

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**“Diabetes? I can live with it”**

**A Qualitative Evaluation of a  
Diabetes Self-Management Programme**

**A thesis presented in partial fulfilment of the requirements for the degree of  
Master of Arts in Psychology  
at Massey University, Palmerston North,  
New Zealand.**

**Daniela Andrae**

**2009**

## Abstract

Self-management programmes provide one form of education for people with diabetes. Evaluations of these programmes allow for a better understanding in regard to their impact and whether outcomes are met. Very little research has used qualitative methods to capture participants' experiences of these programmes and their perception of psychological outcomes. This is the first qualitative evaluation of the Type 2 Diabetes Self-Management Programme in Whangarei. It has adopted an interpretative-phenomenological approach to explore participants' experiences of the programme and participants' perceptions in regard to their self-efficacy and quality of life after attending a course. A sample of 7 participants with diabetes provided data via interviews 4 weeks and 3 months after attending the course. The themes that emerged from the initial interview were separated into three evaluation components. In "6 weeks sounded very long but it was worth the time", participants discussed enrolment, benefits of the course and suggestions for future participants. In "I know what I need to do and I'm confident to do it", participants linked the gained knowledge from the course to improvements in their self-efficacy regarding self-management behaviours, education and control of own life. In "Life is good, diabetes is just another thing to handle", participants reflected on the impact of living with diabetes and changes to their life. An overarching theme of settling into a comfortable routine emerged from the follow-up interview. Participants reflected positively on their course and research participation. The programme was perceived to be beneficial to participants, impacting positively on increasing knowledge, self-efficacy development, behaviour changes and quality of life. The participants maintained these benefits in the short-term. These results are discussed in terms of the need for further research to evaluate if benefits are maintained in the long-term, referral process to the programme, decision-making process in regard to enrolment and impact of a support person attending the programme. Practice implications for the programme are discussed in regard to incorporating a follow-up phone call to participants after they attended a course and offering follow-up sessions with the latest information on diabetes care.

## Acknowledgements

I would like to thank Christine Stephens, my supervisor for her support, guidance and encouragement.

Thank you to Manaia Health PHO Ltd. and its clinical committee for approving this research and providing a space for the interviews to take place.

The New Zealand Health and Disability Committees, Northern X Regional Ethics Committee which has approved this research.

Special thanks to the leaders of the diabetes self-management programme in Whangarei for supporting this evaluation. My appreciation for the several meetings to discuss this project, my participation in the courses and the time spend to distribute the invitations.

My gratitude goes to the participants of this study for generously giving their time and sharing their experiences. Your contributions to this study have made it possible.

Thank you to Jennifer Townsend for proofreading the final version.

Finally, thanks to my husband Matthew for his support, perspective and suggestions. To Lucas (\*2008) for just being there.

This thesis is dedicated to my father Hans Andrä (†2008) for his encouragement and for providing an initial insight into Type 2 diabetes self-management and its impact on his life.

## Table of Contents

<b>Abstract</b>	<b>ii</b>
<b>Acknowledgements</b>	<b>iii</b>
<b>Table of Contents</b>	<b>iv</b>
<b>List of Figures</b>	<b>viii</b>
<b>Chapter 1: Diabetes From prevalence to self-management/education</b>	<b>1</b>
1.1. Background of study	1
1.2. Definition of diabetes	1
1.3. Self-Management	5
1.4. Stages of diabetes education	7
1.5. Group versus individual education	9
Summary	15
<b>Chapter 2: Psychology and diabetes</b>	
<b>Self-efficacy and quality of life as components of diabetes self-management</b>	<b>16</b>
2.1. Definition of self-efficacy	16
2.2. Self-efficacy and diabetes	17
2.3. Quality of life in health care	20
2.4. Quality of life and diabetes care	22
Summary	23
<b>Chapter 3: Evaluation Outcome and process evaluations of overseas self-management programmes and the current study</b>	<b>24</b>
3.1. Outcomes versus processes in evaluations	24
3.2. Evaluating self-management programmes	25
3.3. Evaluating self-efficacy as an outcome of self-management programmes	26
3.4. Evaluation of self-management behaviours as an outcome	28
3.5. Evaluating quality of life as an outcome of self-management programmes	29
3.6. Process evaluation	30
3.7. Methods used for the evaluations of self-management programmes	31

3.8.	Evaluation of the Diabetes Self-Management Programme in Whangarei	33
3.9.	Current study	33
	Summary	34
<b>Chapter 4: Qualitative evaluations in health research and interpretative phenomenological analysis</b>		<b>35</b>
4.1.	Qualitative methods in evaluations of health programmes	35
4.2.	Qualitative evaluation and the current study	36
4.3.	Methodology: Interpretative phenomenological analysis	37
4.4.	The current study and aims of interpretative phenomenological analysis	38
	Summary	41
<b>Chapter 5: Method The current study and utilised strategies</b>		<b>42</b>
5.1.	The current study	42
5.2.	Ethical considerations	42
5.3.	Accessing potential participants	42
5.4.	Participants of the study	43
5.5.	Analytic strategies	45
5.6.	Data analysis	48
	Summary	52
<b>Chapter 6: Participants' experiences of the course or "Six weeks sounded very long, but it was worth the time"</b>		<b>53</b>
6.1.	Introduction	53
6.2.	Finding out and deciding to enrol/attend	53
6.3.	Content of the course	55
6.4.	Group teaching and support	57
6.5.	Future participants	59
	Summary	61
<b>Chapter 7: Perceptions of participants in regard to their self-efficacy or "I know what I need to do and I'm confident to do it"</b>		<b>63</b>
7.1.	Introduction	63
7.2.	Knowledge	64

7.3.	Confidence of being in control of own life	66
7.4.	Confidence to initiate diabetes-related behaviours	66
7.5.	Confidence to educate others	66
7.6.	Confidence to maintain behaviours in the future	67
7.7.	Confidence to use help/support in the community	68
7.8.	Confirmation of having diabetes by attending the course	69
7.9.	Individual participants	69
	Summary	70

**Chapter 8: Participants’ perceptions in regard to their quality of life or  
“Life is good, diabetes is just another thing to handle” 71**

8.1.	Introduction	71
8.2.	Behaviour changes	71
8.3.	Comparison with other people with diabetes	73
8.4.	Comparison with people with other illnesses	74
8.5.	The importance of support	74
8.6.	Dealing with the ‘food police’	76
8.7.	‘It is okay to have treats’	76
8.8.	Being in control of own life	77
8.9.	Negative aspects of having diabetes	77
8.10.	Looking back at diagnosis	79
	Summary	79

**Chapter 9: Follow-up telephone interview or  
“Changes? Not really, but settled into a comfortable routine” 81**

9.1.	Introduction	81
9.2.	Maintenance of diabetes-related behaviours	81
9.3.	Settling into a routine	81
9.4.	Reflection on participation in the course and research project	82
9.5.	Individual participants	83
	Summary	84

**Chapter 10: Discussion Looking back and implications for the future 85**

10.1.	Summary of results	85
-------	--------------------	----

10.2. Results and relevant literature	88
10.3. Limitations of the study	91
10.4. Implications for the future	93
10.5. Conclusion	96
<b>References</b>	<b>97</b>
<b>Appendices</b>	<b>108</b>
Appendix A Information sheet	108
Appendix B Consent form	111
Appendix C Demographic information	112
Appendix D Researchers reference guide of questions for participants	113
Appendix E Researchers reference guide for the follow-up interview	114



## List of Figures

<i>Figure 1.</i>	The Diabetes Care Pathway (NDHB, 2006).	7
<i>Figure 2.</i>	Guidelines for content for education programmes (IDF, 2003; AADE, 2005).	8
<i>Figure 3.</i>	Goals of patient education programmes (NDHB, 2006).	9
<i>Figure 4.</i>	Topics of the diabetes self-management programme (Manaia Health PHO Ltd, 2007e).	12
<i>Figure 5.</i>	Objectives of the diabetes self-management programme (Manaia Health PHO Ltd, 2006a).	13
<i>Figure 6.</i>	Performance indicators of the diabetes self-management programme (Manaia Health PHO Ltd, 2006a).	14