



Social Support and Lifestyle vs. Medical Diabetes Self-Management in the Diabetes Study of Northern California (DISTANCE)

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RESEARCH BRIEF

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Higher emotional support and social network scores were significantly associated with healthier lifestyle choices.

Background/Objectives: For those with diabetes, self-management and monitoring are particularly important elements of a care regimen that help an individual minimize symptoms and avoid complications. Strong social support is believed to be one of many factors that can play a role in encouraging better self-management and can potentially lead to better outcomes for patients. Much of the research supporting this belief has been limited by small sample sizes and focused on lifestyle behaviors such as healthful eating and exercising. Medical behaviors such as self-monitoring of blood glucose (SMBG), checking feet, taking medications, and monitoring blood pressure have gone largely unaddressed. The objective of this research was to investigate the impact of social support on multiple elements of diabetes self-management and to determine if different strategies should be used to encourage different types of self-management behaviors.

Methods: Researchers used rich data from over 13,000 people with diabetes participating in the Diabetes Study of Northern California (DISTANCE). The DISTANCE study was conducted among patients receiving treatment for diabetes in Kaiser Permanente, an integrated health care delivery system. This data uniquely allowed researchers to tie patients' self-reports of social support and self-management behaviors with objective measures of health behaviors like medication adherence and SMBG. Social support was assessed as a combination of the perceived emotional support available to the respondent and their Social Network Index (SNI). The SNI is a measure of a patient's various social ties, such as having a spouse, having close friends and/or relatives, and having a religious community. Self-management included assessment of both lifestyle behaviors and medical tasks. Respondents' adherence to these self-management tasks was analyzed in relation to their self-reported social support.

Findings/Impacts: A total of 13,366 patients were included in the analysis, 51% were male, the average age was 59 years, and 75% were of a racial/ethnic minority group. 87% of respondents reported a high level of emotional support, and 52% had an SNI score of 3 or 4 out of 4. Participants with high emotional support were 14% more likely to eat healthy foods, 9% more likely to get recommended levels of physical activity and 21% more likely to check their feet regularly. Participants with the highest SNI scores were also significantly more likely to eat healthfully, (10%) get adequate physical activity, (20%) and check their feet (10%). Other than checking feet, neither measure of support was associated with medical self-management behaviors like taking medications properly or checking blood glucose at home.

These results suggest that social support could be less effective in encouraging patients to perform medical self-management behaviors than healthy lifestyle behaviors such as eating or exercise. Some suggested solutions for increasing support for medical self-management behaviors might include increasing supporters' knowledge and skills in these areas, teaching them how to navigate patient's pharmacy and health care services, and teaching them how and when to encourage the patient to contact their health care provider when additional assistance is needed.

Links to the **full text** and additional information can be found here: <http://www.ncbi.nlm.nih.gov/pubmed/24794624>