Use of an Online Social Support Platform to Promote Self-Efficacy among Parents of Children Diagnosed with Type 1 Diabetes

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Purpose: Type 1 diabetes is an increasing healthcare concern and the most prevalent of all childhood chronic illnesses. Families faced with the challenges of caring for a newly diagnosed child with type 1 diabetes are often overwhelmed by the regimented demands of diabetic care management. Social support for families has been recognized as an important component to the development of increased adaptation and has been deemed necessary to helping family members develop healthy coping strategies. The purpose of this Evidence-Based Practice (EBP) project was to develop a web-based social support platform to assist families with children diagnosed with type 1 diabetes in meeting social support needs.

Synthesis of Evidence Guiding Practice Change: Nineteen original papers were identified as significant references pertaining to the clinical issue of type 1 diabetes, self-efficacy, and Internet use in relation to social support interventions. Research corroborates the use of social support for families and children in increasing self-efficacy, helping manage stress, and diminishing feelings of isolation among family members. A systematic review of literature found Internet social support platforms were a useful tool for flexible, non-threatening, and open communication with others who share similar life experiences.

Proposed Change in Practice/Clinical Question: Practice Change-Development of a web-based social support platform to assist parents of children diagnosed with type 1 diabetes in meeting their social support needs. Clinical question-Among parents of children diagnosed with type 1 diabetes in a small mid-west city, what are parents’ self-reported self-efficacy scores related to diabetic care management pre and post implementation of a web-based social support platform?

Strategies for Implementation: The Diffusion of Innovations Theory and the Theory of Self-Efficacy frameworks were utilized to guide the strategic development and implementation of the online social support platform.

Stakeholders: Identified stakeholders included area healthcare providers, parent advocates, family community resources, and community parents with children diagnosed with type 1 diabetes.

Method for Evaluation: One-group pretest-posttest descriptive design used including collection of primary and secondary measurements. Self-efficacy measured via pre and post intervention surveys using the Diabetes Empowerment Scale (DES) and Self-Efficacy for Diabetes Scale (SED). Parent comments regarding satisfaction with online social support platform usefulness and suggestions for improvement were invited.

Significance of the Work: An evidence-based project was successfully implemented within a community through identification/evaluation of the clinical problem, strength of evidence, stakeholders, and facilitators/barriers to practice change. Pretest-posttest single group measurement comparison
supported the use of online social support in perceived development of self-efficacy with improvement in both the DES and SED surveys. Statistically significant increase (p<0.05) occurred between the pre and post implementation scores of the SED survey. Secondary data supported the positive relationship of social support and self-efficacy in raising a child with type 1 diabetes. This online social support platform was found to be an easily adaptable, cost-effective, and innovative means of networking and information sharing among families facing similar challenges in raising a child with type 1 diabetes.

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