Background

The management of type 2 diabetes (T2DM) involves regular medical reviews and the daily performance of a wide range of self-care activities.

Living with T2DM impacts negatively on emotional well-being, family, and friends of those with T2DM are often asked to provide emotional support, medical reviews, and assist with daily diabetes self-care. The most common frameworks for understanding the ways a social network can influence self-care and copings are:

- health-related social support: the provision of encouragement and positive feedback to those perceived to be coping effectively with their illness
- health-related social control: attempts to correct or improve the health-related social control behaviours of individuals perceived to be self-managing their condition sub-optimally

Previous research has focused largely on the social interactions of the close social network (e.g. spouses or adult children). Loss is known about the influence of those in the wide social network (e.g. friends and work colleagues).

Method

The aim of this study was to explore the experience of living with T2DM, with no specific reference to diabetes related-media (e.g. diabetes magazines) and social media representing people affected by diabetes in the state of Victoria, Australia

Participants

Forty participants (27 women and 13 men) were recruited through public social media and email advertising. Inclusion criteria for participation were: diagnosis of type 1 or type 2 diabetes mellitus, no previous participation in any diabetes research and diabetes duration: 7±7 years (range: 0-29 years) and age: 59±14 years (range: 22-79 years).

Design and participants

- Semi-structured interviews with 25 adult Australians with T2DM
- 10 (49%) women
- age: 59±14 years (range: 22-79 years)
- diabetes duration: 7±7 years (range: 0-29 years)

Participants were recruited through:

- the membership list of Diabetes Victoria (the peak consumer body representing people affected by diabetes in the state of Victoria, Australia)
- diabetes-related media (e.g. diabetes magazines) and social media (e.g. Facebook)

The study was conducted as a general exploration of the social experience of living with T2DM, with no specific reference to the impact of diabetes on relationships or family to avoid biasing participant self-selection

Data collection and analysis

Participants were asked a series of open-ended questions about interactions about diabetes self-care among their social network, i.e. their family (e.g. spouse, children, parents, siblings), friends and work colleagues.

All interviews were audio-recorded and transcribed verbatim, with transcripts imported into NVivo v.10 to facilitate data coding, retrieval and analysis

Thematic analysis using a deductive (theory driven) approach was used to facilitate the identification of themes for predetermined, specific research questions

Two themes – ‘Social Control’ and ‘Social Support’ – were predetermined and the remainder were generated from the data.

Two researchers (TNJ & Av) read and re-read the data, conducted independent coding, and came to 100% agreement through discussion on the final coding framework

Results

Seven themes were identified relating to the immediate social impacts and experiences of people with T2DM (see Table 1).

The interpretation of health-related social control was variable:

- 11 participants (44%) made 14 references to their experience of positive and negative health-related social control behaviours by their social network
- 1 reference was about the wider social network (i.e. friends)
- 9 participants (36%) made 21 references to negative and critical social control behaviours by their social network
- 7 were about the wider social network (i.e. 5 referenced friends and 2 referenced colleagues)

Health-related social support was categorised into:

- instrumental social support: 13 participants (52%) reported 22 occurrences
- 6 were about the wider social network (i.e. friends)
- emotional support: 7 participants (28%) reported 16 occurrences
- 5 were about the wider social network (i.e. 1 referenced colleagues and friends; 3 referenced friends and 1 referenced colleagues)

Of the new themes emerging from the data, ‘non-involvement’ was the strongest overall:

- 11 participants (44%) made 24 references to their experience of positive non-involvement by their social network
- 5 were made about the wider social network (i.e. 4 referenced to friends and 1 referenced to colleagues)
- 5 participants (20%) made 7 references to their experience of negative non-involvement by their social network
- 2 were about the wider social network (i.e. friends)

The final theme to emerge was ‘unintentional undermining’:

- 4 participants (16%) made 5 references to their perception that the social network of individuals perceived to be self-managing their T2DM efforts to self-manage their T2DM

References