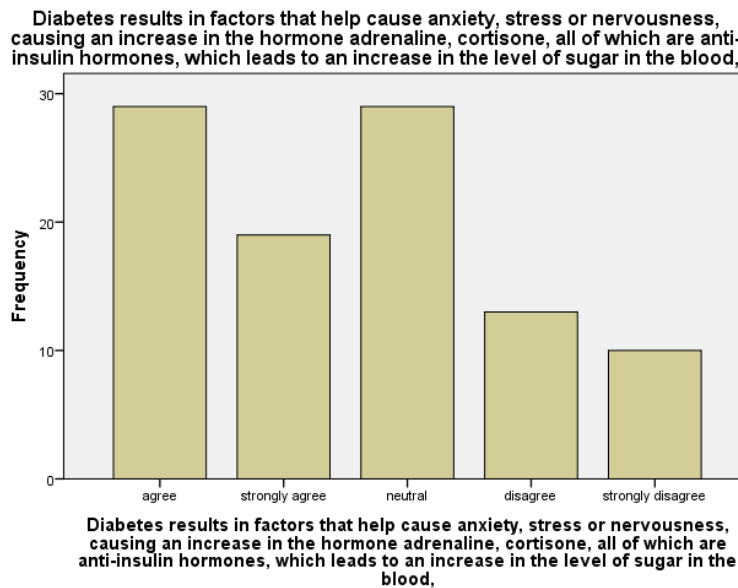


If you have diabetes, watch for signs and symptoms of depression, such as a loss of interest in normal activities, feelings of sadness or hopelessness, and unexplained physical problems such as back pain or headaches.

Diabetes results in factors that help cause anxiety, stress or nervousness, causing an increase in the hormone adrenaline, cortisone, all of which are anti-insulin hormones, which leads to an increase in the level of sugar in the blood,

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	29	29.0	29.0	29.0
	strongly agree	19	19.0	19.0	48.0
	neutral	29	29.0	29.0	77.0
	disagree	13	13.0	13.0	90.0
	strongly disagree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Diabetes is caused by factors that cause anxiety, stress or nervousness, which leads to an increase in the hormone adrenaline and cortisone, all of which are anti-insulin hormones, which leads to a high level of sugar in the blood, 29 agree with 29 percent, 19 strongly agree with 19 percent, 29 are neutral with 29 percent, 13 disagree, and 10 strongly agree.

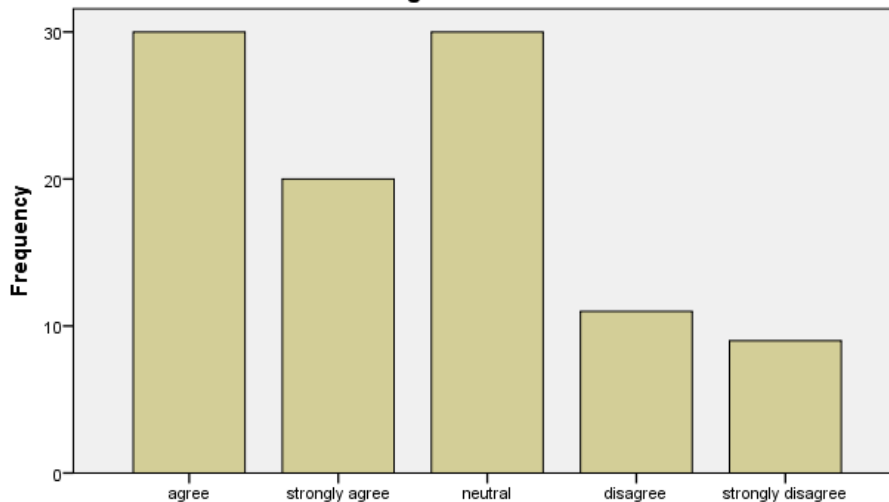


Psychological problems can be overcome by practicing sports that help calm and meditation, such as fishing, breathing exercises, and yoga, all of which are activities that combat anxiety, tension and nervousness, help relax, and control feelings and emotion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	30	30.0	30.0	30.0
	strongly agree	20	20.0	20.0	50.0
	neutral	30	30.0	30.0	80.0
	disagree	11	11.0	11.0	91.0
	strongly disagree	9	9.0	9.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Psychological problems can be overcome by practicing sports that help calm and meditation, such as fishing, breathing exercises and yoga, all of which are activities that combat anxiety, tension and nervousness and help relax and control feelings and emotions., 30 agree 30 percent, 20 strongly agree 20 percent, 30 neutrals 30 percent, 11 disagree, 9 strongly agree

Psychological problems can be overcome by practicing sports that help calm and meditation, such as fishing, breathing exercises, and yoga, all of which are activities that combat anxiety, tension and nervousness, help relax, and control feelings and emotions



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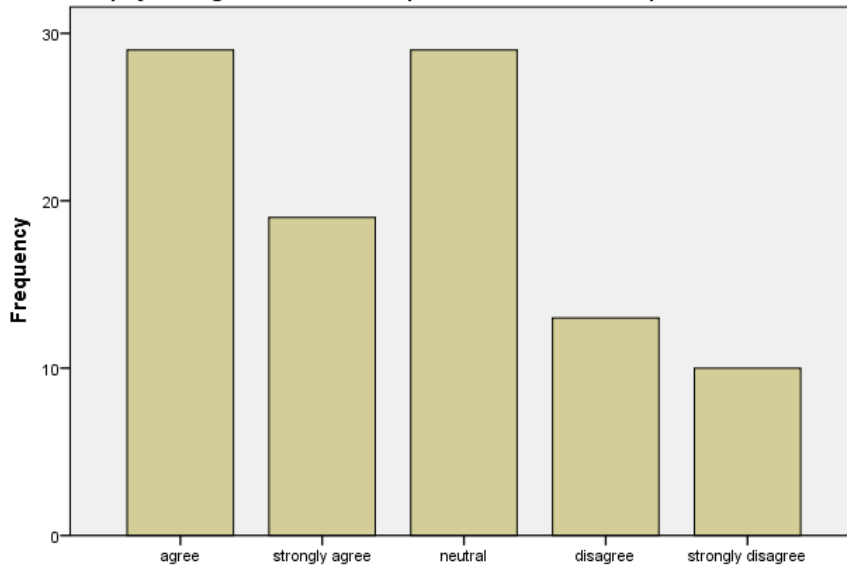
Psychological problems can be overcome by practicing - avoiding exposure to psychological and nervous pressures as much as possible.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agree	29	29.0	29.0	29.0
	strongly agree	19	19.0	19.0	48.0
	neutral	29	29.0	29.0	77.0
	disagree	13	13.0	13.0	90.0
	strongly disagree	10	10.0	10.0	100.0
	Total	100	100.0	100.0	

The answer to the question was Psychological problems can be overcome through practice - avoiding exposure to psychological and nervous pressures as much as possible.,

29 agree with 29 percent, 19 strongly agree with 19 percent, 29 are neutral with 29 percent, 13 disagree, 10 strongly agree

Psychological problems can be overcome by practicing - avoiding exposure to psychological and nervous pressures as much as possible.



Psychological problems can be overcome by practicing - avoiding exposure to psychological and nervous pressures as much as possible.

Pearson:

Correlations

			A1	A2	A3	A4	A5	A6	A7	A8
	Pearson Correlation	1	.967**	.949**	.961**	.974**	.980**	.969**	.986**	.970**
	Sig. (2-tailed)		.000	.000	.000	.000	.000	.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A1	Pearson Correlation	.967**	1	.928**	.926**	.898**	.945**	.918**	.935**	.943**
	Sig. (2-tailed)	.000		.000	.000	.000	.000	.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A2	Pearson Correlation	.949**	.928**	1	.939**	.889**	.875**	.872**	.896**	.957**
	Sig. (2-tailed)	.000	.000		.000	.000	.000	.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A3	Pearson Correlation	.961**	.926**	.939**	1	.916**	.932**	.891**	.923**	.926**
	Sig. (2-tailed)	.000	.000	.000		.000	.000	.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A4	Pearson Correlation	.974**	.898**	.889**	.916**	1	.975**	.969**	.987**	.927**
	Sig. (2-tailed)	.000	.000	.000	.000		.000	.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A5	Pearson Correlation	.980**	.945**	.875**	.932**	.975**	1	.972**	.986**	.917**
	Sig. (2-tailed)	.000	.000	.000	.000	.000		.000	.000	.000
	N	100	100	100	100	100	100	100	100	100
A6	Pearson Correlation	.969**	.918**	.872**	.891**	.969**	.972**	1	.987**	.918**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000		.000	.000
	N	100	100	100	100	100	100	100	100	100
A7	Pearson Correlation	.986**	.935**	.896**	.923**	.987**	.986**	.987**	1	.935**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000		.000
	N	100	100	100	100	100	100	100	100	100
A8	Pearson Correlation	.970**	.943**	.957**	.926**	.927**	.917**	.918**	.935**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	
	N	100	100	100	100	100	100	100	100	100

**. Correlation is significant at the 0.01 level (2-tailed).

Comment on the result:

- The table displays the Pearson correlation coefficient between the variables, for example, the Pearson correlation coefficient between diabetes and age is .967 with a value of 0.000 which is less than 0.01 to indicate that it is statistically significant at a significant level of 0.01. We conclude from this that there is a strong direct relationship between age and an increase in psychological state
- We find that the Pearson correlation coefficient between age and mental health of the patient .949 with a significance value of 0.000, which is also smaller than 0.01 and indicates that it is statistically significant and therefore there is a direct relationship.
- There is a statistically significant relationship between age and diabetes and the increase in psychological disorders in addition to the relationship between gender and mental disorders, as women are more exposed to psychological problems.

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