INTRODUCTION

- Adolescence and young adulthood (AYA) are periods with social and developmental challenges that can be barriers to optimal type 1 diabetes (T1D) self-management.
- During this time there is an increase in T1D-related support.
- AYAs may be entering the workforce for the first time, leaving their family support for the first time, negotiating complex peer relationships, and transitioning to higher education.
- New interpersonal relationships during these years introduce the need for disclosure of T1D status.
- Disclosure is an important first step in seeking and accepting support.
- Illness status-related disclosure has been examined as a crucial part of accessing adequate social support in illness groups other than diabetes (1, 2).
- Characterizing the different ways AYAs disclose their T1D status to others can help inform interventions designed to improve adjustment and facilitate the seeking of social support.

METHODS

- Secondary analysis from a large qualitative study about diabetes health-related quality of life (HRQOL).
- Interviews were audio-taped and transcribed verbatim.
- Study team (2 diabetes psychologists + 1 fellow) reviewed the transcripts from 13 AYA participants (age 12-25) to identify disclosure related themes and develop codebook in multiple iterations.
- Thematic coding was completed using NVivo software version 10.
- 38% of transcripts were double coded by an independent rater and discrepancies were resolved by discussion.

RESULTS

- Participants used different disclosure styles depending on the situation and the degree to which they felt comfortable and/or trusted others.
- For example, the same 22-year-old male described using all 3 styles in different settings.
  - **Open Disclosure**: “You go into interview and they’re like hey, we’re going to hire you. And I was like, cool. Well just so you know I’ve got diabetes and I tell them there’s sometimes I have to sit down…my sugar’s gonna be low”
  - **Hesitant Disclosure**: “It’s such a burden to me that I don’t want to talk about it”
  - **Passive Disclosure**: “Then somebody else mentions that I’m diabetic and then it’s like, yeah, I’m diabetic now so I just pull it [pump] out.”

<table>
<thead>
<tr>
<th>Demographic &amp; Clinical Characteristics (n=13)</th>
<th>% (n)</th>
<th>Mean ± SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age, years</td>
<td>17.0 ±6.3</td>
<td></td>
</tr>
<tr>
<td>Gender, % female</td>
<td>38.4% (5)</td>
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<tr>
<td>Diabetes Duration, %</td>
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<tr>
<td>&lt;5 yrs.</td>
<td>30.7% (4)</td>
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<td>5-10 yrs.</td>
<td>23.1% (3)</td>
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<tr>
<td>&gt;10 yrs.</td>
<td>46.2% (6)</td>
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<tr>
<td>Insulin Regimen, % pump</td>
<td>38.4% (5)</td>
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<tr>
<td>Hemoglobin A1c, %</td>
<td>8.6±3.5</td>
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<tr>
<td>Race/Ethnicity, % Non-Hispanic White</td>
<td>38.4% (5)</td>
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REFERENCES


DISCUSSION

- This study describes a construct, diabetes disclosure, that has not been well defined in the diabetes literature.
- AYAs with T1D use a variety of disclosure styles: Open, Hesitant, and Passive.
- Disclosure style may vary depending on the situation and the degree to which they can trust those around them.
- Clinicians should consider whether and with what style their AYA patients disclose their T1D status.
- Problem solving around barriers to effective disclosure in the context of transitional time periods may help to prepare AYAs to access support during periods of high stress and change.
- Future research is needed to identify effective interventions to support AYAs in disclosing their diabetes in a way that matches their personal preferences, medical and social support needs, and the context.
- Disclosure of T1D is an important initial step in accessing social support.