

Abstract

Type 2 Diabetes Mellitus (T2DM) has become a global epidemic of 21st century with disproportionately high socioeconomic burden in the developing world. The prevalence of T2DM continues to rise resulting in significant morbidity and mortality caused by complications such as cardiovascular, eye, renal diseases and foot problems. Diabetic Foot complication is among the worst and most common complications which have led to devastating health outcomes including substantial disability related to amputation, impairment of quality of social life and high treatment cost among patients. The incidence of amputation can be reduced by half if the best foot care practices are adopted. The increasing prevalence of T2DM from 6.3 percent, 2017 to 11 percent 2018 raises a concern for the researcher to establish foot care practices among the patient attending diabetic clinics in Embu County, with the specific objective being establishing knowledge level, foot care practice and barriers to diabetes foot self-care practices. A descriptive survey targeting population of 1413 T2DM and 12 key informants from whom a sample size of 301 was systematically drawn and 12 key informants was conveniently sampled from the selected Diabetes Mellitus (DM) clinic respectively. Then Self-administered questionnaires, observational checklist and focused group discussion were performed to collect data. This data was analysed using SPSS version 24. Chi square was used to test the relationship between categorical variables. Statistical significant was set at $\alpha = 0.05$. A logistic regression model was used to predict the relationship between foot care practices and diabetes foot ulcer. Qualitative data was analysed thematically using Nvivo version 11. Data was presented in summary tables. Majority of the respondents were female and aged between 40 and 70 years old. The duration that a patient had lived with diabetes, history of smoking and respondents age were significantly associated with foot ulcers at p value <0.05 . Knowledge of patients regarding foot complications; knowing what foot self-care entails, having knowledge on effects of smoking in diabetes and the source of information were significant predictors of diabetic foot ulcer prevention. Walking bare foot in and out of the house and dressing of blisters with sterile dressings was associated with prevention of foot ulcers. Based on the researchers findings; the age of the respondent, their smoking status and the duration they had lived with the diabetes disease significantly determined development of foot ulcers. Also, Knowledge on effects of smoking on diabetes was significantly associated with prevention of developing foot ulcers. However, it was evident that the diabetic patients in Embu County had knowledge deficit on details of self-foot care; however, there was good general knowledge on diabetes management among the patients who got the information from the health care providers. On practice of foot care practices, wearing shoes without socks, and walking bare foot was associated with risk of developing foot ulcers while dressing of blisters with a sterile dressing, drying feet after washing and drying in between the toes was associated with prevention of developing foot ulcers. The County government to develop policies on implementation

of support groups among diabetic patients in all hospitals, to empower the patients with knowledge on diabetes management and prevention of its complications and the health care providers to champion for empowering practice of diabetic foot care practices through support group linkages and counseling as the country tries to achieve sustainable development goals.