COMMUNICATING FAMILIAL SUPPORT TO PEOPLE WITH DIABETES

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Social support has been found to be vital in assisting people through difficulties in their lives. For people with chronic illnesses, like diabetes, each day can be a unique challenge. Diabetes has become more and more common in the United States, and is only expected to rapidly increase in the number of diagnoses. The complications of diabetes are numerous, and daily care includes routines that are necessary for a person’s continued health. Having social support networks of friends and/or family can not only help a person manage stress better, feel less depression, and improve awareness, but also leads to an increased wellbeing (Quinn, Briggs, Miller, & Orellana, 2014), all of which are important for one’s health.

This study analyzed the five types of social support posited by High and Steuber (2014): informational, emotional, esteem, network and tangible. Informational support focuses on information about a problem, while emotional support focuses on expression of feelings by the person with diabetes and the expression of love and care from the person giving the support. Esteem focuses on increasing feelings of self-worth and network support focuses on participating in activities together, or a feeling of togetherness. Tangible support is when tangible aid is given, whether in the form of money or physical help. The present study is the first to use High and Steuber’s five types of support in a diabetes-related health context. Supportive and obstructive behaviors were also examined, as was what made it difficult to support a person with diabetes.

After approval by the institutional review board, 70 participants were recruited and completed surveys, which had both open and closed-ended questions. Participants were specifically asked to “describe the ways you support the person with diabetes” and then asked
“What makes it difficult to support a person with diabetes?” The open-ended answers were qualitatively analyzed using grounded theory method and thematic analysis, and had a Krippendorf’s alpha of .95. A sixth category, outside of the five types of support, had to be added based on participant responses: does not provide support.

Tangible and informational support was found to be the most common of the five types of support. Informational support has been said to be both the most wanted type of support (Cutrona & Suhr, 1992) and to be given more than desired (High & Steuber, 2014). Informational support was typically given in the form of advice related to exercise, food, and medication. For a person with diabetes, particularly one who is newly diagnosed and undergoing massive lifestyle changes, informational support from family members may be helpful in implementing those changes or could be an unwelcome reminder of how different life is. Emotional support, networking support, not giving support, and esteem support were found to have the least responses.

The primary difficulty in supporting a person with diabetes was the attitude with diabetes. Interestingly, while informational support was found to be the second highest type of reported support communicated to a person with diabetes, not having enough information was a common response to the question asking participants what was difficult about supporting a person with diabetes.

By examining the types of familial support and what participants identified as difficulties faced in providing that support, the present study gives insight into what families need to make it easier to support a person with diabetes. By providing supportive networks, family and friends, with information about diabetes, people with diabetes can then assist family members in communicating multiple types of support.