



Teal, Gemma and Baillie, Jen and Johnson, Michael and Thorup, Tine, Digital Health & Care Institute (DHI) Crooks, George, ed. (2018) Digital Diabetes. Digital Health & Care Institute, Glasgow. ,

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Digital Diabetes – Executive Summary

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Document reference number	DHI+DDMMYY+doctype+000X <i>DHI190618S0001</i> <ul style="list-style-type: none"> ○ E = exploratory report ○ L = lab report ○ F = factory report ○ S = summary document ○ LR = literature review ○ RR = research report ○ MR = market research ○ MAP = mapping ○ V=video ○ O= other
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Publication date	2016
Revision date	19 June 2018
Revision number	

Purpose of document	Executive summary for the Digital Diabetes project report
Other detail (delete row if appropriate)	Find more details at: http://radar.gsa.ac.uk/6244/

Related projects	Names and doc reference numbers
Keywords	Diabetes; Co-design; Experience Labs; DHI

Digital Diabetes – Executive Summary

The Digital Diabetes programme is a portfolio of seven promising innovation projects funded by the Digital Health & Care Institute (DHI) aiming to support engagement in self-management of diabetes.

Experience Labs were developed by the Institute of Design Innovation at The Glasgow School of Art, aiming to offer a safe and creative environment where researchers, businesses, civic partners and service users can collaborate on innovative solutions to the health and care challenges facing our society.

The aim of the Digital Diabetes Experience Labs was to bring together people living with diabetes, carers, clinicians and representatives from the voluntary sector to understand how people would like to be supported to engage in self-management. Three Experience Labs were designed and facilitated by the Experience Lab Team, involving: people living with diabetes in rural locations (Lab 1: Inverness), people living with diabetes in urban locations and carers (Lab 2: Glasgow), and health professionals and representatives from the third sector who support people living with diabetes (Lab 3: Perth).

The Lab findings are presented as a model of diabetes self-management, describing the key factors that determine how well someone will engage in self-management, and the people and things that support them. Factors include the person's attitude towards diabetes and the relative importance it has in their life and access to personal insight about their condition. Opportunities for new digital tools to support personal insight and positive attitudes towards diabetes were identified. Insightful and motivating conversations with trusted health professionals and their community (including peers and support organisations) were seen as key to supporting engagement in self-management. Further findings relate to the differences between type 1 and type 2 diabetes, in particular the need for short term insight to improve control of type 1, in contrast with the need for insight to relate short term decisions to longer term consequences for people living with type 2.

Three key opportunities for design innovation to support diabetes self-management were identified: i) tools to generate personal insight including visual presentation of data; ii) tools to support insightful and motivational conversations; and iii) tools to give feedback on progress.



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