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AN ANALYSIS OF THE INFLUENCE OF EDUCATION PROGRAMMING TYPE, SCOPE OF DIABETES SELF-MANAGEMENT EDUCATION, AND SELECTED DEMOGRAPHICS ON SELF-EFFICACY AMONG ADULT AFRICAN AMERICANS WITH TYPE 2 DIABETES (224 pp.)

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Diabetes mellitus significantly affects the health status of adults living in the United States. This is true particularly of African Americans who are disproportionately affected by this devastating chronic condition. As such, the purpose of this study was to analyze the type of education programming and the scope of diabetes self-management education (DSME) received, on the self-efficacy of adults diagnosed with type 2 diabetes. Conducted among adults, particularly African Americans diagnosed with diabetes, this comparative analysis examined the influence of programming on self-efficacy among subjects who participated in educational enrichment provided by faith-based organizations (FBO) and their counterparts who received DSME in clinical care settings only.

The Independent Sample T-test, Multiple Regression, and Pearson's Correlation were the statistical tests used to analyze data. Findings revealed a statistically significant difference in diabetes self-management education (DSME), including diet, physical activity, and glucose monitoring between the two groups. Further, age, income, and participation in an FBO program explained 33% of the variance in the final regression model. Finally, data analyses revealed that there was a positive relationship (Pearson's correlation statistic r = 0.26) between diabetes self-management education and self-efficacy. Although analyses suggested participating in FBO programming did not influence self-efficacy, it was confirmed that subjects who participated in such enrichment did receive additional DSME. Based on these findings, it is recommended that medical providers, health educators, and public health professionals collaborate with the faith community to plan, implement and evaluate educational interventions to enhance self-efficacy through DSME.