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Title: Changing a Conversation: Critical Ethnography of Diabetes Care in People with Severe Mental Illnesses

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ACCEPTED MANUSCRIPT

1	Title: Changing a Conversation: Critical Ethnography of Diabetes Care in People with Severe Mental
2	Illnesses
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9	Abstract
10	OBJECTIVES: Diabetes is a leading cause of death and disability in Canada. The co-occurrence of
11	mental illnesses and diabetes is well documented, with diabetes being two to three times more prevalent
12	among individuals with mental illnesses, compared to the general population. In clinical practices,
13	diabetes management practices continue to be based on the chronic disease model which conceptualizes
14	diabetes as a physiological and behavioral deficiency; therefore clinical and policy efforts are directed
15	toward the enhancement of patient self-management techniques through compliance with pharmaceutical
16	and lifestyle recommendations. Little attention has been given to the exploration of how well the
17	biomedical model aligns with the everyday realities of individuals experiencing mental illness.
18	METHODS: This project explored everyday experiences of diabetes self-management among those
19	diagnosed with severe mental illnesses through the lens of critical ethnography. RESULTS: This work
20	demonstrated discordance between biomedical perspectives on diabetes management and the lived

21 experiences of those with severe mental illness, such as schizophrenia spectrum, and bipolar disorders and

22 diabetes. CONCLUSIONS: This work offers an alternative conceptualization of diabetes management

that moves beyond idealized concepts of self-care to introduce the social realities of patients as they

24 attempt to enact and negotiate around medical directives. This understanding encourages a shift towards

social and contextual understandings of the lived realities of patients. Attention to how social context

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