

The Self Management Addition!!!

World renowned Self Management expert **Professor Kate Lorig** recently visited Melbourne. Kate is the Director of the Stanford Patient Education Research Center and a Professor of Medicine in the Stanford School of Medicine. Kate presented at many forums and workshops.

Her visit has prompted a special *Workforce Development News* dedicated to Self Management.

Why Self Management?

Chronic disease is the principal cause of disability, the major reason for people to seek health care and accounts for largest portion of the health care dollar.

Until recently little research or work has been done to enable people to manage chronic diseases in the long term.

What is an effective Self Management Intervention?

Effective self management interventions are intended to help people understand how individual behaviours can affect how much an illness interferes with their lives and to act on the basis of that understanding. They also provide information individuals need to make decisions about their disease.¹

What do the most effective self management programs address?

Effective self management programs address the following 3 key areas:

1. Disease, medication and health management

Rather than focusing on the particular disease the majority of information in the most successful programs emphasise the generic lifestyle issues such as physical activity, nutrition, coping skills, taking medicines and communicating with health professionals.

2. Role Management

People benefit from programs that help them carry out normal activities such as maintaining social supports, connection to work and family and normal functions of daily life.

3. Emotional Management

People find benefit from programs that encompass managing depression and stress, adaptation to change and maintaining relationships.¹

What is the Stanford University Chronic Disease Self Management Program?

The Chronic Disease Self Management Program (CDSMP) referred to in Australia as the Better Health Self Management Course (BHSMP) is a 17-hour course taught by trained lay people or health professionals. It teaches people with chronic disease how to better manage their symptoms and illness, carry out their normal activities and manage emotional changes.

Offered in community settings such as senior centres, churches, libraries, and hospitals, CDSMP classes are held once a week for for 6 weeks.

This program has been successful, with the CDSMP being offered by over 100 health organizations in 31 States and 10 countries—the United States, Canada,

¹ Center for Advancement in Health . Indexed Bibliography on Self management for People with Chronic Disease. Washington DC;1996

Australia, New Zealand, Great Britain, Italy, Norway, Hong Kong, China, and Sweden.

What is covered in the CDSMP?

The CDSMP focuses on problems common to patients suffering from chronic diseases. Coping strategies such as action planning and feedback, behavior modeling, problem-solving techniques, and decisionmaking are applicable to all chronic diseases. Patients are taught to control their symptoms through:

- Relaxation techniques.
- Changing their diets.
- Managing sleep and fatigue.
- Using medications correctly.
- Exercise.
- Communication with health providers
- Pain management

Each person enrolled in the CDSMP receives the text *Living a Healthy Life With Chronic Conditions, 2nd Edition*.² This manual, developed by Stanford University School of Medicine researchers, teaches self-management behaviors for chronic lung disease, heart disease, high blood pressure, arthritis, and diabetes.

What are the outcomes for Chronic Disease Self Management Programs?

The Chronic Disease Self Management Programs (CDSMP) have been heavily evaluated for up to a 2 year period including randomised, controlled trials. The following outcomes have been demonstrated:

CDSMP Improved Health and Reduced Health Care Use

Over a period of 1- 2 years investigators compared health behaviors, health status, and health services use in patients age 40 to 90 years (average age, 65) who had

completed the CDSMP. When compared to baseline measures taken for the 6 months prior to the CDSMP, researchers found:

- Significant improvements in energy, health status, social and role activities, and self-efficacy.
- Less fatigue or health distress.
- Fewer visits to the emergency room.
- No decline in activity or role functions, even though there was a slight increase in disability after 1 year^{2 3 4}.

CDSMP Reduced Costs

The CDSMP reduced health care costs over a 2-year study period because participants used fewer health care services. CDSMP participants used less hospital and physician services than they had used before participating in the program, and less than those in the control group.^{2 3}

CDSMP Increased Self Efficacy

The increase in patients' perceptions of their self-efficacy was associated with reduced health care use. Self-efficacy, the degree of belief people have that they can perform the behavior required to produce a desired outcome. The more self-efficacy people have, the more control they believe they have over their behavior. Therefore, increasing self-efficacy contributes to better decision making processes, stronger motivation, and perseverance.

Kate Lorig's Key Messages

During her Melbourne visit some of Kate's key messages included:

- A low cost program for promoting health self management can improve elements of health status while reducing health care costs in

² Lorig KR, Sobel DS, Stewart AL, et al. Evidence suggesting that a chronic disease self-management program can improve health status while reducing hospitalization. A randomized trial. *Med Care* 1999;37(1):5-14.

³ Lorig KR, Ritter P, Stewart AL, et al. Chronic Disease Self-Management Program: 2-year health status and health care utilization outcomes. *Med Care* 2001;39(11):1217-23.

⁴ Lorig KR, Sobel DS, Ritter PL, Laurent D, Hobbs M. Effect of a Self Management Program on Patients with Chronic Disease. *Eff Clin Pract* 2001;4:256-262

populations with diverse chronic diseases.

- Recruit widely rather than focusing on traditional models of health care recruiting. Go to where the people are even if it means giving our brochures outside the church door on a Sunday or perhaps more appropriately for here at the local sports ground on Saturday.
- Outcome measures for the CDSMP are similar across programs run by, two peer leaders, one peer and one professional or two health professionals.
- When considering what disease specific information to include in a program try to limit it to five key areas and five key points for each of those key areas

Where can I learn more about the Chronic Disease Self Management Programs?

- From the Stanford University Web site <http://patienteducation.stanford.edu/>
- From Arthritis Victoria who have a license to run the leader training for the CDSMP

Is this the only model for self management?

No, there are many different models for self management being trialed throughout the world. The *Sharing Health Care Initiative* in Australia is trialing different models including:

The Good Life Club based in Victoria. A self management program for people with diabetes (over 50) using a telephone coaching model
<http://www.goodlifeclub.info/>

Flinders University Human Behaviour & Health Research Unit has also developed a number of resources for use in individual client work that support promotion of self management in care planning.
<http://som.flinders.edu.au/FUSA/CCTU/>

Dates for the diary.....

The National Chronic Disease Self-Management Workshop.

Melbourne on 12th, 13th and 14th November 2003

<http://www.chronicdisease.health.gov.au/sparing.htm>

Wonderful Websites

Preventing Disability in the Elderly With Chronic Disease

Research sponsored by the Agency for Healthcare Research and Quality with papers supporting CDSMPs

<http://www.ahcpr.gov/research/elderdis.htm#fn2>

Expert Patients Programmes (UK Dept of health)

Provides details of the expert patients program which is piloting self management using peer led programs
<http://www.doh.gov.uk/cmo/progress/expertpatient/index.htm>

Stanford University Patient Self Management Education Centre

Professor Kate Lorig's Unit at Stanford University, USA. Provides information about their program and staff and references supporting their work

: <http://patienteducation.stanford.edu/>

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