Original Article

Personality, Social Support And Locus Of Control Among Diabetic Patients

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Abstract

Diabetes is the disease which has become common in our life. Some expert also called it a lifestyle illness. Lifestyle is influenced by number of factors. Present study focused more on psychological aspects of an individual life. Therefore, the current study aimed to find the association among social support, locus of control & types of personality among diabetic patients. There were total of 319 diabetic patients that have been selected purposively from government hospital of Sawai Madopur District of Rajasthan, India. There was found highly significant relationship between different level of social support and different types of personality ($\chi 2=53.29$, $p<0.01$) and no significant relationship ($\chi 2=0.67$, $p>0.05$) between different levels of social support and locus of control. Another finding suggests no significant relationship ($\chi 2=1.11$, $p>0.05$) between different levels of locus of control and different types of personality. So, it may be said that type of personality is not independent from social support, but locus of control does. Another result indicated that locus of control is independent from the types of personality among diabetic patients. Therefore, it may be recommended the important role of personality and social support in diabetes.

Keywords: Diabetes, Psychological Factors, Diabetic Patient, Social Support, Locus of Control, Types of Personality

INTRODUCTION

Life of an individual is full of challenges and changes. Either it is about health or wealth. Wealth can be created only if a person is healthy. Unfortunately, due to changes in lifestyles of men led to many health issues. Diabetes is one of the illnesses that can also be caused by changes in lifestyles. There are several studies that show the important role of psychological factor in diabetes. Some of them like social support, locus of control and personality of the diabetic patient are being explored in the current study. The presence of supportive people in one's life enhances emotionally and physically well being. Social support refers to the caring, ease, esteem, or any type of assistance a person receives from other people or group (Wills, 1984). Tol, et al (2011) found social support relationship with HbA1C in Type II and not in Type I. Marital status, BMI and gender had significant relationship with Social Support from family & HbA1C in both Type I & II Diabetes. Age had significant relation with perceived Social Support & HbA1C in Type II Diabetes. Theofilou (2012) investigated the influence of the social support on mental health and locus of control support and found its positive association with internal LOC. A positive influence was resulted between social support and internal health locus of control in the study. A study by Awasthi, et al (2013) found social support can alter a patient's perspective of their health issues as well as the effects of those concerns. Nicklett and Liang (2010) found that diabetic support is not significantly related with health decline, but diabetic support is related with adherence to health promoting behaviours consisting of a diabetic regimen. Aflakseir, et al (2013) found a strong locus of control was more likely to follow the suggested diet plan. Jahan (2014) found patients having a high Internal Locus of Management had well-controlled blood sugar levels and could be kept under better medical control. Another study by Aghaei,et al (2013) suggested that personality type, locus of control and occupational satisfaction can predict occupational exhaustion. Social support, locus of control and personality are very important variable in human life. In diabetes one of the major difficulties is that many diabetic patients are unable to commit to the treatment plan. People either stop eating medicines in between or stop following proper diet. Many researchers have shown that the kind of behaviour one showcase is the result of the personality one has. To understand this behaviour of 'lack of commitment towards the medical treatment plan' by the diabetic patients, it is important to understand their personality type and other factors like locus of control and social support that impacts the personality. By understanding these factors researcher can contribute in recognizing the reasons of lack of commitment and can help to improve this behaviour which may further have a great impact in the health care system.

A brief background of the diabetes and associated psychological factors in above paragraph shows the relevance of psychological factors and its contribution in overall state of diabetes among diabetic patient. However there are several factors related to diabetes and its causes but only social support, locus of control and type of personality of the diabetic patients were included in the current study. These study variables are explored in the present study from association point

of view. In other words, the current study explored how different psychological factors are associated with one another among diabetic patients.

Review of Literature

Bhatia and Dey (2011) found that social support does buffering effect on daily hassles among working women.
Injeyan, et al. (2011) found the locus of control and dispositional optimism are aspects of personality known to influence coping style. Those at highest risk experienced moderate-to-high burnout, low-to-moderate compassion satisfaction, and tended to rely on religion/spirituality when coping with stress.
Theofilou (2012) investigated the influence of the social support on mental health and locus of control support. It was associated positively with internal LOC a positive influence was resulted between social support and internal health locus of control study.
Aghaei,et al (2013) examined the role and contribution of each of the variables of personality types, locus of control & occupational satisfaction on job burnout. The results of multiple regression analysis highlight that personality type, locus of control and occupational satisfaction can predict occupational exhaustion.
Awasthi, et al (2013) found Social support can alter a patient's perspective of their health issues as well as the effects of those concerns.
Jahan (2014) found patients having a high Internal Locus of Management had well-controlled blood sugar levels and could be kept under better medical control. Women exhibited a very submissive behavior.
Ibrahim, et al (2015) described that personality traits, namely extraversion and neuroticism, were found to be associated with health related quality of life. Affectionate social support was also associated with higher health related quality of life.
Besen, et al (2016) found Internal LOC is positively correlated to self care activities. Locus of control predicts 19% of self care activities.
Lönnqvist, and Deters (2016) described that social network was associated with subjective well being and perceived social support.
Biernacka, et al (2017) explored a better internal health locus of control. It was favorably connected with the relationship between the self-health locus of control and the effectiveness of participation in the treatment process in teenagers with chronic diseases.
Durá-Ferrandis, et al (2017) described that personality and social resources affect the course of long-term emotional well-being of older breast cancer survivors. Treatment is more important for physical and cognitive than emotional function. Early identification of those vulnerable to deterioration could facilitate clinical and psychological support
Kandi and Zeinali, (2017) described that increasing the psychological hardiness, internal locus of control and openness and by decreasing the neuroticism, and quality of life could be increased.
Pentina, and Zhang (2017) described that certain personality traits as well as perceived social support from friends, are significantly related to the disclosure of positive emotions on facebook and other social media.
Hope, et al (2018) described that unique association between external locus of control and border personality disorder features and suggest a role for external LOC in related emotion regulation problems.
Sari and Fakhruddiana (2019) described that very significant correlation between internal locus of control and social support with academic procrastination of the students and very significant negative correlation between internal locus of control with academic procrastination.
Giao, (2020) suggested to service industry to try to improve their employees' work-family balance, to reduce job burnout and take advantage of these emotional balances and supportive environments to create beneficial outcomes.

OBJECTIVES

1. To find the relationship between social support and personality among diabetic patients
2. To explore the association between social support and locus of control among diabetic patients
3. To measure the association between personality and locus of control among diabetic patients

HYPOTHESIS

Ho: There will be no significant relationship between social support and types of personality among diabetic patients.
Ho: There will be no significant relationship between social support and locus of control among diabetic patients.
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RESEARCH METHOD

a) Research Design:

Correlation research design is used. The correlation method involves looking for relationship between variables. The correlation method is characterized by quantification since the magnitude of variables must be ascertained

b) Sampling:

In this present study purposive sampling technique have been used. A purposive sample is a non-probability sample that is selected based on characteristics of a population and the objective of the study. A Sample of 319 diabetic patients has been selected from government hospital from Sawai Madopur District, Rajasthan, India.

c) Tools:

1. Social Support Scale (SSS) by Naik and Khan (2019): This scale is about how one feels in certain social situations. The purpose of this questionnaire is to know feeling towards social support. This scale contains 21 items.
2. Type A Behavior profile is adapted from Bortner & Rosenman (1967) and Powell (1992): This scale contains 13 items. With help of this scale try to know about type A personality of a patients.
3. Rotter's Locus of Control Scale adapted by Kumar and Srivastava (1984): This have been used to assess the level of locus of control. This scale contains 29 items.

d) Statistical Analysis: To make meaningful and appropriate inferences, the objectives-aligned classification and tabulation of the collected data was done by using SPSS and to find the relationship Chi-square test ($\chi 2$) has been used in the present study.

RESULTS AND DISCUSSION

Findings of the study are presented in the different tables. Table No 1 is showing the relationship between Social support and Types of personality among diabetic patients this table no 1 results show that out of 319 diabetic patients 118 diabetic patients have average social support, 90 diabetic patients have low social support and 109 diabetic patients have high social support, from these total of diabetic patients in which 6 diabetic patients have type A personality, 182 diabetic patients have balanced Personality and 131 diabetic patients have type B personality.

Table 1: - Social Support and Types of Personality

		Types of Personality				$\chi 2$	p-value
		Type A	Balanced	Type B	Total		
Social Support	Average	1	42	75	118	53.29	.000**
	Low	5	71	16	92		
	High	0	69	40	109		
	Total	06	182	131	319		

Table 2: - Social Support and Locus of Control

		Locus of Control			$\chi 2$	p-value
		External	Internal	Total		
Social Support	Average	117	01	118	.67	.717
	Low	90	02	92		
	High	107	02	109		
	Total	314	05	319		

In table no 2, Out of 316 diabetic patients 314 diabetic patients have external locus of control and 05 diabetic patients have internal locus of control.

Table 3-Locus of Control and Types of Personality

		Types of Personality				$\chi 2$	p-value
		Type A	Balanced	Type B	Total		
Locus of Control	External	6	178	130	314	1.113	0.573
	Internal	0	04	01	05		
	Total	6	182	131	319		

In table no 3, out of 319 diabetic patients 06 diabetic patients have type A personality, 182 diabetic patients have balanced personality in which 131 have type B personality other hand 314 diabetic patients have external locus of control and 05 diabetic patients have internal locus of control.

The objective of the present study is to find the association among three different combinations. These combinations include social support and types of personality, social support and locus of control and last one is locus of control and types of personality. In this study total number of diabetic patients is 319.

Social Support and Types of Personality: Table no 1 describe association between social support and different types of personality (Type A and Type B). There was found highly significant relationship ($\chi 2=53.29$, $p<0.01$) between different levels (Average, Low and High) of social support and different types of personality (Type A and Type B). Out of 319 diabetic patients 118 diabetic patients who have average social support in which 1 diabetic patient has type A personality, 42 diabetic patients have balanced personality, and 75 diabetic patients have type B personality. Out of 319 diabetic patients 92 diabetic patients who have Low social support in which 5 diabetic patients have type A personality, 71 diabetic patients have balanced personality and 16 diabetic patients have type B personality. Out of 319 diabetic patients 109 diabetic patients who have high social support in which 0 diabetic patients has type A personality, 69 diabetic patients have balanced personality and 40 diabetic patients have type B personality. It means there were 313 (182=Balanced Type and 131=Type B Personality) diabetic patients in the study who falls under the category of Balanced and Type B Personality which is more than Type A personality and 227 (118 average social support and 109 high social support)

diabetic patients in the study who falls under the category of average and high social support which is more than low social support. Therefore, it may be said that type of Personality is not independent of social support among diabetic patients. Null hypothesis no 1 which states that there will be no significant relationship between social support and types of personality among diabetic patients present study is rejected. Thus, based on the current study finding it can be inferred that there would be some role of social support and types of personality among diabetic patients.

Social Support and Locus of control: Table no 2 describe association between social support and Locus of control (external and internal). There was found no significant relationship ($\chi 2 = .666$, $p>0.05$) between different levels (Average, Low and High) of social support and locus of control (external and internal). Out of 319 diabetic patients 118 diabetic patients who have average social support in which 117diabetic patients has external locus of control, 1 diabetic patients has internal locus of control. Out of 319 diabetic patients 92 diabetic patients who have Low social support in which 90 diabetic patients have external locus of control. 2 diabetic patients have internal locus of control. Out of 319 diabetic patients 109 diabetic patients who have high social support in which 107 diabetic patients have external locus of control. 02 diabetic patients have internal locus of control. It means there were 319 (314= external locus of control and 5= internal locus of control) diabetic patients and 227 (118 average social support and 109 high social support) diabetic patients in the study who falls under the category of average and high social support which is more than low social support. Therefore, it may be said that the social support is independent of locus of control among among diabetic patients. Null hypothesis no 2 which states that there will be no significant relationship between social support and locus of control among diabetic patients present study is accepted. Thus, based on the current study finding it can be inferred that there would be no role of social support and types of personality among diabetic patients.

Locus of control and Types of personality: Table no 3 describes association between locus of control and different types of personality (Type A and Type B). There was found no significant relationship ($\chi 2 = 1.113$, $p=0.573$) between different levels (external and internal) of locus of control and different types of personality (Type A and Type B). Out of 319 diabetic patient's 314 diabetic patients who have external locus of control in which 6 diabetic patients has type A personality, 178 diabetic patients have balanced personality and 130 diabetic patients have type B personality. Out of 319 diabetic patients 05 diabetic patients who have internal locus of control in which 0 diabetic patients have type A personality, 04 diabetic patients have balanced personality and 01 diabetic patients has type B personality. It means there were 313 (182=Balanced Type and 131=Type B Personality) diabetic patients in the study who falls under the category of Balanced and Type B Personality which is more than Type A personality and 319 (314 external locus of control and 05 internal locus of control) diabetic patients. Therefore, it may be said that locus of control is independent of types of personality among diabetic patients. Null hypothesis no 3 which states that there will be no significant relationship between locus of control and types of personality among diabetic patients is accepted. Thus, based on the current study finding it can be inferred that there would no role of locus of control and types of personality among diabetic patients.

CONCLUSION

At last, it can be concluded social support and personality of diabetic patients is associated. In another finding suggests no association between social support and locus of control and type of personality among diabetic patients. In other words, it can be said the type of personality and social support among diabetic patients is more of a concern than a locus of control for diabetic patients.

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