

**Evidence Synthesis**



Chamberlain College of Nursing

NR 716: Scientific Underpinnings



## Evidence Synthesis

Type 2 diabetes is a developing worldwide medical problem, influencing many individuals worldwide, with a binding effect on medical services expenses and individual health outcomes. This paper means to investigate the prevalence and financial consequences of type 2 diabetes in the United States and the potential advantages of using Motivational Interviewing (MI) as a proof-based mediation for outward change in conduct. The motivation behind this paper is to look at the adequacy of MI in working on self-administration, lessening HgbA1C levels, and lightening diabetes-related pressure among people with type 2 diabetes.

Type 2 diabetes is a predominant condition in the United States, with almost 2,000,000 new judgments revealed yearly (ADA, 2019; CDC, n.d.; Mokdad et al., 2018). The monetary weight related to dealing with the disease and its difficulties surpasses 300 million bucks every year (ADA, 2019; Mokdad et al., 2018). Besides, type 2 diabetes can prompt serious unexpected problems like kidney disease, hypertension, and visual impairment (ADA, 2019; CDC, n.d.; Mokdad et al., 2018).

While traditional diabetic education and backing programs expect to advance a solid way of life and behavior, their support rates stay low, with just 25% of the diabetic populace participating in these mediations (CDC, n.d.; ADA, 2019). Motivational Interviewing (MI), a patient-focused directing methodology that underscores sympathy and cooperative objective setting, has arisen as a promising mediation for conduct change in diabetes the board (Li et al., 2020; Dogru et al., 2019; Young et al., 2020). MI means to conquer inner conflict and elevate adherence to treatment plans, prompting work on self-administration and better health outcomes (Dogru et al., 2019; Li et al., 2020; Young et al., 2020).