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"What time am I getting up, checking my sugars, I can't go do this because I've got to wait here to get my sugar, I've got to get my food in the right way"

"What would happen if you did that activity, how would that impact on your diabetes?"

# Conceptualising diabetes self-management as an occupation

Bel Youngson

@OTBelY

"How is it impacting their occupations, what new occupations do you need to develop in order to support managing this chronic condition in a positive way, in a way that you still feel healthy, that you feel good and that it supports your occupational identity"





## Overview

Brief background to research

The occupational forms of diabetes self-management (DSM)

Using the Model of Human Occupation (MOHO) to illustrate one aspect of DSM

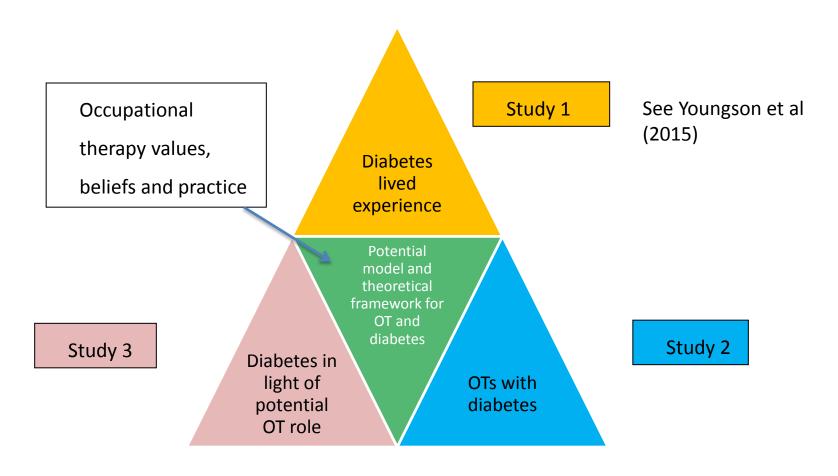
DSM in relation to other occupations

A framework for Occupational Therapy practice

Why is this important?



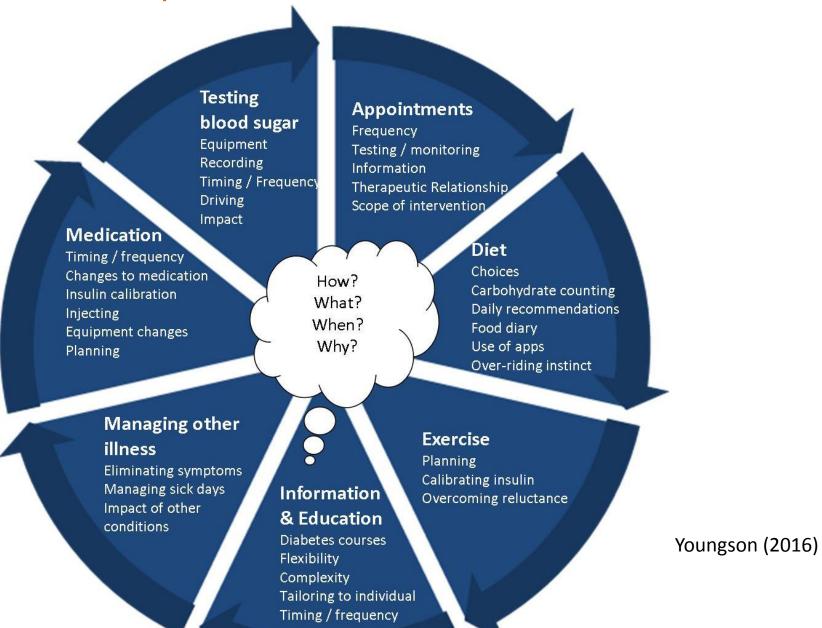
## Brief background to research



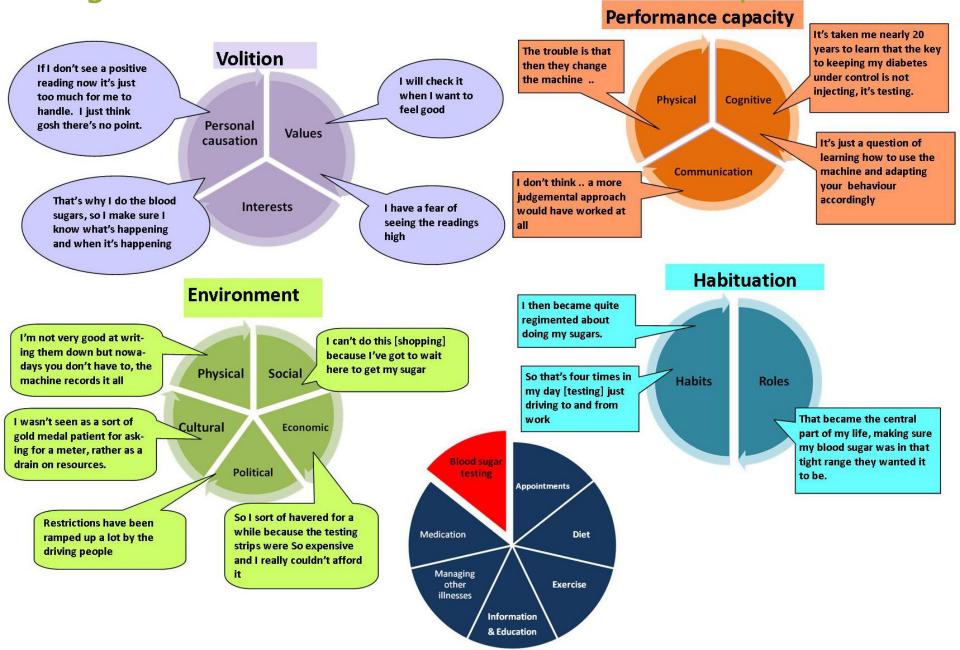
Youngson (2016)



## The occupational forms of DSM



Using MOHO (Kielhofner 2008) to illustrate one aspect of DSM



## DSM in relation to other occupations

Youngson (2016)

Impact of occupation on diabetes

#### Work:

- Challenges
- Stress
- Meal opportunities
- Finding time for appointments
- Travel

Sport & Exercise:

- Improved mood
- Improved blood sugar control
- Insulin calibration

# Socialising with friends:

- Food choices
- Gifts of food
- Peer pressure

#### Looking after family:

- Creating stress
- · Putting self last
- · Rewarding self with food
- Lack of time to plan
- Competing priorities

"If you're diabetic everything else that you need doing is affected by the fact that you're diabetic"





- Insurance
- · Licence renewal
- Testing





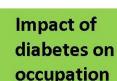
- Planning
- Safety limits

#### Food shopping:

- Choice / Exclusion
- Denial



- Food choices
- · Feeling nuisance
- Avoidance
- Spoiling others' pleasure



#### The person

as an occupational being: identity, roles, interests, habits, skills and motivation in context of their own and wider environment.

#### The challenge

Occupational performance Occupational deprivation Occupational dysfunction Occupational disruption

#### Transformation through

Occupational adaptation
Occupational balance
Occupational choice
Occupational opportunities

Core beliefs and

values

Central philosophy: Belief in the impact of occupation on health and wellbeing

Identify and Analyse & prioritise Evaluate, reflect Facilitate and act on occupational needs in occupational assess occupational co-operation with performance/ occupational outcomes needs service user engagement

Outcomes:

- Improved health and mental wellbeing
- Improved occupational participation
- Improved DSM
- Achieving a balanced lifestyle

skills and process

Core

Priorities and goals

occupations

Specific occupational

management (DSM)

In relation to the individual,

occupations, the environment:

challenges of diabetes self

Impact of diabetes on other

The process is underpinned by theory, research, clinical reasoning and the client-therapist relationship

participation

other occupations

Advocacy & Education

Psychosocial support

through occupational

Overcoming barriers to DSM:

Occupational transformation

Integration of diabetes with

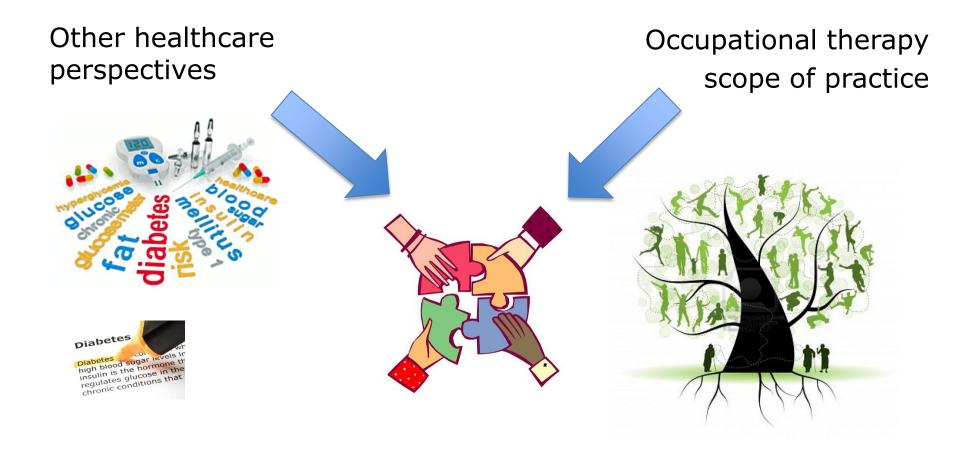
Promoting healthy lifestyle

(This framework is adapted from the COT (2014) Learning and Development Standards for Pre-Registration Education, reproduced with permission from the College of Occupational Therapists under the COT open permissions licence v1, 2013, <a href="http://www.cot.co.uk/authors-resources/authors-resources">http://www.cot.co.uk/authors-resources/authors-resources</a>).

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## Why is this important?





Thanks to all the participants and supervision team:
Professor Diane Cox
Fiona Cole
Dr Helen Wilby



## Any questions or comments?

Further details contact: <u>annabel.youngson.cumbria.ac.uk</u> @OTBelY



## References

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