

THE RELATIONSHIP BETWEEN PERSONAL PREFERENCE SUPPORT AND HYPERGLYCEMIA PREVENTION AMONG INDIVIDUALS WITH TYPE 2 DIABETES MELLITUS AT DINOYO PUBLIC HEALTH CENTER

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ABSTRACT

Background: Type 2 diabetes mellitus (T2DM) is a chronic disease characterized by hyperglycemia due to impaired insulin secretion and/or insulin resistance. Preventing hyperglycemia requires long-term management, not only through pharmacological therapy but also through *personal preference* support tailored to each individual's needs. **Objectives:** The purpose of this study was to identify personal preference support, hyperglycemia prevention, the most influential personal preference support, and to analyze the relationship between personal preference support and hyperglycemia prevention in individuals with type 2 diabetes mellitus at the Dinoyo Community Health Center. **Methods:** This research employed a correlational analytic design with a cross-sectional approach. The sample consisted of T2DM patients at Dinoyo Public Health Center, selected using purposive sampling 152 respondent. Data were collected using questionnaires on *personal preference* support and hyperglycemia prevention. The data were analyzed using the Spearman Rank test. **Results:** The findings revealed a significant relationship between *personal preference* support and hyperglycemia prevention in T2DM patients ($p\text{-value} = 0.025$). Emotional and instrumental support were the most dominant forms, helping patients adhere to healthy diets, engage in regular physical activity, and comply with prescribed treatments. **Conclusion:** There is a significant positive relationship between *personal preference support* and hyperglycemia prevention among patients with type 2 diabetes mellitus at Dinoyo Public Health Center. The higher the family or close relatives' support, the better the patients' behavior in preventing hyperglycemia. Therefore, it is essential to enhance family-based health education, continuous family engagement, and patient support groups at the primary health care level to strengthen diabetes management and prevent complications.

Keywords: Type 2 Diabetes Mellitus, Personal Preference, Support, Hyperglycemia Prevention