Chapter 9

Findings, Suggestions and Conclusion
In this chapter the researcher attempts to reveal the important findings and summary of the study. Later part of this chapter deals with the conclusions and suggestions. This research intended to study the problems of people living with chronic diseases such as diabetes and hypertension.

**Findings**

Very recently a reputed newspaper daily reported that India is the diabetes capital of the world. This shows the intensity of the problem and the challenges posed to India at this juncture. WHO is stressing on prevention and treating of chronic disease, it say that it is the duty of every country to make a vital investment in protecting their country from the deadly chronic disease. If plans are not formulated to curtail the chronic diseases, the deaths occurring due that will steadily increase and will be the major cause of death in the near feature. Therefore, there is need to study on the problems of people living with chronic diseases. This research intends to do that and the major finding of the study are discussed in the chapter.

In the sample population the females are more than males, and this shows the general trend of female getting affected by diabetes and hypertension is prevalent in the study area. This trend can be noted in the statistic given by the health department of Puducherry. Until 2006 the males are predominately high in having chronic diseases. After that there is a shift in the trend, from 2007 onwards it is females who are more affected by the chronic disease. This may be due to mostly females hesitate to reveal their health disorders and try to manage themselves. But
when the Government of Puducherry introduced the health card scheme it screened all the residents of Puducherry for Hypertension and Diabetes and in that process many females were diagnosed with these chronic conditions. Until that time many of them are living with the disease for many years, without the awareness that they have the disease.

It was revealed in the analysis that majority of the people living with the chronic disease are above 50 years of age. It accounts for about 58 percent of the total sample population, one third of them are middle aged. The trend in the distribution of age tend to reflect the overall trend and old aged people are more prone to these chronic diseases such as diabetes and hypertension is well understood.

It is evident from the study that the sample population is dominated by Hindus and Other Back Ward Class people. Other religious and community groups are very few in number as far this study is concerned. Considerable number of illiterates is there in the study population and very few respondents are higher level of education. Majority of the respondents are married and living with their spouse. Due to sample selection there is equal number of respondents from rural and urban areas.

Majority of the respondent’s income was below 5000 rupees, which shows that they are very low in income level and due to that they could not fulfil their health needs. It also influences the quality of life and the patterns of diet they take.
Predominantly it is found that the sample population consists of nuclear families. Due to that there is very low level of support system in the families.

The study revealed that in the sample population the majority who are eligible to get Old age pension are utilizing the facility and availing old age pension. As far as housing facility is concerned they have very good housing facility. Out of that majority of them live in own houses. It is also evident from the study that majority of the respondents have very good water facility and toilet facility. It is found when grouping overall economic status that a majority of the respondents falls under medium economic status.

It is found out from the study that only one-third are able to control important things in their life and cope up with their social life and other find it very difficult to control thing and cope up in their life. Great number of respondents took neutral stand in their opinion about their health status. And very few has said that they have very good health status. It is found that people iving with chronic diseases such as Diabetes and Hypertension have difficulties with work and household activities, difficulties with moving around, difficulties with Self Care, suffering from bodily aches or pains/discomfort, difficulty with concentrating or remembering, and problem with sleeping.

The findings revealed that the PHCs are the main source of diagnosis, and next comes the diagnosis with private medical doctors. After the diagnosis of the disease, a majority take regular treatment. The years of duration of living with disease and treatment is found that majority of them are taking treatment for longer
duration. Some visit the doctor regularly and some do not. This is found out to be due to family reasons purely.

It is also found out that there exists a good relationship between the doctor, paramedical staff and the patients. It is found that very little number of persons are having the habit of smoking and alcoholism. A majority of them have awareness on their diet control and follow regular strict diet control. Most of them eat vegetables, greens and fruits in their diet. Very few had stated that they will eat non-vegetarian food rarely. Most of the do moderate physical activities and it is found that it is difficult to walk by old people. It was also found out from the study that in spite of the regular eating habit, people continue to have the problems arising due to chronic diseases because of the reason that they are not monitoring their health regularly by visiting doctor.

It is found that diabetes and hypertension are the two major chronic diseases which is prevalent in the study area. This statement is true for whole of Puducherry because of the fact that the data on these diseases shows the prevalence of the disease very clearly.

Findings on the problem of People living with chronic Disease (Diabetes and Hypertension) are on different levels. First, the onset of the problem many of them refuse to accept the fact when they are diagnosed with the disease. Second, immediately they feel emotionally distressed and feel vulnerable, helpless and uncertain. Third, slowly they extend their awareness and try to cope up with the disorder. When they recognize that they have to live with disease for their life then
they slowly adapt to the disease and learn to live with it. Unless it is a life threatening chronic condition then people can manage it by themselves.

It is also found that the chronic pain can affect the social relationship and causes isolation, as it always bring in to play cancelling response from others. This is due to when a chronic disease patient experiences pain it is often no organic and cannot be verified medically, therefore others may doubt it. This causes the loss of social relationships with others, and the sympathy and support of friends and relatives begin to ruin.

It is evident from the study that people living with chronic disease have to contend with medical treatments and their side-effects I did not see much about this, mysterious remissions and exacerbations of the disease, and changes in lifestyles, activities, roles, and relationships. Some changes are relatively small; however, others are substantial and are often experienced as a series of losses—of freedom, of hobbies, of employment, of physical appearance and abilities, and even of friendships. Many cause a loss of control over the body, which can lead to stigma and devaluation.

One of the objectives of the present study was to find out the reason behind people choice of not opting for treatment for chronic disease at early stage. The reasons behind this are: First as discussed earlier in this part the onset of the symptom of the disease. When there is some life threatening problem arising out of the chronic disease then people take it more seriously and adapt regular medication and treatment. On the contrary when the problem is minor or can be tolerable then
they are more relaxed with it. Therefore, the intensity of the problem caused by the chronic disorder decides the choice of opting for treatment at early stages of the Chronic Disease.

The final objective can be well explained by the hypotheses tested in the study. It was found from the analyses that educated people effectively manage chronic disease better than illiterates. Another important finding from the study is that in the study area there is no difference in treatment pattern between rural and urban people. Therefore, it implies that there is no difference in health care practices among rural and urban people living with diabetes and hypertension. It was discovered that males cope up with the chronic diseases in a better way than females.

On the whole, the problems pertaining to disease causes problem in the social life of the people, making them isolated from the family and eventually from the society. Very few cope up with the disease in a better way and come out of their worry. Mostly people diagnosed with this chronic disease find it very difficult to cope up and manage social condition.
Suggestions

As the aim of the present study is to find out the problems of people living with chronic disease with special focus on diabetes and hypertension which is prevalent in the study area, the researcher gives suggestion in improving the facility available for them. It will reduce the problems identified in the study. The suggestions are:

- To improve the health care facilities available to them, by providing the facilities like, regular blood investigation, individual care and quality medicine. Another important measure to be adapted is grading of the patients depending upon the intensity of the problem they have and treating them accordingly.

- To reduce the increase in prevalence of the chronic disease intensive awareness programs should be formulated and conducted. Because, when people particularly younger generation are educated with the evil effects of the chronic diseases and the factors influencing them, then they will be very careful in maintaining their health. This may reduce the prevalence of the disease in the coming years.

- But at the current context they can manage the difficulties and problems faced only by improving the health care facilities and their economic conditions and learn to cope with the disease.
Conclusion

Sociological studies of chronic disease are trying to the characterize the social experience go out of it over a period of time. In doing so lot of difficulties are faced due to its features of continuous change; indeed, attempting to characterize chronic illness in stable and permanent terms is a practically impossible. Because the factors binding it are fast - changing.

This research has tried to focus on the problems of people living with chronic disease with their social relations, and self and identity. Mostly the discussion has led to the conclusion that people face problems with their social relations. Increase in dependency, burdens other members of the family and results in the conflict of social relations. This was evident not only with family members but also with friends and relatives. It was very difficult for people with chronic illnesses manage those challenges.

To conclude that I would like to emphasize that chronic illness like diabetes and hypertension induces many social problems. So, those who are in charge of controlling these diseases should be responsible to enlarge the scope of preventing. To do this properly we need specially trained personnel applying specifically designed programs.