

A Qualitative Study to explore access and barriers to integrated care among vulnerable patients with diabetes mellitus in Belgium.

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Background:

Effective interventions for control of diabetes are available, but do not reach vulnerable populations. Also in Belgium, they risk being excluded from care, partly because of socio-economic exclusion and compounding health problems that concur in reducing people's ability to cope with disease. The aim of this study is to examine why some People With Diabetes (PWD) do not benefit from integrated care in its current form in Belgium.

Research questions:

1) what is the variation in care and support experienced and available, by PWD and what is the influence of other context and patient-related factors? 2) What are incentives and barriers to care and self-management for PWD? 3) What are core drivers of out of cost for their disease?

Method:

A qualitative study design is used. Patients, purposively selected by a continuum sampling strategy, were included. An inductive thematic analysis, using semi-structured interviews was used. Interviews were audio-recorded and transcribed verbatim.

Results:

7 themes were mentioned by PWD: (1) financial aspects, (2) supporting assistive devices (3) the care process, (4) psychosocial aspects, (5) lifestyle, (6) quality of care, (7) distance to care. On the one hand, the results show that related factors can impede the care for the patient's condition to an important extent. On the other hand, patients also report several aspects that can affect their well-being in a positive way.

Conclusions:

Vulnerable people experience multiple barriers to care and self-management, even in a high income country like Belgium. Whereas some relate to the patient context, others are linked organizational care elements.

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