

Shock of Diagnosis

You are shocked, unprepared for and distressed by being diagnosed with diabetes because you did not expect to have diabetes and it seems like a big deal.

"I was upset, absolutely very upset, and very stressed. It's just that it was a bit overwhelming and I just didn't take it in; it just sort of went over my head a bit."

- Real Australian living with diabetes

Card #1

[1], [8], [13], [14]

After effect of diagnosis

You struggled to adapt and manage to live with diabetes because you had a poor experience when you were diagnosed.

"All that education all at one time was a bit overwhelming, so the first five years taking the pills I struggled a lot because I didn't really change my diet." ^[1]

- Real Australian living with diabetes

Card #2

[1], [13]

Participating in health

You are confident, independent and engaged in your care because you have a participatory relationship, where you work in partnership with your healthcare professional.

"I can go to my doctor and if I want to discuss something or tell him that this says so or so, what do you think? You know, he can take it easy, sit and relax with me... and not worry about the people outside." ^[13]

- Real Australian living with diabetes

Card #3

[2], [8], [12], [13]

Questioning and negotiating

You question and negotiate with your healthcare professional, when needed because you are an active participant in your health and want to make sure you are receiving quality care.

"My GP introduced insulin to me, but it didn't work because I didn't add the tablets that are [now] actually making insulin work in my body. But because it didn't work, I asked to see the specialist" ^[2]

- Real Australian living with diabetes

Card #4

[2], [9]

Focused care

You are happy with your doctor and the care you receive because your doctor is interested and you get regular care focus on helping you as an individual.

"I feel like they're all looking after me as an individual. I don't feel like I'm a number, I don't feel like I'm a guinea pig or someone that's just going to go through [as] the grist of the mill. I really do feel like they're interested in me" ^[2]

- Real Australian living with diabetes

Card #5

[1], [2], [5]

Passive role in care

You feel limited and frustrated because you have a traditional doctor-patient relationship, where you have a passive role.

"I am the doctor and I am the learned one...and you know you've got that very fine line ... you've got to be very careful that you don't over-step the boundary..." ^[13]

- Real Australian living with diabetes

Card #6

[13]

No choice in doctor

You don't have a good relationship with your doctor and are mostly self-reliant because there wasn't much choice in which doctor you would see and you can't travel or pay to see anyone else.

"I'd quite easily change to him, but it's the hassle of, we've got an hour's drive over and an hour's drive home, and then the hassle of, can you get an appointment."

- Real Australian living with diabetes

Card #7

[1], [12]

Suitable doctor

You are happy with your doctor and the care you receive because you were able to find a doctor that suited you.

"Well, I did try a few practices before, and unfortunately, the doctors were not very personable like here. [GP's name] is just wonderful." ^[1]

- Real Australian living with diabetes

Card #8

[1], [12]

An insight into

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Delay seeking care

You delay getting help from a doctor because you don't have a good relationship with your doctor or you don't know enough about your health condition.

"...he said 'oh you want to do that do you?' and I said 'yeah'. He said 'well, it's a lot of work here. There's a lot of paperwork I've got to do' and it was like 'okay, I'd better not ask him to do that again'"

- Real Australian living with diabetes

Card #9

[7], [9], [12].

Doctor doesn't understand

You resent your doctor and do not always follow their advice because you feel that your doctor doesn't understand you or your situation and judges you (e.g. on age or weight).

"I've never liked him so he got me off on the wrong foot. All he said was 'you're diabetic, you're over- weight – you're obese was what he said – and you'll have to go on tablets'. 'Okay'. When they come at you like that you go 'what?'" ^[7]

- Real Australian living with diabetes

Card #10

[5], [7], [10]

Language barrier

You are confused about how to manage your diabetes because you don't speak English and translators are not always available.

"I try to communicate [with health professionals] with my language skills you know, and sometimes of course I don't get half of the things... I really wanted to learn a little bit more English to communicate.." ^[9]

- Real Australian living with diabetes

Card #11

[9]

Limited care time

You feel like you don't get good care or have a good relationship with your doctor because you don't have enough time in your appointments.

"My GP is a diabetes specialist and I have no dispute with him at all. He's a really good doctor but you have a ten minute time limit and once that ten minutes are out so are you!" ^[7]

- Real Australian living with diabetes

Card #12

[7], [8], [11],

Search for help

You have to search for the support and information you need because you do not have enough time or do not receive adequate care from your doctor.

"I have the Mayo Clinic sending me stuff virtually every week or second week because you can put in what fields you're interested in, so I put in diabetes" ^[11]

- Real Australian living with diabetes

Card #13

[7], [8], [11]

Prepared to wait

You go to specialist appointments prepared to wait a long time (up to 3 hours) because you are used to the delays.

"I go to doctor [name] and if you think you got a ten o'clock appointment and you think you are going to see her at ten o'clock you've got a second thought, you take a big book with you." ^[8]

- Real Australian living with diabetes

Card #14

[3], [8], [11],

Can't wait

You have trouble attending appointments and sometimes don't even go because you know that you may have to wait up to 3 hours and you have other important things to do.

"I found as far as waiting times go, I come here prepared to allow for at least two hours." ^[11]

- Real Australian living with diabetes

Card #15

[8]

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Can't get to appointments

You have trouble accessing care and managing your diabetes because you can not access or afford transport (e.g. cost of petrol, public transport or parking).

Card #16

[3], [5], [7], [8], [11]

Avoid upfront costs

You try to avoid healthcare services which require upfront expenses because you are on a limited income and can't afford to be out of pocket.

"it really adds up and yeah okay sometimes the doctors don't bulk bill or do anything like that so you've got to go and pay \$80 and you'll get \$30 back or whatever the gap is and you sort of go 'I really don't have the money.'" [7]

- Real Australian living with diabetes

Card #17

[5], [7]

Bills to pay

You don't go to the doctor or delay going because whilst you know your health is important you have bills to pay so it will have to wait.

"I know it is [important]. But it also worries me. It's fifty dollars and, I mean, fifty dollars is a lot of money. I know my health is very important too, but when you're struggling to pay the bills..." [5]

- Real Australian living with diabetes

Card #18

[5]

Expensive specialists

You do not make appointments with specialists because they are too expensive.

"I'm supposed to make an appointment to go and see the ophthalmologist, but I didn't make another appointment because I first went last year, and they wanted eighty-four dollars... and because I didn't have it, and I said 'oh, can I take the bill with me?' And [the receptionist] got a bit stroppy with me. [...] and she said, 'you know, next time you've got to have the cash.'" [5]

- Real Australian living with diabetes

Card #19

[5]

Everything costs

You find the cost of living with diabetes every day to be a burden because not only do you have extra health costs, but you also have extra costs for healthy living (food/exercise), medication, preventative items (e.g. shoes) and this rises again if you have a complication.

"the podiatrist said to me "you've got to buy these shoes" [shoes] .. so I bought leather ones and they cost me nearly \$300. On a pension it's very expensive" [7]

- Real Australian living with diabetes

Card #20

[7], [10], [11]

Continuity of care

You receive good care from your health professionals because you usually get to see the same people and they know you, your community and the services available.

"[Previously, a private consultant] wouldn't tell me anything on diet. He'd say, 'You need to see a dietician about that.' He was quite abrupt... [whereas now,] I could ring [the diabetes educator] if I wanted to know anything" [2]

- Real Australian living with diabetes

Card #21

[2], [8], [11],

Doctors leaving

You disengage with your care because your doctor has left or you think that they might leave.

Card #22

[5], [8]

Disconnected care

You receive inconsistent, conflicting and insufficient care because your care is separated based on the specialty of your healthcare providers.

"[Doctor says] Oh it's got nothing to do with us, you've got to see your PCP [Primary Care Physicians]" [11]

- Real Australian living with diabetes

Card #23

[3], [4], [7], [8], [11]

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Health records not shared

You have more work and are more stressed because your medical information is not shared between your different healthcare professionals (e.g. medication, histories, management plans, test results...).

"(...) but if the main results from this hospital were sent to your PCP[Primary Care Physicians] on the one system, everybody's happy, but they're costing the system a fortune, because everybody's doubling up" ^[11]

- Real Australian living with diabetes

Card #24

[9], [11]

Health professional shortage

You do not receive care that helps you maintain your health and prevent complications because there seems to be a shortage of health providers, so they are busy treating existing problems and it seems like the health system is just for emergencies.

"I do expect the ambulance to come out here and pick me up if I'm really sick, but only if I'm really sick." ^[12]

- Real Australian living with diabetes

Card #25

[8], [12]

No referral

You don't seek care if you don't receive a referral from you doctor because you rely on them to refer you if you need to see a specialist.

Card #26

[5], [12]

No questioning your doctor

You do not question the care you receive because you do not want to risk disturbing your relationship with your doctor and you have come to expect the level of care you receive.

"There are doctors, they don't want you to ask a question. Like they don't want you to say what you know... "I tell you what I think, whatever you read keep for yourself". They don't want to know." ^[13]

- Real Australian living with diabetes

Card #27

[12], [13]

Assess the quality of care

You assess the quality of care you receive by comparing different experiences, considering if the provider listened, if you had enough time, if it was easy to access and if you received what you needed..

"Dr 1 checks you right out and do it. And me heart doctor, he doesn't really check you out. He just sits there and asks you a lot of questions" ^[9]

- Real Australian living with diabetes

Card #28

[5], [9], [10]

Limited access to specialist

You think maybe you should see a specialist but don't make an appointment because there is limited access to specialist services so you see them irregularly, if at all.

"I don't see a podiatrist, which I should do..." ^[1]

- Real Australian living with diabetes

Card #29

[1], [5], [11], [12], [15]

Specialist not needed

You don't think it is important to see a specialist because you think you are managing well on your own or your not well informed and don't think the complications are serious.

Card #30

[5]

Important to see a specialist

You think it is important to see a specialist because your doctor has advised you about the specific service and you want to avoid serious complications.

"Two years ago, she [GP] sent me again to the dietician and that helps me a lot; otherwise, I get all confused." ^[1]

- Real Australian living with diabetes

Card #31

[1], [5]

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Healthcare is a maze

You have difficulty finding, accessing and navigating the healthcare services because the system is so complex and you don't have anyone who can guide you through it.

"I'm not sure whether it's because of our area or whether it's the fact, you know, that I'm a Medicare patient, I'm not sure, but I do feel that uh...there's not really enough information about what services are actually available to you..." ^[5]

- Real Australian living with diabetes

Card #32

[5], [7], [9], [12]

Services are unknown

You do not use some of the health services because you are unaware of their purpose or that they are even available.

"[My GP] said that he was going to put me into one of these...I don't know what they call it, like...somebody could manage... 'cause my diabetes is always up, very high, uh...you know, to help me...you know...try and, you know, with diet and different things to get me on the right...but it hasn't happened as of yet." ^[5]

- Real Australian living with diabetes

Card #33

[5], [12],

Negative experience

You are anxious, confused and unsure about seeking further care because you have had negative experiences in the past (e.g. poor communication, poor care or low trust in provider).

"Because of the experiences my mother had, I always go to another doctor occasionally to get another opinion. My mother's care was very poor, and because of that she died, and I don't...I don't stick exclusively with one doctor anymore." ^[5]

- Real Australian living with diabetes

Card #34

[3], [5], [9], [10]

Information overload

You feel overwhelmed, worried about making mistakes and disengaged from your care because you received too much information to absorb or remember.

"We'd go to those different places for dietary advice. You'd get stacks of literature, leave it there and I threw it all out." ^[1]

- Real Australian living with diabetes

Card #35

[1], [3], [7], [11]

Can't access information

You are unable to access information and feel disempowered because you don't have the internet or are unable to attend appointments.

"if you don't have transportation to get to [rural region of South Australia] it makes it a lot difficult, so people in the rural areas, um like further rural, would be a lot more disadvantaged by not having everything there at hand and some places don't have the internet, so you don't have the information." ^[8]

- Real Australian living with diabetes

Card #36

[7]–[9], [13]

Seek out information

You proactively seek out information because you want to better understand, process and manage your diabetes.

"The first couple of days I was a complete mess, I was so upset, and then once I got my act together I think I went to the library and got half a dozen books and read them... once I started to read about things I thought it wasn't quite as bad as I thought it was going to be." ^[7]

- Real Australian living with diabetes

Card #37

[3], [7], [8], [12]

Proactive in self-care

You are proactive in seeking care and preventing complications because you are more motivated and informed.

"I think the most important... in diabetes you can't actually change the [disease] You can change the story. [Its] one of the few diseases where you can change the ending to your story by doing something about it..." ^[3]

- Real Australian living with diabetes

Card #38

[12], [14]

Evaluating information

You evaluate the info you come across to work out what is relevant and right for you based on your trust in the source, the supporting evidence provided or how usable the information is.

"Most of the advice, you get... it's important to pick up what people say. If he said something, he said something, she said something, then you work out which one's the right answer to suit you and you go on that..." ^[3]

- Real Australian living with diabetes

Card #39

[3], [7], [13],

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Well informed

You feel well informed about your diabetes condition, sometimes more than your doctor because you live with it everyday, so you have more experience and also stay up to date.

"...they gave a talk here...and the professor told us that your GP probably learned about diabetes 25-years ago and that's all he knows. He doesn't know that things have changed in the last 2-years, never mind 25-years." [13]

- Real Australian living with diabetes

Card #40

[1], [2], [8], [13],

Unbalanced blood sugars

You feel frustrated, overwhelmed and confused about your diabetes management because you find maintaining your blood sugar levels within the recommended range to be a constant struggle.

"Is that the minefield if I go over 10 and if I go under four [Blood Glucose Level]? I don't know exactly what happens there... I've asked my doctor. I was going to ask the girls over there [practice nurses] but they were busy." [7]

- Real Australian living with diabetes

Card #41

[4], [7], [9]

Monitor your body

You monitor your body (e.g. your eyes) because you realise it can display noticeable symptoms if your blood-sugar levels get out of range.

"My diabetic problem is that sugar levels drop too low, you know, and if that happens, my eyes will tell me. My eyes, they start rolling sort of thing ... and I knew my sugar level is low so I do something about it" [4]

- Real Australian living with diabetes

Card #42

[4], [12]

Value management

You want to make changes, be seen as well informed and successfully managing because successful diabetes management is valued by the diabetes community, your doctor and yourself.

"I want to make these changes, and they're telling me 'Yes, these are the right things to do - keep up with them'" [2]

- Real Australian living with diabetes

Card #43

[2], [7], [9]

Constant challenge

You find living with diabetes is very difficult because it is physically, emotionally and socially challenging.

Card #44

[1], [3], [9], [11]

Accept responsibility

You have accepted responsibility for managing your diabetes and other conditions because you want to change, avoid complications and you recognise that doctors, family and friends are good support, but you

"(...) people are responsible for their own health and the one thing that seems to come across all the time is doctors are so busy trying to help people get better after they've got sick, but the people themselves so often do not make any effort for themselves"

- Real Australian living with diabetes

Card #45

[3], [7], [11], [12]

Fear of unknown

You are fearful of what complication could happen next because diabetes is a very serious but unpredictable and invisible condition.

"Diabetes in itself doesn't have very physical symptoms, so it's silently affecting different parts of your body... It's not contained within itself... the eye, the nerves, the kidneys, the liver. Eventually it moves on to different parts of the body..." [3]

- Real Australian living with diabetes

Card #46

[3]

Not coping with fear

You find it difficult to cope with the fear of future complications because you already have enough to deal with.

"Once you're diagnosed with diabetes, the risk of heart attack and stroke, and all that, your kidneys, it affected everything. I've got friends that have lost both legs..." [3]

- Real Australian living with diabetes

Card #47

[2], [3], [10]

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Hard work of diabetes

You see diabetes as hard ‘work’ because it requires constant effort, puts an unfair burden on you and is exhausting.

“I’ll take it for a while, and then go, nah, this is too difficult. You’ve turned it into a burden and a chore, and it’s my health... there are things I’ve got to do that non-diabetics don’t have to, but they don’t have to be to the extent where your life becomes completely secondary to it” ^[2]

- Real Australian living with diabetes

Card #48

[2], [3], [7], [8]

Limited time

You do not manage in an ideal way because you do not have time to learn how to manage or time to implement it in your life.

“By the time I get home, I’m tired, I’ve become really lazy and we’ll go and get takeaway, and I know that’s not the best thing but sometimes it’s the easiest way out for us” ^[2]

- Real Australian living with diabetes

Card #49

[2], [8]

Unworried by complications

You don’t worry too much about managing your diabetes because you feel well, so it is illogical to be worried about complications that seem distant and unlikely.

“They gave me a lecture as if I’d never heard it before and blah, blah, blah, and as if that would change my behaviour. Well my behaviour doesn’t change by telling me not to do something.” ^[5]

- Real Australian living with diabetes

Card #50

[2], [8], [12]

Difficult staying motivated

You have trouble managing and staying motivated long term because you find management persistent hard work which is hard to maintain.

“I sort of get all, a bit razzed up when I come out of the hospital and diabetes educators, and that wears off after about a day and I just go back to doing what I normally always do.” ^[8]

- Real Australian living with diabetes

Card #51

[7], [8],

Confusing health conditions

You find looking after your health complicated and confusing because you have other conditions, as well as diabetes, which can clash.

“I listen to everybody but everybody keeps telling me lose weight. Now, we try and it gets to the point – like today I seen two people, which both of them told me to lose weight but don’t use your legs.” ^[7]

- Real Australian living with diabetes

Card #52

[4], [7], [10], [11]

Prioritise other health condition

You have another health condition that takes priority over managing your diabetes because it has a greater impact on your immediate life.

“I had a heart attack I have more to worry about than diabetes.” ^[1]

- Real Australian living with diabetes

Card #53

[1]

Repetitive cycle of diabetes

You find living with diabetes to be a repetitive, tiring cycle because your life is constantly disrupted, so you attempt to adjust and get back to normality only to face another issue.

“I went through [the initial phase] for a little while – nobody is going to dictate to me what I am going to eat...[Later,] I just came to the realisation that I was just harming myself, really. And then I was pretty – I was very, very good for a long time. And then I ate my way out of a depression after the floods, which in turn caused my heart attack, because I was stressed to the max...” ^[2]

- Real Australian living with diabetes

Card #54

[2], [10]

Follow doctor’s rules

You follow the ‘rules’ set out by your healthcare professional because you want to be a ‘good patient’ and work out how to live well with diabetes.

“You’ve got to learn to live with it... you do your best, you try and follow all their rules and the things they’ve taught you and things like that” ^[2]

- Real Australian living with diabetes

Card #55

[2], [9],

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Selective about doctors advice

You think it is your choice to follow or disregard the health advice you are given based on your own circumstances because you see the doctors advice to be just a generalised recommendation.

"I took myself off the Diabex XR, and then when I came here, (GP Name) put me on the glycoside..." ^[1]

- Real Australian living with diabetes

Card #56

[1], [2]

Balancing life and diabetes

You experiment and adapt in ways that are not medically perfect but suit you individually because you are trying to balance looking after your diabetes with living your life and what's important to you..

"I love to eat ice-cream, so if I want to have ice-cream I check my blood sugar at night and if my blood sugar is down to 5.8 or 6, I know I can have two scoops of ice-cream and it won't hurt me. Because it won't – it will only bring my blood sugar up 6.8 or 7.4 or 7.8, it won't put it through the sky" ^[2]

- Real Australian living with diabetes

Card #57

[2], [6], [12]

Reconstruct parts of life

You find you must purposely reconstruct aspects of your life because there is tension between the life you are used to and the changes required to live successfully with diabetes.

"My girlfriend that died of breast cancer she told me to think of chocolate as rat poison. So every time I see [chocolate], I think rat poison." ^[7]

- Real Australian living with diabetes

Card #58

[2], [6], [12]

Change is unnecessary

You do not make any changes in your life because you don't believe that change is necessary.

"[W]hen I first got sugar diabetes, I didn't realise how bad it was and what it could do to you and all the rest of it. I just thought it was something like the flu or something like this [laughs]. So I just went and shrugged it off..." ^[2]

- Real Australian living with diabetes

Card #59

[1], [2], [6], [15]

Stressed & denial

You are in denial of your responsibility and stressed out because there are too many issues to deal with, it's overwhelming and you don't know where to start.

"... I've got too many issues on my plate, I can't work them out you know, so I can't ask that person to work them out cos they don't know the first thing about them. Here, have a big bag of problems, where do you start? I don't know. I've been collecting them for the last 20 odd years, you work it out." ^[6]

- Real Australian living with diabetes

Card #60

[1], [6], [8]

Motivated to prevent complications

You are motivated to manage your health and reduce the risk of future complications because you are aware of and accept the seriousness of these possible complications.

"Now you can't be, what shall I say, pig-headed about this. You can meet people who say, oh, to hell with this, I'm going to eat what I like. Well, you have to be reasonable, because you do have a longer life if you can measure and manage" ^[2]

- Real Australian living with diabetes

Card #61

[2], [12]

Unsure of need for change

You have difficulty being motivated and managing your health because you don't understand why you need to make changes in your life or what might happen if you don't.

"He [he doctor] didn't tell me what sort of thing that I should eat. And he didn't mention anything, he just tell me exercise. And why do I have to do exercise? Why do I have to eat sensibly? And why do I have to take medication?" ^[13]

- Real Australian living with diabetes

Card #62

[1], [2], [8], [10]

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Motivated to manage

You are motivated to manage your diabetes because you have a positive attitude and understand the link between managing today and preventing complications in the future.

"...I've put everything I can not to think about the negative issues and basically concentrate on doing what needs to be done to help myself and it's not for anyone else except yourself. That's probably the motivation that I guess everyone needs and it's really hard if you don't have enough resources or anywhere else to turn to..." ^[3]

- Real Australian living with diabetes

Card #63

[3], [6], [8]

Real life is complex

You find implementing what you have learned about diabetes is still a struggle because real life is more complex than what you are taught and it is hard to find changes that you can maintain long-term.

"Initially, I was very – very on the ball with looking after it, and then... I got – well, now, I basically got jack of it. This is just too much. It's invading every part of my life. So I got quite slack with it, and then probably about – it's actually almost a year ago now, but I thought no, I've got to get serious about this again, so I started doing things to improve myself" ^[2]

- Real Australian living with diabetes

Card #64

[2], [3], [6],

Prioritise enjoying life

You don't prioritise your health because living your life and enjoying it is more important to you.

"Diabetes is probably second, enjoying myself is first and worry about diabetes later on down the track when I am retired and I can work on it to be honest. Enjoying myself means family time with my kids, having a few beers and snacks." ^[6]

- Real Australian living with diabetes

Card #65

[6]

Unify life and care

You become more motivated and less burdened because you have had a breakthrough, discovering how to genuinely unify your care and your life.

"I was naive to believe that if I take insulin, everything is okay so I can eat whatever I want. At least for me, it's not working. It has to be all of it together" ^[2]

- Real Australian living with diabetes

Card #66

[2], [12]

Committed to care

You become more committed to your care because you realise the better you look after your health, the more independent you can be and the better your life is.

"Doing the exercises. I found it's very, very healthy. It's benefited me in a lot of ways and given me motivation to live a little longer." ^[3]

- Real Australian living with diabetes

Card #67

[2], [3], [12],

Grateful for diagnosis

You are grateful for your diagnosis and motivated because you realise it has helped you become a healthier person.

"I guess I have to say I was thankful because it's changed my life for the better." ^[3]

- Real Australian living with diabetes

Card #68

[3], [12],

Focus on inner-self

You focus on being strong, resilient and maintaining integrity when faced with difficulties because through living with diabetes you realise you can not control the future.

Card #69

[12]

Feeling defeated

You are frustrated and unsure if you will continue bothering to try and manage because you have been trying, without success and blame yourself for your failure.

Card #70

[2], [11], [12]

An insight into

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Can not think about diabetes

You find it hard to focus on your diabetes and look after yourself because other things are more important and there are pressures in your life at the moment, making it impossible to even think about yourself or your health (e.g. family, work, finances).

"My levels aren't too good at the moment... just spent 12 months in Perth with my father dying, a lot of things have happened, just sort of dropped the ball a little bit." ^[6]

- Real Australian living with diabetes

Card #71

[6], [8],

Challenge of the diet

You are resentful of and challenged by the required diet changes because they are time-consuming, you have to deal with cravings and you no longer enjoy your food.

"Craving for food is a big, big issue of managing. It's very hard to control the cravings..." ^[3]

- Real Australian living with diabetes

Card #72

[3], [4],

Restrictive & depriving diet

You find your diet restrictive and depriving because no one else (family, community, media) is focusing on healthy eating so you feel like the odd one out (and have to plan ahead).

"I think it's very hard in this country where the social media and all these wonderful chef shows and all this crap, they're all so... the mixed messages we're being given about, cut down on your carbohydrates, boost your proteins... I'm on insulin three times a day. There have to be a carbohydrate to burn it..." ^[3]

- Real Australian living with diabetes

Card #73

[3]

Diet is impossible

You have trouble following the diet recommendations because you are told to eat foods that are unavailable where you live, are too expensive or are not suitable for your culture.

"The last one [dietician] I saw wanted me to have all sorts of things that I couldn't even find in the supermarket. You know, I'll drink green tea and things like that and I have decaf tea so I take on board some of the things but some of the things she suggested I couldn't even - I'd never heard of them and I couldn't even find them." ^[7]

- Real Australian living with diabetes

Card #74

[3], [7], [8]

Diabetes is the norm

You are not motivated to manage your diabetes because there are lots of people in your community who have similar conditions and related complications so it seems normal and inevitable.

Card #75

[8]

Managing is awkward

You feel isolated and embarrassed about living with diabetes because it requires you to take part in unusual activities (monitoring testing, taking insulin) and there is a social stigma in the community so you feel like people blame you for your condition.

"I was wallowing in misery for the first few months. You think you're the only one..."

- Real Australian living with diabetes

Card #76

[3], [8]

Diabetes is causing losses

You are having trouble managing your diabetes because living with diabetes is causing you to lose important things in your life (e.g. your job, your ability to participate socially/in the community and breaking up relationships).

"You know, my wife says to me now, you know, we've lost a lot of friends because of my condition, because I've been moody or I get moody, you know. People don't understand what you feel or what you're going through" ^[11]

- Real Australian living with diabetes

Card #77

[2], [10], [11]

Avoid or adapt habits

You realise your habits and your friend's habits are unhealthy and conflict with your diabetes management so you must decide to avoid or adapt the habit, causing social discomfort.

"If they offer me something I say 'no, I don't eat sweets' or I just make up an excuse or 'I don't drink'. Within my job I get given a beer quite often 'I'll take it home and drink it mate, I won't drink it now because you don't know where the police are'." ^[7]

- Real Australian living with diabetes

Card #78

[7], [8], [11], [12]

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Maintain unhealthy habits

You realise your habits and those of people around you are unhealthy and conflict with your diabetes management, this causes you discomfort because you take part in the habit, neglecting your health.

"...when the son-in-law comes round he doesn't do anything else but drink. He's 40 and he's – if instead of having a cup of tea or coffee he'll have something out the fridge so I'll have three or four with him." ^[7]

- Real Australian living with diabetes

Card #79

[7], [8], [11], [12]

Tension in relationships

You feel frustrated and there is tension in your relationships because your health conditions make you dependent on your family members (e.g. as carers or interpreters).

"what makes me upset is the fact that I can't do the jobs I used to, I've lost a lot of my independence. I was surprised by the amount of work my wife has to do. I'm a cripple and got to rely on her." ^[10]

- Real Australian living with diabetes

Card #80

[9], [10]

No support

You have trouble managing and staying committed to your diabetes care because you don't have people you can rely on for practical or emotional support.

"I am on my own with my husband here. We've got no family. All my family is in France. So we are only him and me, you know, so I do not have anybody to help me" ^[9]

- Real Australian living with diabetes

Card #81

[4], [8], [9]

Support

You are able to manage your diabetes because you receive both practical support (driving you to appointments) and emotional support (helping you through tough times) from your friends and family.

"If it wasn't for my wife keeping an eye on me, I think I'd probably slip off the straight and narrow more often than I do. She's forever reminding me that you really don't need to eat that, I think you've had enough to drink and etc. etc." ^[8]

- Real Australian living with diabetes

Card #82

[4], [8], [9]

Motivated by family

You are motivated and committed to looking after your health because your family constantly encourages you and guides you and you want to stay an active part of their lives.

"my husband's always supportive so, yeah, I think that if a lot of people are supportive around you, and know that you've got it, and, you know, they don't just shove things in your face and say, here, eat this coz they know that you shouldn't." ^[11]

- Real Australian living with diabetes

Card #83

[3], [11], ,

Concern for family

You are concerned about how your health condition impacts your family because diabetes takes up a lot of time, which impacts the time you can dedicate to your family.

".. . I don't want my kids to see me struggling.. " ^[3]

- Real Australian living with diabetes

Card #84

[3]

Develop a complication

You develop a serious complication from diabetes leaving you feeling disempowered and regretful because you realise this complication could have been avoided if you had been aware of the risks, known how to change your lifestyle earlier and received the right medical care.

"no one told me that people with diabetes could have amputations. They told me after I'd had the first toe amputated. I would have liked to know why they went black in the first place. In the beginning no one was telling me why I was losing a toe." ^[10]

- Real Australian living with diabetes

Card #85

[5], [10], [13]

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