

Patient Understanding of Diabetes Self-Management: Participatory Decision-Making in Diabetes Care

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Abstract

Objective:

Our aim was to determine whether patient participation in decision-making about diabetes care is associated with understanding of diabetes self-management and subsequent self-care practices. We also identified issues that would impact messaging for use in mobile diabetes communication.

Research Design and Methods:

A cross-sectional observational study was conducted with type 2 diabetes patients ($n = 81$) receiving their care at the University of Maryland Joslin Diabetes Center. A convenience sample of patients were eligible to participate if they were aged 25–85 years, had type 2 diabetes, spoke English, and visited their physician diabetes manager within the past 6 months. In-person patient interviews were conducted at the time of clinic visits to assess patient understanding of diabetes management, self-care practices, and perceptions of participation in decision-making about diabetes care.

Results:

African Americans reported fewer opportunities to participate in decision-making than Caucasians, after controlling for education [mean difference (MD) = -2.4, $p = .02$]. This association became insignificant after controlling for patient–physician race concordance (MD = -1.5, $p = .21$). Patient understanding of self-care was predicted by having greater than high school education (MD = 3.6, $p = .001$) and having physicians who involved them in decision-making about their care. For each unit increase in understanding of diabetes self-care, the mean patient self-care practice score increased by 0.16 ($p = .003$), after adjustment for patient race and education.

Conclusions:

Patient participation in decision-making is associated with better understanding of care. Participation in decision-making plays a key role in patient understanding of diabetes self-management and subsequent self-care practices. Patients with limited education need specific instruction in foot care, food choices, and monitoring hemoglobin A1c.

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Abbreviations: (CI) confidence interval, (HbA1c) hemoglobin A1c, (MD) mean difference, (OR) odds ratio, (PDM) participatory decision-making

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