



Washington University in St. Louis

GEORGE WARREN BROWN SCHOOL OF SOCIAL WORK

Mothers' Perceptions of Barriers and Resources to Self-Management and Transition to Adulthood in African American Adolescents with Type 2 Diabetes

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Stage: Data Collection, and preliminary findings

Description: This study is a qualitative analysis of perceptions of barriers and resources to self-management among African American (AA) adolescents with type 2 diabetes (N=12), and their mothers (N=12), as well as AA young adults (N=12) who were diagnosed as youths.

Preliminary Findings: An increased incidence of type 2 diabetes mellitus (T2DM) in adolescents is being reported across the U.S., particularly among minority youth. Because these youth are likely to be obese, and come from families with fewer family resources, lower socioeconomic status, and single parents, positive self-management is challenging. Little is known about the psychosocial and family factors related to diabetes management in this population, and even less about their transition to adulthood. As a first step toward improving care in this subgroup, we conducted a qualitative study to address the following research questions: 1) what are the barriers and resources to self-management among African American adolescents with type 2 diabetes? And 2) what will they need as they transition to adulthood?

To address these questions, in-depth face-to-face interviews were conducted with 10 mothers of African American adolescents with T2DM who receive care at a pediatric clinic. Each interview lasted one hour and consisted of 11 open-ended questions related to mothers' perceptions of: diabetes management; psychosocial and contextual (school, family, economic) barriers and resources to self-management; and plans for the adolescent's future as they move to young

adulthood. Interview transcripts were analyzed using NVivo 7. Coding schemes and interview excerpts were compared among team members for accuracy and reliability.

Mothers' ages were 35-46 years old (mean 41.7 years). 6 were employed, 3 had greater than high school education, and 4 had T2DM. Youths' ages were 14-19 (mean 16.4 years), and their insurance status was: 7 Medicaid, 1 private, and 2 no insurance.

Mothers identified several themes that posed barriers to self-management: comorbidities (i.e., asthma, obesity, learning disabilities), difficulties implementing diet and exercise, and teenage/peer issues. Resources included: support from family members with T2DM, family folklore used to motivate youths, Medicaid coverage, responsive providers, and a belief in the severity of T2DM. Among mothers of both younger and older adolescents, almost half had not given any thought to their child's needs for transitioning.

Adolescent issues that pose challenges to diabetes management (i.e., diet, exercise, peers) are complicated by comorbidities. Access to medications is less of a problem due to Medicaid. However, few mothers are thinking about coverage for when the child is too old to be eligible.