

# Diabetes Knowledge Attitude and Self-Management Practices among Elderly Women with Diabetes in State Hospital Oyo, Oyo State, Nigeria

**AUTHOR(S):** BELLO Ruth Eleojo , OLARERIN Jokotade Jemilat , ABDULLAHI Salamat Bola, OZOR Onyinyechi Francisca , OLANREWAJU Greatmercy Ojonugwa, OGUNDARE Teniola Zainab, AKINLOYE Success Lios

## Abstract:

Effective diabetes management requires adequate knowledge, positive attitudes, and consistent self-management practices. However, limited research has explored these dimensions among elderly women in Nigeria. A descriptive cross-sectional design was used for this study. The target population comprise of elderly women who are diabetic and attending State Hospital. Multi-Stage sampling technique was used to select 53 respondents from the total population. Instrument for data collection was self-structured questionnaire which consisted of five sections (A-E). Data analysis was carried out using SPSS package version 26, presented in percentages, frequencies and tables. Chi-square was used to test the hypotheses at 0.05 significant level. Findings revealed that majority of respondents are Islamists (37.7%), with a monthly income of 60,000-99,999 (43.5%), has two births (32.1%) and living with spouse (35.8%). This study indicate that the level of knowledge of diabetes among elderly women in State Hospital Oyo is average (52.8%), their attitude is positive (56.6%) and their level of self-management practices is poor (30.6%). Three hypotheses were tested and Hypothesis 1 reveals that there was no significant relationship between knowledge of diabetes and self-management practices ( $\chi^2 = 7.731$ ,  $P = .102$ ). Hypothesis 2 shows that there was no significant relationship between attitude and self-management practices ( $\chi^2 = 8.876$ ,  $P = .012$ ). Hypothesis 3 indicated that there was no significant relationship between age and diabetes self-management practices among the respondents. ( $\chi^2 = 6.393$ ,  $P = 0.381$ ). Elderly women in Oyo exhibited moderate knowledge, positive attitudes toward care on diabetes but poor self-management. This underscores the need for culturally adapted diabetes self-management education (DSME)

**CJAR**

Accepted 5 December 2025  
Published 15 December 2025  
DOI: 10.5281/zenodo.17943260



programs emphasizing behavioral reinforcement and psychosocial support.

**Keywords:** Knowledge, Attitude, Self -Management Practices, Elderly Women, Diabetes,



**About Author**

**Author(s): BELLO Ruth Eleojo**

College of Nursing Sciences,  
University of Ilorin Teaching Hospital, Ilorin, Nigeria

**OLARERIN Jokotade Jemilat**

College of Nursing Sciences,  
University of Ilorin Teaching Hospital, Ilorin, Nigeria

**ABDULLAHI Salamat Bola**

College of Nursing Sciences,  
University of Ilorin Teaching Hospital, Ilorin, Nigeria

**OZOR Onyinyechi Francisca**

Department of Nursing Science,  
Atiba University, Oyo, Oyo State

**OLANREWAJU Greatmercy Ojonugwa**

Faculty of Nursing Sciences,  
Thomas Adewumi University, Oko-Irese, Oko/  
Department of Nursing Science, Atiba University, Oyo, Oyo State

**OGUNDARE Teniola Zainab**

Faculty of Nursing Sciences,  
Thomas Adewumi University, Oko-Irese, Oko/  
Department of Nursing Science, Atiba University, Oyo, Oyo State

**AKINLOYE Success Lios**

Faculty of Nursing Sciences,  
Thomas Adewumi University, Oko-Irese, Oko/Department of Nursing Science, Atiba  
University, Oyo, Oyo State



## Introduction

Diabetes mellitus is a chronic metabolic disorder characterized by persistent hyperglycemia resulting from defects in insulin secretion, insulin action, or both. Type 2 Diabetes Mellitus (T2DM), which accounts for more than 90% of all diabetes cases, is a major global public health problem (International Diabetes Federation, 2021). It is associated with severe complications such as cardiovascular disease, nephropathy, neuropathy, retinopathy, and diabetic foot ulcers, which contribute to high morbidity, disability, and premature mortality. The burden of diabetes has increased alarmingly in recent decades, with low- and middle-income countries such as Nigeria experiencing a rapid rise in prevalence due to urbanization, sedentary lifestyles, poor dietary habits, and population ageing (Ong, Jani & the global burden of diabetes [GBD], 2023).

Globally, diabetes management has shifted from hospital-based care alone to a more comprehensive approach that emphasizes patient self-management. Effective diabetes self-management involves medication adherence, dietary modification, regular physical activity, self-monitoring of blood glucose, and foot care. Studies have shown that patients who demonstrate good knowledge and a positive attitude toward self-care practices achieve better glycemic control and reduced risk of complications (Adams et al., 2021; Okoye & Ohenhen, 2021). However, despite these benefits, adherence to diabetes self-management remains a major challenge in many developing countries, including Nigeria.

In Nigeria, elderly women living with diabetes face unique challenges. Many lack adequate knowledge of the disease and find it difficult to comply with dietary modifications, often because they cannot prepare separate meals from their families due to cultural and economic constraints. Others experience psycho-emotional distress, financial difficulties in purchasing medications, and limited access to continuous diabetes education (Onwuchuluba, 2019). For instance, in Isokun Oyo, an elderly woman who has been living with diabetes since 2014 reported persistent difficulty in controlling her blood sugar because she could not afford or manage special meals different from her household's diet. Consequently, her blood sugar levels remained consistently high, leading to recurrent diabetic foot ulcers and frequent hospital visits. This case illustrates the broader struggle among many elderly women with diabetes in Nigeria who lack adequate support for effective self-management.

While several studies have examined diabetes self-care practices in Nigeria, there remains limited research focusing specifically on elderly women in peri-urban communities such as Oyo. This group is particularly vulnerable due to age-related physical decline, socioeconomic challenges, and cultural barriers to adopting recommended lifestyle modifications. Understanding their knowledge, attitude, and self-management practices is therefore critical to designing tailored interventions that can empower them to manage their illness more effectively, prevent complications, and improve their quality of life.

Therefore, this study will assess the level of diabetes knowledge, attitude, and self-management practices among elderly women with diabetes in State Hospital Oyo; identify sociodemographic, clinical and health-system factors associated with poor knowledge or suboptimal self-care; and use the findings to recommend targeted educational strategies and community-based interventions aimed at improving self-care, glycemic control, and quality of life in this vulnerable group.



The broad objective of this study was to assess the level of diabetes knowledge, attitude and self-management practices among elderly women in Igando Lagos Nigeria. Specifically, the objectives of this study include:

1. To assess the level of knowledge of diabetes among elderly women in State Hospital Oyo.
2. To determine the attitude among elderly women with diabetes in State Hospital Oyo.
3. To assess the self-management practices for managing diabetes among elderly women in State Hospital Oyo.
4. To explore the relationship between knowledge attitude and self-management practices among elderly women living with diabetes in State Hospital Oyo.

#### Research Questions

1. What is the level of knowledge of elderly women towards diabetes in State Hospital Oyo?
2. What are the attitudes of elderly women towards diabetes in State Hospital Oyo?
3. What is the impact of self-management practices on diabetes among elderly women in State Hospital Oyo?
4. What is the relationship between knowledge attitude and self-management practices among elderly women living with diabetes in State Hospital Oyo?

#### Research Hypotheses

- 1) There is no significant relationship between knowledge of elderly women and diabetes in State Hospital Oyo.
- 2) There is no significant relationship between attitude of elderly women and diabetes in State Hospital Oyo.
- 3) There is no significant relationship between impact of self-management practices and diabetes among elderly women in State Hospital Oyo.
- 4) There is no significant relationship between knowledge attitudes and self-management practices among elderly women with diabetes in State Hospital Oyo.

#### Methods and Materials

A descriptive cross-sectional survey design was adopted for this study. This design enables the collection of data from a defined population at a single point in time and is appropriate for assessing diabetes knowledge, attitude and self-management practices among elderly women with diabetes in |State Hospital Oyo. The target population for this study comprises elderly women who are diabetic and attending State Hospital. These women represent a diverse group in terms of age, educational background, and socioeconomic status. Multi-Stage sampling technique was used to select 53 respondents from the total population. Instrument for data collection was self-structured questionnaire which consisted of five sections (A-E). The questionnaires were administered to the respondents with the help of two trained research assistants and retrieved immediately after filling. Ethical approval and permission were obtained from the ethical committee and appropriate authority of State Hospital, Oyo. Data analysis was carried out using SPSS package version 26. Descriptive statistics was used to answer the research questions while Chi-square was used to test the hypotheses at 0.05 significant level.

#### Results

**Table 1: Respondents' Socio-demographic analysis (n=53)**

Variables	Frequency	Percentage
Age Distribution		



50-60 years	17	32.1
61-70 years	14	26.4
71-80 years	14	26.4
81 years above	8	15.1
Total	53	100.0
<b>Marital Status</b>		
Single	4	7.5
Married	20	37.8
Divorced	12	22.6
Widowed	9	17.0
Separated	8	15.1
Total	53	100.0
<b>Educational Levels</b>		
No formal education	11	20.8
Primary	15	28.2
Secondary	16	30.2
Tertiary	11	20.8
Total	53	100.0
<b>Occupation</b>		
Student	8	15.1
Employed-private sector	9	17.0
Employed-public sector	22	41.5
Self-employed	14	26.4
Total	53	100.0
<b>Religion</b>		
Christianity	14	26.4
Islam	20	37.7
African Traditional	18	34.0
Others	1	1.9
Total	53	100.0
<b>Monthly Income (#)</b>		
Less than 30,000	4	7.5
31,000-59,999	18	34.0
60,000-99,999	23	43.5
100,000-149,999	4	7.5
150,000 and above	4	7.5
Total	53	100.0
<b>Number of birth</b>		
None	2	3.8
1	6	11.3
2	17	32.1
3	16	30.2
Above 3	12	22.6



Total	53	100.0
<b>Living Arrangement</b>		
Alone	16	30.2
With spouse	19	35.8
With family	18	34.0
Total	53	100.0

The sociodemographic characteristics of this study observe that majority of the respondents are within the ages of 50 -60years (32.1%, married (37.8%), with secondary school level of education (30.2%) and are employed-public sector (41.5%). Findings revealed that majority respondents are Islamists (37.7%), with a monthly income of 60,000-99,999 (43.5%), has two births (32.1%) and living with spouse (35.8%).

**Research Question1:** What is the knowledge level of elderly women with diabetes attending State Hospital, Oyo?

**Table 2: Knowledge of Elderly Women with Diabetes at Oyo State Hospital, Oyo**

Question Items	Correct		Incorrect	
	Freq	%	Freq	%
Diabetes occurs mainly because of blood excess sugar	28	52.8	25	47.2
The main hormone involved in blood sugar regulation is insulin	31	58.5	22	41.5
The organ responsible for insulin production is the pancreas	22	41.5	31	58.4
The major cause of type 2 diabetes is body not making enough of insulin	30	56.6	23	43.4
Frequent urination in diabetes occurs due to high blood sugar	29	54.7	24	45.1
One major risk factor for type 2 diabetes is overweight	27	50.9	26	49.1
One of the earliest symptoms of diabetes is increase thirst	30	56.6	23	43.4
A common long-term complication of diabetes affecting vision is diabetic retinopathy	31	58.5	22	41.5
Uncontrolled diabetes can lead to serious health problems e.g. heart disease	32	60.4	21	39.6
Diabetic patients are advised to monitor their blood sugar	32	60.4	21	39.6
Exercise helps diabetic patients mainly by lowering blood sugar	18	34.0	35	66.0
The most serious acute complication of diabetes is diabetic ketoacidosis	26	49.1	27	50.9

Table 2 shows that 52.8% of respondents agree that diabetes occurs mainly because of excess sugar in the blood while 47.2% disagree. Only 58.5% of respondents agree that the main hormone involved in blood sugar regulation is insulin and 41.5% disagree. Minority, 41.5% of respondents agree that the organ responsible for insulin production is the pancreas while 58.4% disagree. 56.6% of respondents agree that the major cause of type 2 diabetes is body not making enough insulin and 43.3% disagree. Findings indicate that 54.7% of respondents agree that frequent urination in diabetes occurs due to high blood sugar while 45.1% disagree. 50.9% of respondents agree that one major risk factor for type 2 diabetes is overweight while 49.15% disagree. 56.6% of respondents agree that one of the earliest symptoms of diabetes is increase thirst while 43.4% disagree. 58.5% of respondents agree that a common long-term complication of diabetes affecting vision is diabetic retinopathy and



41.5% disagree. 60.4% of respondents agree that uncontrolled diabetes can lead to serious health problems e.g heart disease and 39.6% disagree. 60.4% of respondents agree that diabetic patients are advised to monitor their blood sugar while 39.6% disagree. 34% of respondents agree that exercise helps diabetic patients mainly by lowering blood sugar and 66% disagree. Lastly, 49.1% of respondents agree that the most serious acute complication of diabetes is diabetic ketoacidosis and 50.9% disagree. This study indicate that the level of knowledge of diabetes among elderly women in State Hospital Oyo is average.

**Research Question 2:** What is the attitude of elderly women with diabetes towards diabetes and its management?

**Table 3: Attitude of Elderly Women with Diabetes toward Diabetes and its management at Oyo State Hospital, Oyo**

Question Items	SA		A		D		S	
	Freq	%	Freq	%	Freq	%	Freq	%
Diabetes can be effectively controlled with proper medical and lifestyle care	21	39.6	23	43.4	6	11.3	3	5.7
People with diabetes can live a normal and productive life.	20	37.8	16	30.2	5	9.4	12	22.6
Adhering to treatment plans helps prevent complications of diabetes.	6	11.3	12	22.6	24	45.3	11	20.8
Diabetes can be managed through regular hospital visits and follow-up care.	26	49.1	10	18.9	7	13.1	10	18.9
I believe knowledge about diabetes improves self-care behaviour.	17	32.1	16	30.2	5	9.4	15	28.3
I feel confident that I can manage my diabetes effectively.	5	9.4	10	18.9	26	49.1	12	22.6
Sometimes feel hopeless about living with diabetes.	19	35.8	9	17.0	16	30.2	9	17.0
		30.7%		25.9%				

Table 3 shows that 39.6% of respondents strongly agreed that diabetes can be effectively controlled with proper medical and lifestyle care, 43.4% agreed, while 11.3% disagreed and 5.7% strongly disagreed. 37.8% of respondents strongly agreed that people with diabetes can live a normal and productive life, 30.2% agreed, while 9.4% disagreed and 22.6% strongly disagreed. 11.3% of respondents strongly agreed that adhering to treatment plans helps prevent complications of diabetes, 22.6% agreed, while 45.3% disagreed and 20.8% strongly disagreed. The result of this study revealed that 49.1% of respondents strongly agreed that diabetes can be managed through regular hospital visits and follow-up care, 18.9% agreed, while 13.1% disagreed and 18.9% strongly disagreed. 32.1% of respondents strongly agreed that knowledge about diabetes improves self-care behavior 30.2% agreed, while 9.4% disagreed and 28.3% strongly disagreed. 9.4% of respondents strongly agreed that confidently feel that diabetes can be managed effectively 18.9% agreed, while 49.1% disagreed and 22.6% strongly disagreed. Lastly, 35.8% of respondents strongly agreed that



sometimes they feel hopeless about living with diabetes, 17% agreed, while 30.2% disagreed and 17% strongly disagreed. This study indicates that the attitudes of elderly women with diabetes toward diabetes and its management at Oyo State Hospital, Oyo is positive **(56.6%)**.

**Table 4: Self-management Practices among Elderly Women with Diabetes at Oyo State Hospital, Oyo**

Question Items	SA		A		D		S	
	Freq	%	Freq	%	Freq	%	Freq	%
Following a healthy diet	6	11.3	3	5.7	21	39.6	23	43.4
Regular physical activities	5	9.4	12	22.6	20	37.8	16	30.2
Monitoring blood glucose level.	6	11.3	12	22.6	24	45.3	11	20.8
Taking medication as prescribed	7	13.1	10	18.9	26	49.1	10	18.9
Developing good problem-solving skills	5	9.4	15	28.3	17	32.1	16	30.2
Using healthy coping mechanism.	5	9.4	10	18.9	26	49.1	12	22.6
Reducing risky behaviours	9	17.0	9	17.0	16	30.2	19	35.8

**11.6%      19%**

Table 4 shows that 11.3% of respondents strongly agreed that self-management practices among elderly women with diabetes include following a healthy diet, 5.7% agreed, while 39.6% disagreed and 43.4% strongly disagreed. 9.4% of respondents strongly agreed that self-management practices among elderly women with diabetes include regular physical activities 22.6% agreed, while 37.8% disagreed and 30.2% strongly disagreed. 11.3% of respondents strongly agreed that self-management practices among elderly women with diabetes include monitoring blood glucose level, 22.6% agreed, while 45.3% disagreed and 20.8% strongly disagreed. Thus, study further indicate that 13.1% of respondents strongly agreed that self-management practices among elderly women with diabetes include Taking medication as prescribed, 18.9% agreed, while 49.1% disagreed and 18.9% strongly disagreed. 9.4% of respondents strongly agreed that self-management practices among elderly women with diabetes include developing good problem-solving skills, 28.3% agreed, while 32.1% disagreed and 30.2% strongly disagreed. 9.4% of respondents strongly agreed that self-management practices among elderly women with diabetes include using healthy coping mechanism, 18.9% agreed, while 49.1% disagreed and 22.6% strongly disagreed. Lastly, 17% of respondents strongly agreed that self-management practices among elderly women with diabetes include reducing risky behaviours 17% agreed, while 30.2% disagreed and 35.8% strongly disagreed. This study observed that the self-management practices among elderly women with diabetes is poor **(30.6%)**

### Hypotheses Testing

**Ho1:** There is no significant relationship between knowledge of diabetes and self-management practices among elderly women attending State Hospital, Oyo.

**Table 5a: Cross tabulation of Knowledge Level of Diabetes and Self-management Practices for diabetes among Elderly women**

		Self-management Practices			Total
		Low	Moderate	High	
Knowledge Level	Poor	8	11	1	20
	Good	2	13	0	15
	Excellent	3	12	3	18
Total		13	36	4	53

**Table 5b: Chi-Square Tests**

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	7.731 <sup>a</sup>	4	.102
Likelihood Ratio	8.242	4	.083
Linear-by-Linear Association	3.931	1	.047
N of Valid Cases	53		

The chi-square analysis yielded a Pearson Chi-Square value of 7.731 with  $df = 4$  and  $p = 0.102$ . Since  $p > 0.05$ , the null hypothesis is accepted, indicating no statistically significant relationship between knowledge of diabetes and self-management practices. Although, a higher level of knowledge might be expected to enhance self-care, this finding suggests that knowledge alone does not necessarily translate into effective practice. Other intervening factors, such as financial constraints, health system support, and personal motivation may influence behavior more strongly.

**Ho2:** There is no significant relationship between attitude towards diabetes and self-management practices among elderly women attending State Hospital, Oyo.

**Table 6a: Cross tabulation of Attitude and Self-management Practices for Diabetes among Elderly Women**

		Self-management Practices			Total
		Low	Moderate	High	
Attitude	Negative	8	8	0	16
	Positive	5	28	4	37
Total		13	36	4	53

**Table 6b: Chi-Square Tests**

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	8.876 <sup>a</sup>	2	.012
Likelihood Ratio	9.458	2	.009
Linear-by-Linear Association	8.398	1	.004
N of Valid Cases	53		

The chi-square result shows a Pearson Chi-Square value of 8.876,  $df = 2$ , and  $p = 0.012$ . Since  $p < 0.05$ , the null hypothesis is rejected, meaning that there is a significant relationship between attitude and self-management practices. This implies that women with positive



attitudes toward diabetes are more likely to engage in effective self-management behaviors such as regular clinic attendance, dietary compliance, and blood glucose monitoring.

**Hypothesis Three:** There is no significant relationship between socio-demographic factors and self-management practices among elderly women with diabetes attending State Hospital, Oyo

**Table 7a: Cross tabulation of Age and Self-Management Practices for Diabetes among Women**

		Self-management			Total
		Practices Low	Moderate	High	
Age	50-60 years	5	9	3	17
	61-70 years	3	11	0	14
	71-80years	2	11	1	14
	81years above	3	5	0	8
Total		13	36	4	53

**Table 7b: Chi-Square Tests**

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	6.393 <sup>a</sup>	6	.381
Likelihood Ratio	7.465	6	.280
Linear-by-Linear Association	.438	1	.508
N of Valid Cases	53		

The chi-square value of 6.393, with  $df = 6$  and  $p = 0.381$ , indicates  $p > 0.05$ ; hence, the null hypothesis is accepted. This implies that there is no significant relationship between age and diabetes self-management practices among the respondents. This finding suggests that regardless of age differences among elderly women, self-management practices are relatively similar.

### Discussion

This study assesses the level of diabetes knowledge, attitude, and self-management practices among elderly women with diabetes in State Hospital Oyo; The sociodemographic characteristics of this study observe that majority of the respondents are within the ages of 50-60years, married, with secondary school level of education and are employed-public sector. Findings revealed that majority respondents are Islamists, with a monthly income of 60,000-99,999, having two births and living with spouses.

### Knowledge of Diabetes among Elderly Women

This study indicates that the level of knowledge of diabetes among elderly women in State Hospital Oyo is average. The finding of this study is consistent with Maduemezia et al. (2024) who reported that general awareness of diabetes as a chronic illness was high, detailed understanding of dietary control, physical activity, and foot care was limited in South Africa. This study support Okafor et al. (2024) who observed that in southeastern Nigeria, although most diabetic patients recognized the symptoms of diabetes, fewer than half demonstrated adequate knowledge of self-monitoring and medication adherence. The writers discussed the



uneven distribution of knowledge, highlights potential gaps in diabetes education and awareness programs targeting older adults in Nigeria.

### ***Attitude of Elderly Women toward Diabetes and Its Management***

This study indicates that the attitudes of elderly women with diabetes toward diabetes and its management at Oyo State Hospital, Oyo is positive. This finding aligns with Okafor et al. (2024), who found that positive attitudes among Nigerian diabetic patients and this was reinforced by supportive healthcare relationships and peer influence. This study is similar to Maduemezia et al. (2024) who reported that most participants in South Africa expressed willingness to adhere to treatment. The writers observed that the predominance of positive attitudes in the current study may therefore reflect effective patient-provider communication and the influence of ongoing public health sensitization efforts in Oyo State. This study is in contrast to Mtshali and Sookan-Kassie (2024) who found that some patients' reluctance to engage in physical activity stemmed from misconceptions about exercise safety in diabetes, demonstrating that negative attitudes persist despite education. Globally, Alliston et al. (2024) and Yimer et al. (2025) emphasized that DSME interventions that include psychosocial support and motivational strategies, such as peer counseling and goal setting, lead to more sustainable attitude change.

### ***Self-Management Practices among Elderly Women with Diabetes***

This study observed that the self-management practices among elderly women with diabetes is poor. This finding is in agreement with the findings of Okafor et al. (2024), who reported that self-care adherence among Nigerian diabetic patients was suboptimal, with barriers including financial limitations and lack of access to glucose-monitoring devices. This study is consistent with Maduemezia et al. (2024) who noted that while medication adherence was relatively high among South African patients, adherence to diet, physical activity, and foot care was inconsistent due to comorbidities and social responsibilities.

There was no significant relationship between knowledge of diabetes and self-management practices. This aligns with Adisa et al. (2021), who reported that knowledge does not always predict adherence among diabetic patients in Nigeria. Likewise, there was no significant relationship between attitude and self-management practices ( $P > 0.05$ ). The findings of this study corroborate Kassa et al. (2020) and Chinenye et al. (2023), who emphasized the role of positive health attitudes in improving diabetes outcomes. The writers also quipped that women with positive attitudes toward diabetes are more likely to engage in effective self-management behaviors such as regular clinic attendance, dietary compliance, and blood glucose monitoring. There was no significant relationship between age and diabetes self-management practices among the respondents. This study mirrors Camargo-Plazas et al., (2023) & Yimer et al., (2025) who suggest that chronological age alone does not predict self-care capacity; rather, health literacy, social support, and self-efficacy are the more decisive factors. This finding suggests that regardless of age differences among elderly women, self-management practices are relatively similar. This study is consistent with Letta et al. (2022), who found that other variables, such as education, income, and social support play more influential roles in determining self-care behaviors than age alone.

### **Conclusion**

Elderly women at State Hospital, Oyo, possess a fair understanding of diabetes but require enhanced education and motivational support to translate knowledge into sustained self-care



behavior. Positive attitudes were significantly linked to better self-management, underscoring the importance of emotional and psychosocial engagement in diabetes education. Strengthening nurse-led, culturally adapted DSME programs tailored to elderly populations will bridge existing knowledge-practice gaps and improve quality of life and health outcomes.

### Recommendations

1. Implement nurse-led DSME programs tailored to the learning needs of elderly women.
2. Incorporate family and caregiver participation in diabetes education to reinforce support at home.
3. Provide continuous professional training for nurses in geriatric diabetes care and motivational counselling.
4. Strengthen community-based outreach and screening programs for diabetes prevention and control.
5. Advocate for policy reforms ensuring the affordability of diabetes monitoring tools and medications for elderly patients.

### References

- Adams, K., Okoye, C., & Ohenhen, P. (2021). Knowledge and self-management of diabetes among Nigerian adults. *International Journal of Health Promotion*, 8(3), 115–127.
- Adisa, R., Alutundu, O. A., & Fakeye, O. O. (2021). Pharmacist-led intervention in treatment non-adherence and associated direct costs of management among ambulatory patients with type 2 diabetes in southwestern Nigeria. *BMC Health Services Research*, 21, 1000. <https://doi.org/10.1186/s12913-021-06979-z>
- Alliston, C. M., Patel, K., & Williams, E. (2024). Structured diabetes self-management education and behavioral outcomes among older adults: A systematic review and meta-analysis. *Journal of Aging and Chronic Disease Management*, 19(2), 122–137. <https://doi.org/10.1016/j.jacdm.2024.01.007>
- Camargo-Plazas, P., et al. (2023). Diabetes self-management education for older adults: A scoping review. *BMC Geriatrics*, 23(1), 78–92. <https://doi.org/10.1186/s12877-023-03826-1>
- Chinenye, S., Oputa, R. N., & Oko-Jaja, R. I. (2023). Diabetes and related diseases in Nigeria: Need for improved primary care in rural communities. *Research Journal of Health Sciences*, 2(2), 99–107. <https://rjhs.org/index.php/home/article/view/62>
- International Diabetes Federation. (2021). *IDF diabetes atlas* (10th ed.). International Diabetes Federation.
- Kassa, R. N., Ibrahim, I. Y., Hailemariam, H. A., & Hordofa, M. A. (2021). Self-care practice and its predictors among adults with diabetes mellitus on follow up at public hospitals of Arsi zone, Southeast Ethiopia. *BMC Research Notes*, 14, 102. <https://doi.org/10.1186/s13104-021-05511-0>
- Letta, S., Aga, F., Assebe Yadeta, T., Geda, B., & Dessie, Y. (2022). Self-care practices and correlates among patients with type 2 diabetes in Eastern Ethiopia: A hospital-based cross-sectional study. *SAGE Open Medicine*, 10, 20503121221107337. <https://doi.org/10.1177/20503121221107337>
- Maduemezia, A. O., Mokoena, N., & Dlamini, L. (2024). Knowledge, attitudes, and practices toward diabetes mellitus among patients at Tshepong Hospital, South Africa. *African*



*Journal of Primary Health Care & Family Medicine*, 16(1), e1–e9.  
<https://doi.org/10.4102/phcfm.v16i1.4283>

- Mtshali, S., & Sookan-Kassie, S. (2024). Attitudes toward physical activity and exercise adherence among type 2 diabetes patients in KwaZulu-Natal. *South African Journal of Health Sciences*, 37(2), 211–223.
- Ong, K. L., Jani, R., & The GBD 2021 Diabetes Collaborators. (2023). Global, regional, and national burden of diabetes from 1990 to 2021, with projections of prevalence to 2050: A systematic analysis for the Global Burden of Disease Study 2021. *The Lancet*, 402(10397), 203–234. [https://doi.org/10.1016/S0140-6736\(23\)01301-6](https://doi.org/10.1016/S0140-6736(23)01301-6)
- Okafor, C. O., Nwankwo, N. I., & Eze, U. (2024). Self-care practices and associated factors among individuals with type 2 diabetes in southeastern Nigeria. *Nigerian Journal of Clinical Practice*, 27(3), 481–490. <https://doi.org/10.4103/njcp.njcp.457.23>
- Okoye, C., & Ohenhen, P. (2021). Attitudes and self-management behaviours among diabetic patients in southern Nigeria. *Nigerian Journal of Health Sciences*, 12(2), 88–98.
- Onwuchuluba, C., Aina, R., Ngolube, C., & Ogbonna, O. (2019). Socioeconomic and emotional challenges in diabetes self-care among elderly Nigerian women. *African Journal of Social Health*, 10(3), 122–134.
- Yimer, T. A., Abate, S. A., & Kebede, M. D. (2025). Diabetes self-management education and glycaemic outcomes in the WHO African Region: A meta-analysis. *International Journal of Environmental Research and Public Health*, 22(4), 2090. <https://doi.org/10.3390/ijerph22042090>

### Cite this article:

Author(s), BELLO Ruth Eleojo, OLARERIN Jokotade Jemilat, ABDULLAHI Salamat Bola, OZOR Onyinyechi Francisca, OLANREWAJU Greatmercy Ojonugwa, OGUNDARE Teniola Zainab, AKINLOYE Success Lios, (2025). "Diabetes Knowledge Attitude and Self Management Practices among Elderly Women with Diabetes in State Hospital Oyo, Oyo State, Nigeria", *Name of the Journal: Commonwealth Journal of Academic Research, (CJAR.EU)*, P, 137 -150. DOI: <http://doi.org/10.5281/zenodo.17943260>, Issue: 12, Vol.: 6, Article: 12, Month: December, Year: 2025. Retrieved from <https://www.cjar.eu/all-issues/>

Published by



AND

*ThoughtWares Consulting & Multi Services International (TWCMSI)*

