

Self-Management Programs

What are they and do they make a difference?

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Self-Management: What is It?

Self-management - tasks that individuals must undertake to live with one or more chronic conditions

Tasks include having confidence to deal with medical management, role management, and emotional management of their conditions

Institute of Medicine 2004

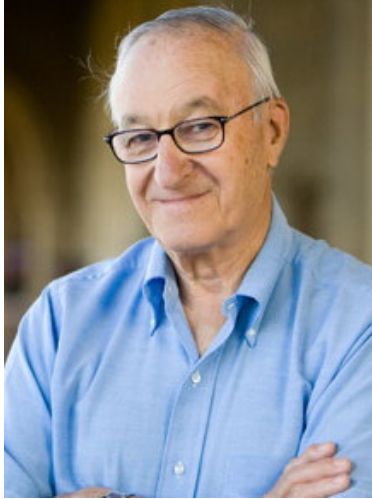


'People looking after themselves and each other'

Why should we care?

Self-management prepares people with chronic conditions for the 99% of the time they spend outside of the health care system

Self-Efficacy Theory and Why it is Important



Self-efficacy is one's belief that one can accomplish a specific task or behavior. It predicts future behaviors and health

Self-efficacy is built by:

- ▶ *Skills Mastery*
- ▶ *Modeling*
- ▶ *Reinterpretation of Symptoms*
- ▶ *Social Persuasion*

Further Art Refinement

Chronic Disease Self-Management:

A non-disease specific program



Intervention

- ▶ Face-to-face groups
- ▶ 6 weeks
- ▶ 2.5 hours/week
- ▶ 8-15 participants
- ▶ 2 peer facilitators
- ▶ Interactive - pair-and-share
- ▶ Based on Self-Efficacy theory
- ▶ Available in English, Spanish, Chinese and many other languages



Small Group Chronic Disease Self-Management Program - Randomized Trial

Demographic Data

- ▶ Age 62 years
- ▶ Male 27%
- ▶ Education 14 years
- ▶ # of diseases 2.2



Chronic Disease Self-Management

6-month Improvements in Health Outcomes

- ▶ Self-Rated Health
- ▶ Disability
- ▶ Social and Role Activities Limitations
- ▶ Energy/Fatigue
- ▶ Distress with Health Status
- ▶ **Fewer Days of Hospitalization**

All $p < .05$

20 YEARS

This slide represents 50 or more studies
between 1998 and 2019



National Study

- ▶ Longitudinal 1-year study
- ▶ 22 sites
- ▶ 1,100 people
- ▶ English and Spanish
- ▶ Under-represented over represented

CDSMP: Better Care

- ▶ Improved Communications with Physicians
- ▶ Improved Medication Adherence
- ▶ Improved Health Literacy

CDSMP: Better Outcomes

- ▶ Improved Self-Assessed Health
- ▶ Less PHQ-8 Depression
- ▶ Improved Quality of Life
- ▶ Fewer Unhealthy Physical Days
- ▶ Fewer Unhealthy Mental Health Days

CDSMP: Lower Health Care Costs

- ▶ Fewer people made ER Visits
- ▶ Decreased visits for those making visits

Diabetes Self-Management

- ▶ Similar to CDSMP with Diabetes-Specific Outcomes
- ▶ Available in English, Spanish and Chinese
- ▶ Taught by peers

Recent longitudinal study with Anthem
Participants were either online or in small groups
(N=approximately 1200)

1-Year Outcomes

Experience of Care

- ▶ A1c (for those $> 9\%$)
- ▶ Improved medication and lab testing adherence
- ▶ Improved depression



Cost Outcomes

- ▶ Return on investment approximately 2:1
- ▶ The intervention costs approximately \$400
- ▶ Health care saving costs per person are approximately \$800



20 Years After Translation to Practice Derivative Evidence-based Workshops

- ▶ Diabetes Self-Management (English/Spanish)
- ▶ HIV Positive Self-Management (English/Spanish)
- ▶ Pain Self-Management (English/Spanish)
- ▶ Cancer Thriving and Surviving (English/Spanish)
- ▶ Building Better Caregivers (English/Spanish)
- ▶ Online: CDSMP, Diabetes, Cancer, BBC

20 Years After the First Translation to Practice

- ▶ 35 countries
- ▶ 50 states
- ▶ Core component of ACL and CDC evidence-based programs for Seniors
- ▶ PAHO initiative
- ▶ Reach 50,000 to 75,000 people per year

Recent Findings

- ▶ Action-Planning
- ▶ Depression



Action-Planning

- ▶ Confidence (SE) in completing a plan predicted completion
- ▶ 7 is a good cut point to predict completion or non-completion
- ▶ Completing plans (but not making them) predicted future health care status and behavior outcomes

Depression

- ▶ Approximately 30% of all our study subjects over the years have been clinically depressed (PHQ 8-10)
- ▶ Self-management intervention for this group lowers depression by about 4.5 (*similar to anti-depressants*)

Now it's your turn. *Thanks!*

