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## **Diabetes self-management education: Bridging the policy-practice gap**

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### **Abstract:**

A key United Kingdom policy initiative in the management of diabetes is empowerment through structured education. Nonetheless, motivating attendance in Diabetes Education Centres remain problematic. The central aim of this study was to identify barriers and enabling factors associated with uptake of structured patient education for type 2 diabetes in a Primary Care Trust in South East of England. This three tier mixed methods study used a focus group interview to collect data from (n=10) diabetes educators (Dieticians, podiatrists and diabetes specialist nurses), questionnaire survey of 207 patients (102 attenders and 105 non-attenders), and finally individual face-to-face interviews (n=9) of referring practitioners (practice nurses) in different General Practitioners surgeries. The findings of the qualitative data yielded five key themes: healthcare beliefs, personal circumstances of the patient, ineffective communication, organisation of care and bureaucratic processes. The Chi-square tests run on the quantitative data relating to the health beliefs held by both groups suggested differences between attenders and non-attenders attitudes towards the uptake of Diabetes Education Programmes. Independent T-test,  $t(165.69) = 12.43, p < .001$  results indicated that attenders in this study reported a more positive belief about self-care, importance of the diabetes education session and belief about the seriousness of diabetes as a medical condition in comparison to non-attenders. Logistic regression analysis of key demographic variables on attendance suggested that living arrangements ( $p < .001$ ), employment ( $p < .001$ ) and family history of diabetes ( $p = .05$ ) can be used to predict non-attendance and the odd ratios also supported these findings. Whilst, it may be difficult to completely avoid non-attendance, positive steps to promote attendance include enhanced communication, organisational efficiency and offering adequate support to develop a positive attitude towards diabetes education.