

# The Relationship Between Self-Care Based on Illness Perception with Social Support, Shared Decision-Making, and Self-Efficacy in Patients with Type 2 Diabetes

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# 1. Round 1

# 1.1 Reviewer 1

Date: 05 January 2024

Reviewer:

The introduction cites outdated diabetes prevalence statistics from 2004 and 2016. Consider referencing more recent epidemiological data, such as WHO or IDF reports from the last 3 years.

All data were collected via self-reported questionnaires. Consider discussing the potential for social desirability bias and whether any objective clinical measures (e.g., HbA1c levels) could supplement the findings.

In structural equation modeling results (Table 3), standardized path coefficients ( $\beta$ ) are provided, but confidence intervals for these coefficients are missing. Consider including 95% CIs to enhance statistical transparency.

Authors revised the manuscript and uploaded the updated document.

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## Reviewer 2 1.2

Date: 14 January 2024

Reviewer:

The introduction should explicitly state the research gap. While the study mentions the role of illness perception, social support, and shared decision-making, prior research on these variables and their limitations should be more clearly addressed.

The introduction does not establish a clear theoretical framework linking illness perception, self-care, and social support. Consider integrating theories such as the Health Belief Model (HBM) or Social Cognitive Theory (SCT) to provide a stronger conceptual foundation.

The methods state that SEM was used, but there is no explanation of how measurement models were evaluated (e.g., factor loadings, model fit indices). Including more details would improve methodological rigor.

In Table 1, it is unclear why the mode is relevant for continuous variables such as self-efficacy and diabetes self-care. Mean and standard deviation are more informative. Consider removing or explaining its inclusion.

Table 2 presents Pearson correlations, but there is no discussion on collinearity. Were Variance Inflation Factors (VIF) checked to ensure that predictors in SEM do not suffer from multicollinearity?

The discussion occasionally implies causality (e.g., "social support leads to increased self-care"), but since this is a crosssectional study, causality cannot be inferred. Consider rewording to emphasize associations rather than causal effects.

The discussion references several previous studies, but it does not critically engage with conflicting findings. Were there any studies that reported different relationships between self-care and social support? Addressing this would enhance the depth of the discussion.

Authors revised the manuscript and uploaded the updated document.

## 2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.

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