

Identifying determinants of diabetes risk and outcomes for people with severe mental illness: a mixed-methods study

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

Determinants of diabetes risk for people with severe mental illness

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Plain English summary

Severe mental illness refers to a group of illnesses, such as schizophrenia, that greatly interfere with life activities. People with severe mental illness die earlier and have worse physical health than the general population. They are more than twice as likely to develop diabetes and to get more complications from having diabetes. It is currently unclear how severe mental illness interacts with diabetes or how having both conditions influences health-care use.

We looked at general practice records from large numbers of patients across England. We also interviewed 39 people with severe mental illness and diabetes, nine family members and 30 health-care professionals across the North West, and Yorkshire and the Humber.

Key findings

In people with severe mental illness, older age, being from an ethnic minority, living in a deprived area, having multiple health conditions and using certain medications predicted the development of diabetes.

For people with both severe mental illness and diabetes, being older, living in deprived areas and having lots of different health conditions led to poorer physical and mental health outcomes.

Participants with severe mental illness said that they put dealing with their mental illness above caring for their physical health. They also struggled to manage lots of health problems.

Physical health problems were often overlooked by health-care services because physical and mental health problems are often treated in separate services. A keyworker responsible for co-ordinating care could help to bridge this gap.

Good social support, diabetes knowledge and better mental health (like better mood) were things that helped people with severe mental illness to better manage their diabetes. Health-care staff wanted more training about physical or mental health problems.

Participants' low levels of physical activity and poor mental and physical health were barriers to effective diabetes management. These barriers need to be thought about when designing better treatments.

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