

## **An Exploratory Study of Integrated Self-Management Education in Type 2 Diabetes**

### **Project Abstract**

**Background:** In type 2 diabetes mellitus, as in other chronic diseases, self-management contributes most to reducing the long-term consequences of the condition. It is increasingly recognised that patient-centred self-management education improves patient care and prevents complications. Although proposed in many national and international recommendations on the treatment of type 2 diabetes, the uptake of such programmes with about 25% of people with type 2 diabetes is low, indicating that self-management education is often not integrated in routine care. Additionally, the concept of integration is unclear and used in many different ways. It is dependent on numerous components that relate to patients, healthcare professionals and the system, within which self-management education is delivered. Therefore, a better understanding of the concept of integration in relation to self-management education is needed to enable better uptake and enhance the impact of such programmes.

**Study aim:** The overall aim of the study is to explore integration in relation to self-management education of patients with type 2 diabetes in current practice. The study objectives are to understand and conceptualise key components of integration in self-management education, and how and why the different components manifest and influence interactions.

**Methods:** A critical interpretive synthesis is used initially, to explore the core concept "integration" in relation to self-management education, according to the theory of complex adaptive systems. The theoretical conceptualisation will be further explored in a natural setting. The in-depth exploration will follow a case study research design with a narrative social constructivist approach. Data collection will be within three different educational programmes of self-management in the canton of Vaud in Switzerland. It will consist of interview data of patients and healthcare professionals, observations of educational sessions and documentary analysis. Sampling will be purposive for diversity of experience and perspectives and will aim at data saturation within each programme. Qualitative analysis of the programmes, which are the units of analysis, will be concurrent with data collection. NVivo software will be used to manage this data and for coding. The programmes will be analysed to understand the influences of different components of integration on patients, healthcare professionals and the system within the interactions manifest.

**Benefit:** The study will provide in-depth understanding of integration regarding to self-management education that is required to inform further programme development. It will identify areas of further research needs on implementation of complex interventions.