

Title: Family Support and Specific Diabetes Self-Management Behaviors

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Abstract

Background. Social support is associated with better diabetes self-management behavior (SMB), yet interventions to increase family and friend support (FF support) have had inconsistent effects on SMB.

Objective. Test whether FF support differentially affects specific SMBs. Compare the influence of support from health professionals and psychological factors on specific SMBs to that of FF support.

Design. Cross-sectional survey of people with diabetes recruited for a self-management intervention
Participants and Setting. 164 African-American and Latino adults with diabetes living in inner-city Detroit

Measurements and Main Results. For every unit increase in FF support for glucose monitoring the Adjusted Odds Ratio (AOR) of completing testing as recommended was 1.77 (95% CI 1.21-2.58). FF support was not associated with four other SMBs (taking medicines, following a meal plan, physical activity, checking feet). Support from non-physician health professionals was associated with checking feet (AOR 1.72 [1.07-2.78]) and meal plan adherence (AOR=1.61 [1.11-2.34]). Diabetes self-efficacy was associated with testing sugar, meal plan adherence and checking feet. **Additional analyses suggested that self-efficacy was confounding or mediating the effect of FF support on diet and checking feet but not the FF support effect on glucose monitoring.**

Conclusions. The association between FF support and SMB performance was stronger for glucose monitoring than for other SMBs. Professional support and diabetes self-efficacy were each independently associated with performance of different SMBs. SMB interventions may need to differentially emphasize FF support, self-efficacy, or professional support depending on the SMB targeted for improvement.

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