

A thesis dissertation

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Template: Coping with illness and personal resources of people with diabetes

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Disease is in modern population of societies growing phenomenon diabetic. It takes a stand in development age equal. For fundamental problem carrying , process of wrestling is that with prolonged disease, research belongs to have in mind and stimulation of all its own personal stock and healthy units and groups of persons. The recovery process should be treated as a value in itself that fits in with the well-being of the modern man, but also in the social system in which he functions.

Wrestling impose limitations of daily lives with disease. Quality of life of person seems be with prolonged disease area of dignified analysis wrestling. It is important that in the process of addressing the challenges of chronic disease, tkae into account personal and health resources conducive to adaping to it.

Literature analysis has shown that the knowledge of the functioning of people with diabetes is insufficient. Analyzing the needs and expectations of people with diabetes is the answer to the need for constant monitoring of health, its manifestations and behaviors. The aim is to try to determine the need for promotional, educational and assistance activities in this area.

The structure of the work includes theoretical chapters, the methodological chapter on the prepared own research and four chapters covering the results of the analysis and interpretation of the conducted research. The first chapter includes reflections on the need for redefinition of problems in diabetology and presents issues of etiology and epidemiology of diabetes in Poland and in the world. The second chapter presents a theoretical analysis of the concept of personal resources in relation to salutogenesis as a new method in health sciences.

The empirical aim of this study is to assess the relationship between the struggle with disease and the personal resources of people with diabetes. Seeking correlates of coping with illness and a sense of coherence and a sense of quality of life in physical and

mental health, aspects of functioning, self-reliance, social relationships, environment and religion, and global quality of life.

In this context, the following main research problem has been formulated: Is there, and if so, what is the correlation between disease and personal resources of people with diabetes in terms of: expectations and beliefs, coherence, quality of life?

The question identifies two major phenomena in the title of the study, and is discussed in more detail in its subsequent chapters: the phenomenon of coping with chronic illness and the personal resources triggered by disease in the context of health expectations and beliefs, coherence and quality of life. They became the basis for distinguishing variables and indicators. The main focus of this study was on the relationship between disease and personal resources of people with diabetes in the context of their level of expectation.

The study was conducted from June to September 2014 in the Podkarpackie and Świętokrzyskie voivodships and included healthy individuals and persons with diabetes mellitus.

A method of diagnostic survey was chosen for the study, which included the following research techniques :

- *The Sense of Coherence Questionnaire (SOC-29)* , A. Antonovsky,
- *World Health Organisation Quality of Life -100.*
- *Acceptance of Illness Scale (AIS)*,
- *Patient Request Form (PRF)*,
- *The Multidimensional Health Locus of Control Scale (MHLC)*,
- *Generalized Self-Efficacy Scale (GSES)*,
- *Life Orientation Test (LOT-R)*,
- Survey questionnaire.

The collected research material was developed using, among others, descriptive statistics methods as well as one-dimensional / one-way analysis of variance (ANOVA). By means of cluster analysis, the subjects (healthy and diabetic) were divided into three groups: high, low and average. A comparison of the mean of each of the studied groups was performed by means of a post hoc multiple comparison test, ie, the lowest significant difference (NIR) test. The minimum significance level was considered as the range 0,05.

In order to perform a correlation analysis, a model of multiple stepwise regression was used, whereas the relationships between the variables tested were not curvilinear. The relationship between dependent variable (struggle with disease) and the independent variable human resources: coherence, quality of life was performed separately in each group of respondents, so that the obtained relationships could be compared with or without diabetes.

In the context of the main hypothesis that there is a correlation **between disease and personal resources of diabetic patients in terms of expectations and beliefs, coherence and quality of life**, it was verified in the sample.

People with diabetes in comparison with healthy people have a significantly weaker belief in the ability to solve difficult problems. The limitations of the disease are a result of the belief that in spite of effort and effort, the efficiency in difficult situations is beyond their reach. Self-efficacy in the context of difficult day-to-day problems in both groups is significantly different for diabetics. Healthy people are able to solve most problems when they are well on their way, if they put a lot of effort into it. Their expectations for their own effectiveness are high. Diabetics are less likely to believe in their ability to cope, having a particular predisposition to overcome difficulties when the environment is unfavorable to their actions. Particularly, the sick persons are determined to work to achieve their goals. Although patients expect support and encouragement in their illness, they can mobilize and meet their needs. The largest group of investigated diabetics in the process of struggling with the disease was expected to clarify the specifics of the disease by a physician at an average level. This demonstrates the prevalence in the group of patients with low and average need to make informed choices and with high trust in the doctor.

People with diabetes exhibit relatively high levels of coherence, although this is a type of unstable cohomology, due to the low level of sense of mastery and intra-group differences within the three cohorts. Perhaps in the group of people with diabetes, it is worth strengthening some of the skills through counseling and counseling. In the group of people with diabetes, there was a relationship between the level of health expectations and the level of spirituality, religiosity and personal beliefs. It can be assumed that diabetics have a satisfactory feeling in the environment of the disease. It can be said that people with diabetes in spite of struggling with the disease tend to life activity and by far the least numerous group admitted to existing limitations in this area. Most of them operate on a high and average level of activity, which enhances the feeling of satisfaction of life.

In summary, the study finds that there is a positive correlation between expectations and beliefs about health and coping with illness. The lower the expectations and beliefs of people with diabetes, the better the fight against diabetes. Improving adherence to the chronic and complex disease situation has redefined the need for health expectations.

To conclude, we now observe an intense population growth in people with diabetes. This results in increased demand for numerous aid and specialized activities, including educational and preventive measures

Finding the link between coping with illness and the level of personal resources available to people with diabetes seems important to understanding the structure of health expectations and beliefs of people with diabetes. The subjective assessment of the quality of life conditioned by the state of health and the level of acceptance of the disease may facilitate the assistance. When addressing the fundamental issue of chronic disease, it is important to consider and stimulate the specific personal and health resources of individuals and groups. The healing process should be regarded as a value in itself that fits in with the well-being of the modern man, but also in the social system in which he functions.

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