

HEALTH LITERACY ON TYPE- 2 DIABETES AND ITS NONMEDICAL IMPLICATION ON WORK LOSS AND PRODUCTIVITY AMONG SALARIED CLASS –A CASE STUDY IN MYSURU

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INTRODUCTION

Health literacy in general and diabetes in particular is low in developing and underdeveloped countries unlike developed nations. Most people in developing nations become aware of metabolic disorders like diabetes only when they have visible symptoms like weight loss, unheeling wound, excessive thirst, etc. Type- 2 Diabetes also known as noninsulin dependent diabetes mellitus (NIDDM) is becoming almost endemic. Poor understanding of the disease lands them in a sense of shock. Poor awareness and lack of diabetes management skills can severely affect the capacity to translate their passion into productivity in the job. Enthusiasm can be severally curbed. This in short will hamper employment outcome. Financial worry can be a constant companion in the absence of any meaningful source to supplement the treatment cost. In the present setup of Govt hospital the situation is weird (Balse, V.M. 2013).

The increased prevalence among younger individuals suggests that diabetes will become more common in the working-age population (Breton2013). In a study conducted by Danaei *et al* (2011) across the sixteen countries, people diagnosed with diabetes had a 30 percent increase in the rate of labor-force exit, compared to people without the disease. The psychosocial impact due to diabetes has a potential to bring down the motivation among employees, while a healthy employee can be highly productive. Evidence suggests that diabetes contribute to work loss and health-related work limitations for those who remain employed (kaan Tunceli *et al* 1994).

The phenomenon of intrinsic motivation was first acknowledged within experimental studies of animal behavior, where it was discovered that many organisms engage in exploratory playful and curiosity driven behaviors even in the absence of reinforcement of award (White 1959) Deci and Ryan (1985) observed that intrinsic motivation could stem from the organism's need to be competent and self-determining. This study is an attempt to analyze the Type- 2 diabetic prevalence among salaried class executives and resulting work efficiency losses.

OBJECTIVES OF THE STUDY

- To understand the awareness among employees (white collar) about diabetes
- To evaluate the work loss and poor employment outcome due to diabetes
- To identify the way employees became aware of their diabetic condition
- To measure the overall impact of employability due to diabetes.

METHODOLOGY

Primary data was exclusively used for the study. The study is descriptive and based on the data collection through questionnaire, interview and observation schedule the geographical area selected for study was Mysuru city. The present study was conducted between January to March 2015. From three diabetic clinics 172 respondents with type 2 diabetes were taken for the present study. Diabetic patients who were visiting the clinic regularly for checkup were picked up for the study. Hospital data base was made use of . Age group between 35 to 55, who were salaried and executive class employees were included in the study. A questionnaire was given to them. The method used was nonprobability convenience sampling method.



Research Paper SURVEY FINDINGS

Table -1, Age group Respondents

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AGE	RESPONDENTS (Male)	RESPONDENTS (Female)	TOTAL	PERCENTAGE			
35-40	14	10	24	14			
41-45	32	22	54	31			
46-50	28	24	52	30			
51-55	24	18	42	25			
	98	74	172	100			

There were in all 172 respondents of which 98 were male and 74 were female. Age group varied between 35 to 55 among the respondents .14 percentages of respondents were between 35-40 age group. 41 to 45 years of age constituted 31 percent of the respondents. 30 percent of respondents were between 46 and 50 years of age and 25 percent of respondents were between 51 and 55 years of age.

Table -2 Education Qualification

	SSLC	Graduation	Post Grad	Ph.D
Male	9	82	5	2
Female	5	41	28	0
Total	14	123	33	2
Percentage	8	71	19	1

Former education of the respondents has been given in the above table which was collected through survey . 71 percent of respondents were graduates and 19 percent had obtained post graduate and 8 percent were just SSLC passed.

Table -3, Way Diabetes was diagnosed

	Voluntary checkup	Disturbing symptoms	Medical checkup by employer	Discovered accidentally	Total
Male	4	18	2	74	98
Female	5	8	3	58	74
Total	9	26	5	132	172
Percentage	5	15	3	77	100

It was not surprising to know that 77 percent of respondents came to know that they are diabetic when they had visited the clinic for different reasons like viral fever and injuries. Only 5 percent of respondents expressed that it was due to their own knowledge about this metabolic disorder that they visited clinic for blood checkup. 15 percent of respondents said that they had symptoms like polyurea and weight loss which mad them visit clinic.

Table-4 Work loss and Productivity

	Limits activities	Reduced Concentration	Constantly Under	Low health	Health literacy	Contribute to work	Economic burden
		on Job	strain	literacy	Can	loss	on family
				on Diabetes	Postpone Diabetes		
Male	51	58	41	60	74	54	69
Female	77	38	78	86	84	34	65
Total	128	96	119	146	158	88	134
Percentage	74	56	69	85	91	51	78

It was revealed through the above table that 78 percent of the respondents were of the opinion that diabetes management puts heavy burden on the family. And 91 percent of respondents expressed that adequate knowledge



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of diabetes would have prevented or postponed their diabetic condition. Having gone through the woes associated with diabetes, 69 percent felt that they were under lot of stress. And almost half of respondents (56) opined that their concentration in job function was disturbed due to disease. 74 percent of respondents felt their job related activities are severely hampered ever since they were diagnosed diabetic.

CONCLUSION

Our study has shown that employees (56%) with type2 diabetes have reduced work performance due to inability to concentrate on job. Reduced enthusiasm in general was very much evident in the study due to the stress factor associated with management of disease. Many expressed they were not able to take higher responsibility in their job as promotion would entail long hours of work and traveling. They fear that diet recommended by the health care professional would be difficult to comply with, due to the compulsion of long hours of stay away from home which higher responsibility may demand. Not taking up higher responsibility means stagnation in their career. According to them, it is a complex psychosocial phenomenon to strike balance because their earning was heavily compromised due to diabetes. This puts them at lot of stress with the growing inflation and cost of living.

Most (91 %) had searched extensively on Google about the disease only after they were advised medication. Regret was very much evident with very high percent of employees (85 %) that they had inadequate knowledge about required life style modification and dangers of sedentary life style. Further, warning factor revealed through the study that more and more young working populations are becoming diabetic in urban India. The proliferation of sedentary work in modern employment contributes significantly to the increasing prevalence of lifestyle diseases. One of these is type 2 diabetes mellitus, a condition currently reaching epidemic (Wild 2004). It was also revealed that not many employers are encouraging or funding for the diabetes test. Employers feel that employees with diabetes have reduced work efficiency. At times these employees are looked down upon by colleagues as lees productive.

The economic burden and nonmedical implication of diabetes on the employees is a concern in Indian society. The costs associated with management and control of diabetes remains a cause of strain.

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