Health Psychology

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# Introduction

The current investigation outlines valuable insights pertaining to psychological treatments essential to managing patients with type 1 diabetes. In type 1 diabetes, the pancreas within the human body doesn’t make insulin due to an attack on the islet cells by the immune system. Diabetes type 1 is also recognized as juvenile diabetes or insulin-dependent diabetes, which is one of the chronic diseases (Coccaro et al. 2021, p. 22). Due to misfunctioning within the pancreas, no insulin is produced because the sugar level is not fulfilled for energy requirements. Causes may include complications due to heredity/genetics or viruses. With no cure for patients with type 1 diabetes, treatment measures are performed by managing sugar levels using insulin as a diet (Knox et al.,2019, p.13). Symptoms of type 1 diabetes include weight loss challenges, hunger level and thirst. Managing patients based on psychological treatments would be an essential phase to cure people suffering from diabetic type 1.

## Psychological factors

### Motivation

For stress release and to overcome depression, involving patients in activities that would raise their motivation level would have a significant influence on the well-being of patients. The life expectancy ratio for type 1 diabetic patients approximately range between 65-72 years (Holt et al.,2021, p.2601). Patients with diabetic type 1 within stage 3 who become clinically symptomatic need major care treatments. Medical treatments by using insulin for controlling sugar levels during psychological treatments are found to have a sustainable influence on minimizing distress levels (Goddard & Oxlad,2023, p.235). Psychologists refer to cognitive behavioural therapy as a sustainable solution with the aim of bringing a positive attitude to the daily life routine of the patient.

In psychosocial care, family members, associates, peers, etc., perform significant roles by engaging with patients to make them feel better (Verma et al.,2020, p.1215). Diabetic patients have been largely deprived of disappointment, anxiety, distress, etc., which may lead to dissatisfaction and impact their physical health. Occurrences of mental health problems are most common among patients with diabetes 1, 2 and gestational diabetes. Academic scholars have identified that diabetic distress is a major cause of the occurrence of depressive symptoms that influence adversely on patients' medical and psychological functioning (Singhai et al.,2020, p.1606).

### Psychotherapeutic interventions

To treat people with depressive symptoms psychotherapeutic intervention has been determined to have a positive influence on treating depressive symptoms and improving the quality of life for major chronic illnesses, including diabetes type 1 (Schmitt et al.,2021, p. 99). Psychologists prefer various therapies for patients, including anger management, to control higher stress levels for patients suffering from diabetic illness. By conducting mind control sessions, psychological therapists practice certain psychological treatments. Suggesting patients engage in physical activities, i.e. exercise, etc., would have a positive influence on patients' well-being.

Additionally, by arranging group sessions for each patient who has been deprived of psychological illness during their Type 1 diabetes, positive communication during meetings is performed with the aim of relaxing minds and decreasing levels of stress. With continuous sessions with these patients, positive alteration occurs within patients due to changes in daily routine and repeated lifestyle (Garg et al.,2020, p.435). Controlling emotions, releasing psychological distress, etc., are essential components of behavioural management included within psychotherapeutic treatments of diabetic 1 patients. The purpose of psychological sessions is to provide mental stability by reducing the ratio of anxiety and depression.

### Cognitive behavioural therapy

Cognitive behavioural therapy has been consumed as an essential treatment function to make people aware that they can control their thoughts, minds and behaviours. Irrespective of no complete medical treatments for diabetic 1 patients, managing psychological distress has been possible based on therapy sessions conducted by psychologists. With mind-relaxing exercises, sustainable therapy treatments are offered to patients with diabetic illness (Hilliard et al.,2019, p.496). Emotional disturbance among sugar patients is the most common, which is termed diabetic distress. Patients with symptoms of occurrence, i.e. guilty feeling, higher stress, etc., are offered psychological sessions. Major causes of diabetic distress include poor self-management, poor self-care, etc. Psychological, social and biological changes would impact mental distress (Fisher et al.,2020, p.107735). A decrease in self-confidence, self-determination, etc., leads to diabetic distress.

Psychological distress would negatively influence depressive symptoms within humans that raise the severity of medical illness, i.e. Diabetic type 1, etc. (Tornese et al.,2020, p.463). Additionally, health anxiety is another major symptom within diabetic type 1 patients. Diabetic distress raises health anxiety as patients experience fear of illness that influences lower adherence to sustainable treatments. A decrease in positive health behaviour and higher medical expenses would lead to further distress. With cognitive behavioural therapy, patients are suggested to behaviour control by engaging in mind-control activities (Karyotaki et al.,2021, p.365). Psychologists provide suggestions on how to get awareness about negative thoughts that would increase stress levels and anxiety within patients. By controlling psychological emotions, timely treatments would positively cure diabetic patients.

Communicating with patients to identify factors that lead to higher stress would predominantly assist psychologists in suggesting appropriate healthcare treatments. With timely counselling, the mental perceptions of patients with higher anger levels would be controlled. A study by Pate et al. (2019, p.211) concludes that psychologists suggest meditation to be an essential mind-relaxing activity that lowers the ratio of stress among diabetic type 1 patients.

### Self-assessment

Self-assessment is determined to have a sustainable influence in controlling a person's psychological behaviour. Engaging in activities that would divert the mind encourages diabetic type 1 patients to reduce their stress levels (Kamrath et al.,2022, p.1765). Timely referring psychologists would assist patients in evaluating their level of distress. Family psychological stress is most common as heredity/ biological influence would raise diabetic distress, creating significant mental health challenges for patients. Self-reliance has been adequate as patients who have primary knowledge about their psychological illness would be able to control their mental behaviour and ratio of distress. Involvement in physical and social activities provides mental comfort (Agarwal et al.,2021, p.309). The majority of diabetic patients are suggested to spend their time in physical activities to lower the ratio of distress.

Research studies have shown that the younger generation involved in stressful life events, i.e. hospitalization of their family members, witnessing harsh arguments between their parents, injury of their family member, etc., have been reported with a lower ratio of self-efficacy, poorer quality of life standards and occurrence of higher glycated haemoglobin (Boucher et al., 2020, p.2392).

### Psychological management

With positive affect intervention, better psychological care is provided with advanced measures to treat diabetic type 1 patients. By including parents within adolescents, psychological cures, i.e. healthy communication, higher engagement, etc., are suggested to family members to lower the level of distress among diabetic type 1 patients (Johansen et al.,2020, p.999). Self-monitoring and personalized guidelines are recommended by psychologists to control patients' behaviour. Reducing family conflicts that would have an adverse influence on the psychological well-being of diabetic type 1 patients was suggested to overcome higher stress levels (Troncone et al.,2019, p.803). Adolescents have been determined to be more vulnerable to psychiatric disorders that require changes in behavioural practices. The occurrence of mood swings within diabetic type 1 patients is most common, requiring motivational activities to be performed.

### Physical exercise

The majority of psychologists suggest regular physical exercises as a major component for the long-term management of type 1 diabetes (Marker et al.,2020, p.30). With regular physical activities, the ratio of blood glucose levels remains normal as it promotes well-being among severe patients. Higher distress level has been found among people who are less involved in physical activities. Physical activities are an essential phase in diabetes management. Change within daily routine by creating interpersonal relations and socializing with associates has an efficient influence on stress management. Personalized medical care and adopting a holistic approach are key functions that would raise the success ratio for diabetic patients suffering from psychological illness (Butler et al.,2022, p.106722).

# Conclusion

From the above findings, it can be concluded that there are several ways suggested by psychologists while treating patients with type 1 diabetic illness. With a higher ratio of prevalence of diabetes among adolescents, adults, elders, etc., a higher level of stress has been determined among patients with higher levels of sugar. Psychological treatments for patients are a significant factor that requires a timely cure to overcome diabetic distress among patients. With psychotherapeutic intervention, stress control activities are suggested by performing continuous sessions with patients to overcome the ratio of anxiety and depression. Additionally, with cognitive behavioural therapy, patients are recommended during treatment sessions that they can self-control their minds and behavioural challenges to lower stress levels. By communicating with patients, changes in behavioural plans are suggested as people who are minimally involved in physical activities are recommended to perform, i.e. meditation, physical exercise, etc., to lower their stress rate. With the increasing ratio of stressful life events, the younger generation has been majorly determined to be influenced by diabetic distress. Self-control and self-assessment, determined to be a major distress management strategy, have been suggested by clinical staff and psychologists to lower anxiety and depression.

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