Doctopic: Analysis and Interpretation
THELANCETDE-D-24-00205
S2213-8587(24)00107-4
Embargo: [add date when known]

Improving support for university students with type 1 diabetes

Using prevalence data from the UK,[1] we estimate that there are more than 10 000 university students with type 1 diabetes, out of a total student population of 2·8 million.

The individual burden of health care for university students with type 1 diabetes can be overwhelming. Diabetes self-management is challenging enough, but it is compounded by the need to adjust to an often stressful and erratic student life. There might be new challenges regarding day-to-day life including those related to cooking, relationships, and time schedules. Additional obstacles might include a reluctance to disclose a diagnosis of diabetes[2] or the exploration of risk-taking behaviour characteristic of young adulthood.[3]

Joining a new primary care practice (even when an on-campus surgery exists) can be challenging for students with type 1 diabetes. It can be especially difficult for those unfamiliar with the national health service in the country. Finding appropriate places to inject insulin adds to the stress. Furthermore, university students can find it difficult to combine attending diabetes education, such as the DAFNE course,[5] with university timetables and limited transport options.

More than half of 584 surveyed university students with type 1 diabetes in the UK found it harder to manage diabetes while away from home or experienced frequent hypoglycaemia, and one in four were hospitalised for diabetes during their studies.[4] However, 91% never or rarely contacted university support services.

One barrier to understanding the extent of this problem is that England's National Diabetes Audit does not separately report data for the type 1 diabetes 18–25-year age-bracket. At the same time, our own ongoing research suggests that few universities are aware of how many students with type 1 diabetes students are enrolled. This sparse data limits opportunities to provide adequate support from enrolment through to graduation.

At the University of Essex, UK, and in collaboration with the Jagiellonian University, Poland, we developed a novel approach for supporting these students. Our ADAPT approach[6] aims to create a better university life for students with type 1 diabetes (panel). It is hoped that such an approach will help to lower the risks for preventable hospitalisation and increase the quality of life of students with type 1 diabetes by improving their skills and confidence in diabetes self-management as well as raising awareness among those responsible for their wellbeing.

We declare no competing interests.

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1 Rafferty J, Stephens JW, Atkinson MD, et al. A retrospective epidemiological study of type 1 diabetes mellitus in Wales, UK between 2008 and 2018. *Int J Popul Data Sci* 2021; **6:** 1387.
2 Hagger V, Lake AJ, Singh T, Hamblin PS, Rasmussen B. The experiences and support needs of students with diabetes at university: an integrative literature review. *Diabet Med* 2023; **40:** e14943.
3 Steinberg L. Cognitive and affective development in adolescence. *Trends Cogn Sci* 2005; **9:** 69–74.
4 Kellett J, Sampson M, Swords F, et al. Young people's experiences of managing Type 1 diabetes at university: a national study of UK university students. *Diabet Med* 2018; **35:** 1063–71.
5 DAFNE Study Group. Training in flexible, intensive insulin management to enable dietary freedom in people with type 1 diabetes: dose adjustment for normal eating (DAFNE) randomised controlled trial. *BMJ* 2002; **325:** 746.
6 Stoet G, Foster E. ADAPT. Supporting university students with type 1 diabetes. 2024. https://adapt.diabetes-at-university.info/ (accessed April 15, 2024)

Panel: **The acronym ADAPT reflects five key features of our programme**

A Age-appropriate care and supervision acknowledges ongoing brain development in this age group.
D Diabetes education is delivered on campus.
A Academic Support is provided in line with their condition. It is important, and in line with UK law, that universities provide reasonable adjustments. For example, while nearly all our students have a phone app for their continuous glucose monitor (CGM), none of them were allowed to use this on their desk during examinations before we started this programme. Our programme requires that students have access to their CGM app, as well as having 25% extra time for examinations which allows time for any necessary measures to rectify hypoglycaemia.
P Psychological support is provided in the form of a group for students with diabetes led by both academic and clinical staff. This group allows them to talk about their challenges and to make friends with the same condition. This is key, as most of these students generally feel isolated.
T Together. The ADAPT programme's main accomplishment is that a collaborative network has been established between academic teams, student services, associated health facilities, and the students themselves. With regard to students, we have created a monthly diabetes clinic on the University of Essex campus to which diabetes specialist nurses attend to give specific advice.