**Self-Management Priorities and Digital Health Preferences: A Cross-Sectional Survey Findings from People Living with Type 2 Diabetes and Their Family/friends**

**Background:** Digital health interventions show promise in supporting people with type 2 diabetes (T2D) through enhanced self-management and wellbeing. Understanding the perspectives of individuals with T2D and their family/friends is essential for developing culturally responsive, person-centred digital programmes. This study aimed to explore the self-management needs, preferences, and barriers among Australians living with T2D and their family/friends.

**Methods:** A cross-sectional survey, informed by literature review and expert feedback, was pilot-tested for clarity and cultural appropriateness. It targeted Australian residents aged ≥18 years, either living with T2D or family/friends involved in diabetes management. The survey covered demographics, health practices, digital attitudes, and program delivery preferences. Descriptive and non-parametric tests (Chi-Square, Mann-Whitney, Kruskal-Wallis) examined subgroup differences.

**Results:** Between March 2024 and March 2025, 123 participants completed the survey (98 with T2D, 25 family/friends). Of the total sample, 54% were female, 65% born overseas, 58% reported diabetes duration for >10 years, and 40% had a bachelor’s degree or higher. Common management approaches included oral medications (85%), dietary changes (62%), and insulin (54%). Comorbidities were common (67%), particularly cardiovascular disease (43%).

Nutrition (71%), physical activity (60%), and medication (54%) were top support topics. Family/friends were more likely to prioritised mental health, while older adults preferred wellbeing and happiness (p=0.022). Those diagnosed <5 years (p=0.037) and with higher education (p=0.003) showed greater interest in physical activity.

Face-to-face individual sessions were the most preferred program mode, followed by digital apps. Attitudes to digital apps were: older adults (p=0.002) and those with lower education (p=0.05) reported lower technical confidence while overseas-born participants had fewer difficulties with app navigation (p=0.037). The role of apps in diabetes care was unclear, though provider endorsement influenced uptake.

**Conclusion:** The findings highlight diverse self-management needs and digital readiness, supporting the need for tailored digital interventions that reflect cultural, educational, and generational differences.