



EMPOWERMENT AND SELF MANAGEMENT OF DIABETES

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ABSTRACT

Patient empowerment has emerged as a new paradigm that can help improve medical outcomes while lowering costs of treatment. The concept seems particularly promising in the management of chronic diseases. Diabetes may provide a blueprint for implementing patient empowerment because empowering patients has been instrumental in achieving the successes we have witnessed in the management of

diabetes in recent decades. This article explores the concept of empowerment in the context of diabetes care.

INTRODUCTION

Diabetic patient needs high awareness of disease prevention to adopt self-management behaviours in their daily life, central to this activity is patients empowerment. Empowerment is a patient-centred, collaborative approach tailored to match the fundamental realities of diabetes care. Patient empowerment is defined as helping patients discover and develop the inherent capacity to be responsible for one's own life.^[1] Since initially proposed in diabetes, there has been a growing recognition that, although health professionals are experts on diabetes care, patients are the experts on their own lives. This approach recognizes that knowing about an illness is not the same as knowing about a person's life and that, by default, patients are the primary decision-makers in control of the daily self-management of their diabetes. Embracing this philosophy requires that health care professionals practice in ways that are consistent with this approach. Empowerment is not a technique or strategy, but rather a vision that guides each encounter with our patients and requires that both professionals and patients adopt new roles. The role of patients is to be well-informed active partners or

collaborators in their own care. The role of health professionals is to help patients make informed decisions to achieve their goals and overcome barriers through education, appropriate care recommendations, expert advice, and support.^[2] Professionals need to give up feeling responsible for their patients and become responsible to them. Diabetes care then becomes collaboration between equals; professionals bring knowledge and expertise about diabetes and its treatment, and patients bring expertise on their lives and what will work for them. To effectively implement this approach, patients need education designed to promote informed decision-making, and providers need to practice in ways that support patient efforts to become effective self-managers. Healthcare professionals and academics have introduced self-empowerment as an important factor in managing chronic diseases. When it comes to diabetes management, empowerment involves an innovation approach that attempts to improve the ability of patients to actively understand and influence their own daily living activities and health status.^[3] This approach helps diabetic patients make rigorous decisions about their own care plan, to better overcome their disease.

PRINCIPLES OF EMPOWERMENT

The empowerment approach is based on three key principles related to diabetes, its management and the psychology of behavior change the principles are:

- The reality of diabetes is that more than 98% of that care is provided by the patient; therefore, the patient is the focus of control and decision-making in the daily treatment of diabetes.
- **2.** The primary mission of the health care team is to provide ongoing diabetes expertise, education and psychological support so that patients can make informed decisions about their daily diabetes self-management.
- **3.** Adults are much more likely to make and maintain behavior changes if those changes are personally meaningful and freely chosen.^[4]

Understand the Difference between Acute Disease Care and Chronic Disease Care

In the treatment of acute diseases, the healthcare professional is the primary decision-maker and is generally in control of treatment. The treatment of diabetes requires a different approach because it is a self-management disease. The healthcare professional has four major responsibilities to the patient in the treatment of diabetes:

- Provide the diabetes expertise required for the development of an effective diabetes self-management plan.

- Educate patients so that they can make informed decisions.
- Create a collaborative relationship with patients and their families so that self-management plans can review and revise as necessary.
- Provide the support necessary for patients to make and sustain self-selected behavior changes.

The behaviour changes required for diabetes self-management need to be selected by the patient rather than imposed by the healthcare professional. This approach to diabetes care represents a significant change in the traditional relationship between patient and professional and requires new roles from both parties, patient needs to understand that the daily care of their diabetes is their personal responsibility.^[5]

The Healthcare Professional's Challenges in Using Empowerment

There are two major challenges healthcare professionals often face in successfully implementing the empowerment approach to diabetes care. The first challenge is the discomfort some healthcare professionals experience when discussing the emotional content of diabetes or a diabetes problem that a patient has identified. The second major challenge is the tendency of many healthcare professionals to solve problems for patients rather than with them. The process of helping patients discover their capacity to solve their own problems reinforces their self-efficacy and personal responsibility for the treatment of their diabetes.^[6]

Patient Challenges to Using Empowerment

There are also challenges that patients may need to face to successfully implement this approach to diabetes care. Many patients are so used to being blamed and criticized for their efforts at diabetes self-management that they are reluctant to visit healthcare professionals, discuss openly their daily efforts related to diabetes care, express any disagreement with a healthcare professional and assert their own needs or values related to the treatment of their diabetes. All of the above actions are necessary to successfully manage diabetes. For healthcare professionals to use the empowerment approach successfully, their patients need to understand that they are equal partners in the care process.^[7]

Know How to Help Patients with Empowerment

The following protocol is designed to help patients:

- Realize that they are responsible for and in charge of the daily treatment of their diabetes
- Prioritize their diabetes-related problems and identify situations they want to improve.

- Experience the emotional and psychological commitment necessary to make and sustain a behaviour change.
- Develop a behaviour change plan.
- Evaluate their behaviour change plan.^[8]

Self-Management Education and Support for Patient Empowerment

Diabetes self-management education is the essential foundation for the empowerment approach and is necessary for patients to effectively manage diabetes and make these decisions. The purpose of patient education within the empowerment philosophy is to help patients make decisions about their care and obtain clarity about their goals, values, and motivations. Patients need to learn about diabetes and how to safely care for it on a daily basis. They also need information about various treatment options, the benefits and costs of each of these strategies, how to make changes in their behaviours, and how to solve problems.^[9] In addition, patients need to understand their role as a decision-maker and how to assume responsibility for their care. Approaches to education within the empowerment philosophy incorporate interactive teaching strategies designed to involve patients in problem solving and address their cultural and psychosocial needs. Using patient experiences as the curriculum helps to individualize group educational programs and ensure that the content provided is relevant for the needs of the group.

Behavioural experiments offer opportunities for patient involvement and help teach the behaviour-change skills needed for on-going self-management. As an example, a recent program we conducted among urban African Americans was designed as a culturally specific, problem-based educational program.¹⁰ All content was presented in response to issues and questions raised by participants; no lectures were presented. At the end of each of the six sessions, patients were encouraged to choose a short-term goal as a behavioural experiment for the week. Each subsequent class began with a group discussion of the results. These experiences and other problems and questions raised by the group were then used as the curriculum to discuss self-management, psychosocial issues, coping, and other concerns.^[9]

Table 1: A behaviour-change protocol**Step I: Explore the Problem or Issue (Past)**

- What is the hardest thing about caring for your diabetes?
- Please tell me more about that.
- Are there some specific examples you can give me?

Step II: Clarify Feelings and Meaning (Present)

- What are your thoughts about this?
- Are you feeling (insert feeling) because (insert meaning)?

Step III: Develop a Plan (Future)

- What do you want?
- How would this situation have to change for you to feel better about it?
- Where would you like to be regarding this situation in (specific time, e.g., 1 month, 3 months, 1 year)?
- What are your options?
- What are barriers for you?
- Who could help you?
- What are the costs and benefits for each of your choices?
- What would happen if you do not do anything about it?
- How important is it, on a scale of 1 to 10, for you to do something about this?
- Let's develop a plan.

Step IV: Commit to Action (Future)

- Are you willing to do what you need to do to solve this problem?
- What are some steps you could take?
- What are you going to do?
- When are you going to do it?
- How will you know if you have succeeded?
- What is one thing you will do when you leave here today?

Step V: Experience and Evaluate the Plan (Future)

- How did it go?
- What did you learn?
- What barriers did you encounter?
- What, if anything, would you do differently next time?
- What will you do when you leave here today?

While diabetes education has been shown to be effective for improving metabolic and psychosocial outcomes and is an essential first step for self-management and empowerment, a one-time educational program is rarely effective to sustain the types of behavioural change needed for a lifetime of diabetes self-care. Patients need on-going self-management support from their providers and the entire diabetes health care team to maintain gains achieved through education. Part of this on-going care and educational process includes setting goals with patients. Goal setting is an effective strategy; patients who participate in the selection of goals and have clarity about them are more likely to be successful in achieving their goals. Goal setting within the empowerment approach is a five-step process that provides patients with the information and clarity they need to develop and reach their diabetes- and lifestyle-related goals. The first two steps are to define the problem and ascertain patients' beliefs, thoughts, and feelings that may support or hinder their efforts. The third is to identify long-term goals towards which patients will work. Patients then choose and commit to making a behavioural change that will help them to achieve their long-term goals. The final step is for patients to evaluate their efforts and identify what they learned in the process. Helping patients view this process as behavioural experiments eliminates the concepts of success and failure. Instead, all efforts are opportunities to learn more about the true nature of the problem, related feelings, barriers, and effective strategies. The role of the provider is to provide information, collaborate during the goal-setting process and offer support for patients' efforts.^[10]

CONCLUSION

The patients with type 2 diabetes are able to self-empower and self-manage their disease if they are enthusiastically informed and educated. Effective empowerment of patients is not achieved unless patients obtain the necessary knowledge and skills and are educated about their own health status. Patient empowerment is also considered as intervention strategy that enables policy-makers perform accurate health promotion interventions as it creates an active interaction between providers and their patients. This mutual relationship can facilitate the patient empowerment-being a key component of self-management adoption, and is helpful to improve trust between patients and providers. Patients who are actively collaborating in the decision-making process are better able to achieve the outcomes they identify an important to them. Focusing on appropriate knowledge, skills and practices, dynamic participation of patients in decision making process would lead to achieving better outcomes about their

disease. This allows patients to adopt healthy practices as the main pathway to diabetic empowerment.

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