PIII-4: Effect of a Culturally Competent Diabetes Intervention on Diet in Black Women with Type 2 Diabetes

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Abstract:

Introduction: Dietary modification is a key component of diabetes self-management; however, one of the most challenging. Many factors and barriers have been linked to diet, including psychosocial and socioeconomic issues. The specific aims of this study are: (1) Assess the effect of a culturally competent diabetes intervention on dietary intake in Black women with type 2 diabetes; and (2) Examine relationships between psychosocial factors and dietary change.

Method(s): The parent study, Self-Care Intervention for Black Women with Type 2 Diabetes, was a randomized controlled trial evaluating the effect of a culturally competent diabetes program compared to traditional diabetes education and care on metabolic and psychosocial outcomes. Dietary data was complete for 52 of the 109 women in the parent study. This secondary analysis examined dietary change at 0, 6, and 12 months, comparing the control and intervention groups. Univariate statistics were used to describe the sample. Bivariate and multivariate analyses (repeated measures ANOVA; MANCOVA; linear regression) examined relationships between dietary change and psychosocial factors (education, income, emotional distress, support, diabetes knowledge, self-efficacy).
Results: Among all women (N=52), there was a significant decrease in caloric intake between baseline and 6 months, sustained at 12 months; however group difference. Despite a decrease in total fat and saturated fat, the percentage of calories from fat remained above 30%. Carbohydrate, sugar, and fiber also decreased, while protein increased. Change in calories was related to provider support for diet (p= 0.05). Self-efficacy, added to provider support, best explained the change in calories (r²=0.1375; p=0.04). Provider support, self-efficacy, and diabetes related emotional distress best explained the change in fiber intake (r²=18.2; p=0.03).

Discussion & Conclusions: Dietary improvements occurred among the women and were sustained at one year. Differences by treatment group were not significant, possibly due to sample size. Health care provider support for dietary self-management is clearly important in dietary change, along with self-efficacy. Ongoing support is vital for maintenance of dietary changes implemented during self-management programs.

Abstract History:
This abstract has been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.
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No, I (or a member of my immediate family) have not received something of value* from or own stock (or stock options) in a commercial company or institution related directly or indirectly to the subject of my presentation.

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