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Diabetes Management

Behavioral health in diabetes: The role of mental health in diabetes management

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Description

Diabetes is a chronic condition that affects millions of people around the world, with type 2 diabetes being particularly prevalent. While much of the focus on managing diabetes has traditionally centered around physical health such as monitoring blood sugar, medication adherence, and maintaining a healthy diet there is an increasing recognition of the critical role that behavioral and mental health play in managing the disease. Behavioral health in diabetes includes the psychological, emotional, and social factors that influence a person's ability to cope with and manage their condition.

■ The psychological impact of diabetes

The psychological burden of living with diabetes can be considerable. People with diabetes often have to manage daily tasks such as monitoring blood sugar levels, administering insulin, maintaining a healthy diet, and exercising regularly. These responsibilities can be overwhelming, and many individuals may experience feelings of frustration, anxiety, or burnout.

Key psychological factors that impact diabetes management include:

Depression: Depression is common among people with diabetes, with studies showing that individuals with diabetes are twice as likely to experience depression as those without the condition. Depression can make it difficult to maintain healthy behaviors, such as exercising regularly or following a prescribed diet. The lack of motivation and energy that often accompanies depression can lead to poor diabetes control and an increased risk of complications.

Anxiety: Anxiety is another mental health issue that is prevalent among people with diabetes. Concerns about blood sugar levels, potential complications, and the daily management of the disease can cause chronic worry. This anxiety can, in turn, disrupt self-care behaviors, cause irregular blood sugar levels, and negatively affect overall health.

Diabetes distress: Diabetes distress refers to the emotional burdens and challenges that arise from living with diabetes, including the constant need to make decisions about diet, exercise, and medication. It is distinct from clinical depression, but it can still significantly impact a person's mental health and diabetes self-management. People experiencing diabetes distress may feel overwhelmed by the constant attention needed to manage their condition and may struggle to maintain a sense of control.

Burnout: Diabetes burnout is a state of emotional exhaustion that results from the constant demands of diabetes management. The never-ending cycle of blood glucose monitoring, medication administration, and lifestyle changes can feel like a never-ending job, leading to feelings of frustration and apathy.

Behavioral factors affecting diabetes management

In addition to mental health conditions like depression and anxiety, several behavioral factors play a significant role in managing diabetes:

Poor dietary habits: Unhealthy eating habits, such as overeating, consuming sugary foods, or eating highly processed foods, can be a challenge for people with diabetes. Emotional eating or using food as a coping mechanism can

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exacerbate poor diabetes control. Addressing these behaviors often requires a combination of nutrition education, therapy, and behavior change strategies to help individuals make healthier food choices.

Lack of physical activity: Physical activity is a cornerstone of diabetes management, yet many individuals with diabetes struggle to incorporate regular exercise into their daily routines. Factors such as low motivation, depression, pain, or fatigue can prevent people from engaging in regular physical activity. Behavioral health interventions, including motivational interviewing and goal-setting techniques, can help individuals overcome barriers to exercise.

Medication adherence: Consistently taking prescribed medications is critical for diabetes management, but non-adherence is a common problem. Behavioral factors, such as forgetfulness, fear of side effects, or lack of understanding about the importance of the medication, can lead to missed doses or poor adherence.

Social support: Social support plays a significant role in managing chronic conditions like diabetes. Having a strong support system of family, friends, or healthcare providers can positively influence diabetes management. Conversely, social isolation, lack of encouragement, or living in an unsupportive environment can make it more difficult for individuals to adhere to healthy behaviors.

■ Integrating behavioral health in diabetes care

To address the behavioral health challenges in diabetes management, it is essential to integrate mental health care into the overall treatment plan.

Screening for mental health conditions: Routine screening for mental health conditions, such as depression and anxiety, should be a standard part of diabetes care. Healthcare providers should ask patients about their emotional well-being and be proactive in addressing issues related to mood and mental health.

Psychological interventions: Cognitive Behavioral Therapy (CBT) and other forms of psychotherapy can be highly effective in helping people with diabetes manage emotional distress. CBT, for example, can help individuals identify and change negative thought patterns related to their condition and develop healthier coping strategies. Therapy can also help people address diabetes distress, burnout, and anxiety, which can improve adherence to diabetes management plans.

Diabetes Self-Management Education (DSME): DSME programs provide individuals with the knowledge and skills needed to manage their diabetes effectively. These programs should include not only practical guidance on blood sugar monitoring, nutrition, and exercise but also psychological support to help people address barriers to self-care. Motivational interviewing, which focuses on helping individuals explore and resolve their ambivalence about behavior change, can be a valuable tool in encouraging better self-management.

Support groups and peer networks: Support groups and peer networks allow individuals with diabetes to share their experiences, learn from others, and gain emotional support. Connecting with others who understand the challenges of living with diabetes can reduce feelings of isolation and provide a sense of community.