

## BARRIERS TO SELF CARE, ILLNESS PERCEPTIONS AND THEIR RELATIONSHIP WITH SELF CARE IN TYPE 2 DIABETES MELLITUS

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**Introduction:** Type 2 Diabetes mellitus (T2DM) is a chronic disease that requires long-term medical care and lifestyle change. Many patients find it challenging to implement required behaviour changes and consequently, do not achieve glycaemic control. It is essential to research social cognitive factors that impact self care in T2DM.

**Aims:** To study the impact of barriers and illness perceptions on self care in T2DM

**Objectives:** To explore barriers to self care and illness perception and examine their relationship with self care, metabolic control and quality of life in T2DM.

**Methods:** A cross-sectional design was employed. The sample consisted of 60 patients with type 2 DM, meeting specified inclusion and exclusion criteria, recruited from the out-patient services of a hospital at Bangalore. The Barriers of self care questionnaire (Glasgow, 1994), The Revised Illness Perception Questionnaire (Morris et. al, 2002), The Summary of Diabetes Self Care Activities (Toobert & Glasgow, 1994) and The Diabetes Quality of Life Questionnaire Brief Clinical Inventory (Burroughs, Desikan, Waterman, Gilin & McGill, 2004) were administered. Metabolic control was assessed using glycosylated haemoglobin levels (HbA1c).

**Results:** Findings revealed that barriers to self care, negative perceptions of consequences of the illness and negative emotional representations were associated with poorer self care. Adherence was associated with better metabolic control and quality of life.

**Conclusions:** Barriers to self care and maladaptive illness representations pose a challenge in achieving self-care goals. Understanding barriers is the first step in facilitating practitioners to identify their role in enabling patients to overcome them.