**Abstract Title**:

***Guided Self-Determination: A co-designed self-management program for Aboriginal and/or Torres Strait Islander peoples living with type 2 diabetes***

**Background and aim:**

The incidence of diabetes is 2.8 times higher, and the rate of death from diabetes is 4.7 times higher, among Aboriginal and/or Torres Strait Islander peoples compared with non-Indigenous Australians1. The Guided Self-Determination (GSD) approach empowers people living with diabetes by facilitating person-centred, reflective conversations to create sustainable solutions to manage their diabetes, reduce the risk of diabetes complications and improve their quality of life2. We aimed to develop a culturally-tailored GSD program to improve diabetes self-management and well-being in an Aboriginal context**.**

**Methods:**

The content, language, format, artwork, and guidelines for the use of the GSD program were reviewed and refined via two co-design workshops with Aboriginal and/or Torres Strait Islander peoples with lived experience of type 2 diabetes, and health care practitioners working in this field. Co-design strategies included Aboriginal-led activities, such as yarning, and creating a culturally safe setting. Participants received remuneration for their participation.

**Results:**

The workshop participants highlighted the importance of tailoring communication methods to fit the cultural and linguistic context of Aboriginal and/or Torres Strait Islander peoples. Modifying the GSD program to use familiar language, drawings, symbols, and Indigenous artwork was considered a collective and negotiated design. Three key features were identified in this co-design process: Indigenous language: using familiar terms such as ‘yarning’ which conveys a deeper emotional connection than simply ‘conversation’; Acknowledging successful diabetes management: changing the focus from medical problems to wellbeing and success; Mind mapping: documenting the experience of living with diabetes for guiding tailored discussion about diabetes management.

**Conclusion:**

Yarning became central to the new modified GSD program. The yarns can foster more reflective and purposeful self‐care decision‐making and potentially improve diabetes self-management. Yarning worksheets can be incorporated into the education programs for people with diabetes and can promote a two‐way, patient‐centred communication.

**References:**

1. Australian Institute of Health and Welfare. Aboriginal and Torres Strait Islander Health Performance Framework - Summary report - Diabetes Canberra: AIHW; 2024 [cited 2025 17 May 2025]. Available from: <https://www.indigenoushpf.gov.au/report-overview/overview/summary-report/4-tier-1-%E2%80%93-health-status-and-outcomes/diabetes#:~:text=However%2C%20death%20rates%20from%20diabetes%20remain%20relatively%20high,Australia%2C%20South%20Australia%2C%20and%20the%20Northern%20Territory%20combined%29>
2. Zoffmann, V., et al. (2023). "Person-specific evidence has the ability to mobilize relational capacity: A four-step grounded theory developed in people with long-term health conditions." Nursing Inquiry 30(3): e12555.https://doi.org/10.1111/nin.12555