



Social support focused on people with diabetes: a nursing need

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Histórico

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Diabetes mellitus (DM) is considered to be one of the global health emergencies of the twenty-first century, it is thus a matter of great concern for the academic community. Studies show that the prevalence of DM is growing remarkably all over the world, due to the increase of risk factors such as overweight, obesity and lack of physical activity. It is estimated that if the increase of risk factors continues, approximately 693 million people will have DM by 2045¹.

DM directly impacts anyone who suffers it in different areas of their lives, being associated with multiple physical, psychological and social alterations; it places a heavy economic burden on individuals, families, and the health system, due to the increased use of services, loss of productivity and multiple long-term complications².

Consequently, adverse situations occur such as a poor functional condition, unnecessary hospitalizations, adverse drug events, persistent symptoms, contradictory advice by health professionals, and even death³.

Concerning their family performance, people with DM find it difficult to fulfill their role within their homes; their family will experience new responsibilities, the role of a caregiver assuming a shared commitment arises. On the other hand, the nursing professional takes up a challenge to innovate in professional practice and health institutions as a need to promote spaces for the development of innovative interventions⁴.

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In this context, nursing professionals in their practice have been demonstrating the central role they play in the life of people with DM. However, the historical context has been framed within a worldview of reaction, where objectivity, instrumentalism, and linear thinking prevail, outlining in nursing practice a mechanistic paradigm, fractional and limited care devoid of a holistic approach that incapacitates people with DM from performing actions by themselves that lead to achieve their well-being. Interventions focus on adherence to medication, eating habits, skin care, physical activity, use of health services and control of metabolic parameters such as: Glycated hemoglobin, cholesterol, triglycerides and high-density lipoproteins.

Social support is a multifaceted experience that involves voluntary associations, formal relationships (in which health professionals are involved) and informal relationships with others.⁵ Social support interventions include emotional support, which allows providing care, empathy, love and trust to the subject of care; their purpose is to relieve uncertainty, anxiety, stress, hopelessness and depression. Instrumental support allows providing physical care, transportation, home assistance, the provision of money. Informative support recognizes the transmission of information aimed at improving health (Table 1).

Table 1. Types of social support that can be offered to people with diabetes

Categories and elements of social support
Instrumental support
▪ Physical care
▪ Means of transport
▪ Home assistance
▪ Provision of money
Emotional support
▪ Care
▪ Empathy
▪ Love
▪ Confidence
▪ Affection
▪ Company
▪ Listening
Informative support
▪ Transmission of information
▪ Education

Previous studies have shown that social support is an important component to achieve glycemic control, improve health (clinical and healthy life-style) outcomes, reduce psychosocial symptoms, improve decision-making, promote health care and, in general, improve their quality of life. Findings suggest that including family members in nursing interventions can provide emotional and psychological support so that patients understand DM, also contributing to develop healthy behaviors in the family. Furthermore, they suggest that nursing professionals should reconsider social support as a nursing intervention that promotes the use of social support networks⁶⁻⁸.

Accordingly, nursing professionals play a decisive role in developing innovative practices in DM handling, aiming at improving health outcomes and reducing the overload of carers and the health system. Therefore, this context requires a nursing practice with a broader vision that addresses people in a holistic way, so that they take a leading role and are empowered for change, capable of monitoring their health by themselves, getting their family and social network involved in that life experience.

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