



The Patient Perspective: The Influence of Interpersonal Interactions on T2DM SM Adherence and Satisfaction

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BACKGROUND

The prevalence of T2DM in the U.S. has soared over the last forty years, despite medical advances and treatment. Although medical management is used for glucose control, most management of T2DM involves self-management (SM) tasks, imposing physical and psychological demands on the patient. The American Diabetes Association (ADA) encourages providers to formulate SM plans to maintain glucose control. However, when SM plans are incongruent with patient goals and expectations, a disconnection occurs, impeding satisfaction and adherence.

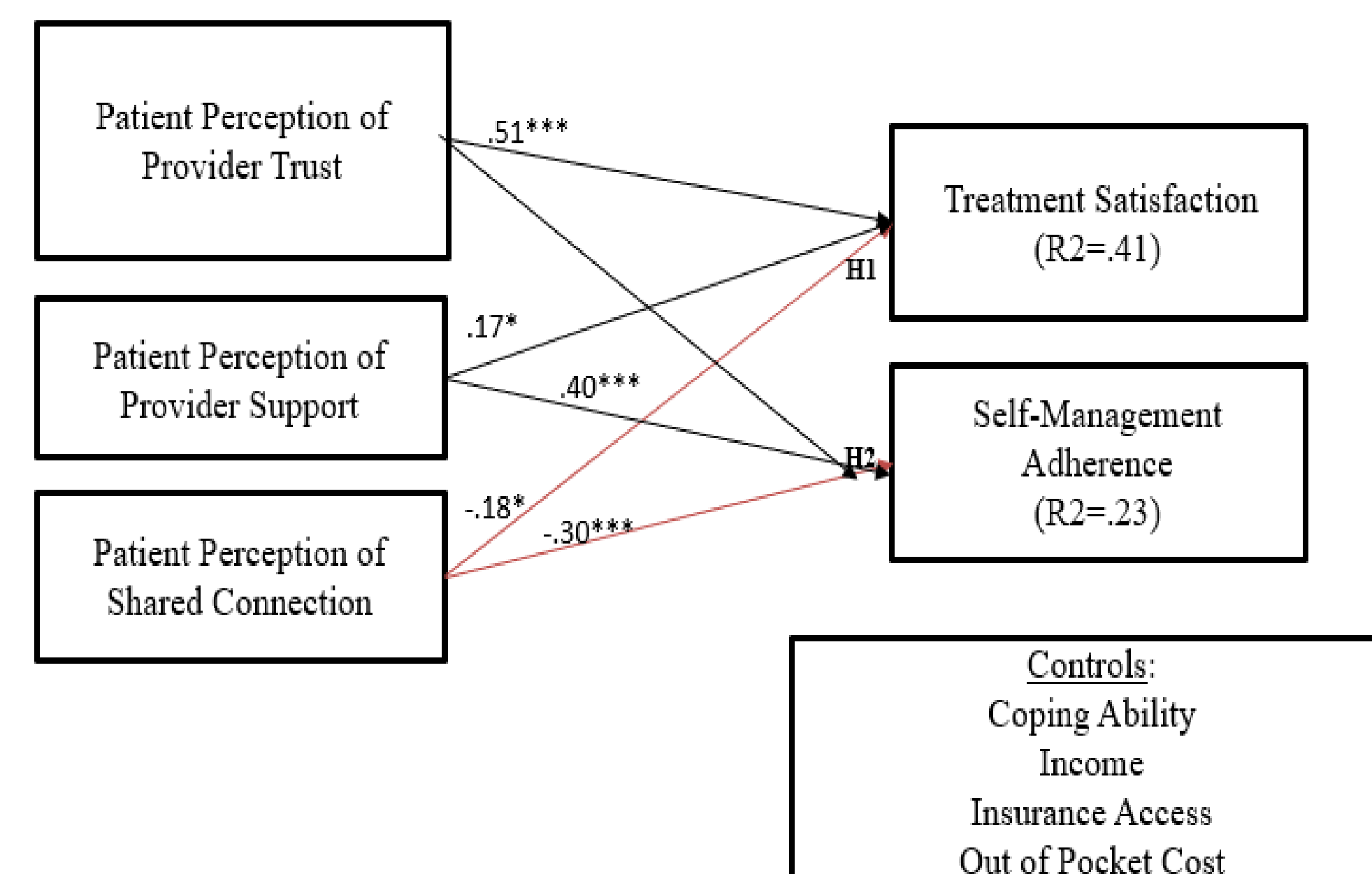
This study explores how the patient perception of interpersonal interactions with the provider influence self-management adherence and satisfaction. Understanding challenges from the patient's perspective offers PAs greater insight into barriers that impact health outcomes. This study has practical implications for PAs aiming to improve healthcare quality, SM adherence and satisfaction among individuals with T2DM.



METHODS

We conducted a quantitative study to test our hypotheses and conceptual model. A 62-item online structured survey was administered to individuals with T2DM. We sampled 474 people over age 18 from three separate groups who self identified as having T2DM: 91 individuals from a Facebook diabetes support group; 120 individuals from Amazon Mechanical Turk (MTurk); and 263 individuals from a Qualtrics panel.

Constructs were formulated from validated measures and adapted to reflect the patient's perspective using a 5-point Likert scale. Each construct (trust, perception of provider support, perception of shared decision-making (SDM), SM adherence, and treatment satisfaction) was operationalized using a reflective scale. For our analysis, we performed structural equation modeling using AMOS, version 25, to test structural relationships. Thereafter, we performed post-hoc analysis, utilizing SPSS version 27, to test hierarchical regression and one-way ANOVA analysis to detect group differences among groups. The significance level was set at $p < .05$ for all analyses.



* $p < .05$, ** $p < .01$, *** $p < .001$. Among control variables, OPCC [$p < .05$] negatively correlated with treatment satisfaction. While, coping ability [$p < .001$] and OPCC [$p < .01$] positively impact self management. INC [$p < .01$] and coping ability [$p < .01$] positively correlated with treatment satisfaction.

RESULTS

Findings revealed that higher trust in the provider ($\beta = .53$, $p < .001$) and perceived provider support ($\beta = .17$, $p < .05$) resulted in greater treatment satisfaction. Also, SM adherence was increased with greater perceived provider support ($\beta = .38$, $p < .001$). However, shared decision-making (SDM) resulted in lower treatment satisfaction and SM adherence among participants.

Post hoc analysis using hierarchical regression analysis revealed that SDM alone had a significant positive direct relationship between patient satisfaction and SM adherence. However, once trust and perceived provider support are included in the model, SDM no longer had a positive effect on SM adherence and treatment satisfaction.

DISCUSSION

These findings indicate that patients who lack trust and support from their provider need more involvement in the decision-making process due to the lack of relationship quality established. However, once a connection is established, SDM becomes less of a priority for patients.

Our research demonstrates that PAs need to tailor their approach used to counsel and educate patients based on the dynamics of the specific PA-provider relationship. Delivery of care should be individualized based on the patient's needs. In essence, one approach does not "fit" all patients.



IMPLICATIONS

- This study has practical implications for providers aiming to improve healthcare quality.
- Our research demonstrates that interpersonal interactions influence SM adherence and satisfaction among individuals with T2DM.
- Understanding challenges from the patient's perspective offers providers greater insight into barriers that impact health outcomes.
- This study has implications for providers to adapt their interaction style and approach to treatment based on the dynamics and changing needs of the patient.

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