

Feasibility of a peer support intervention in diabetes for South Asians living in the Greater Vancouver area

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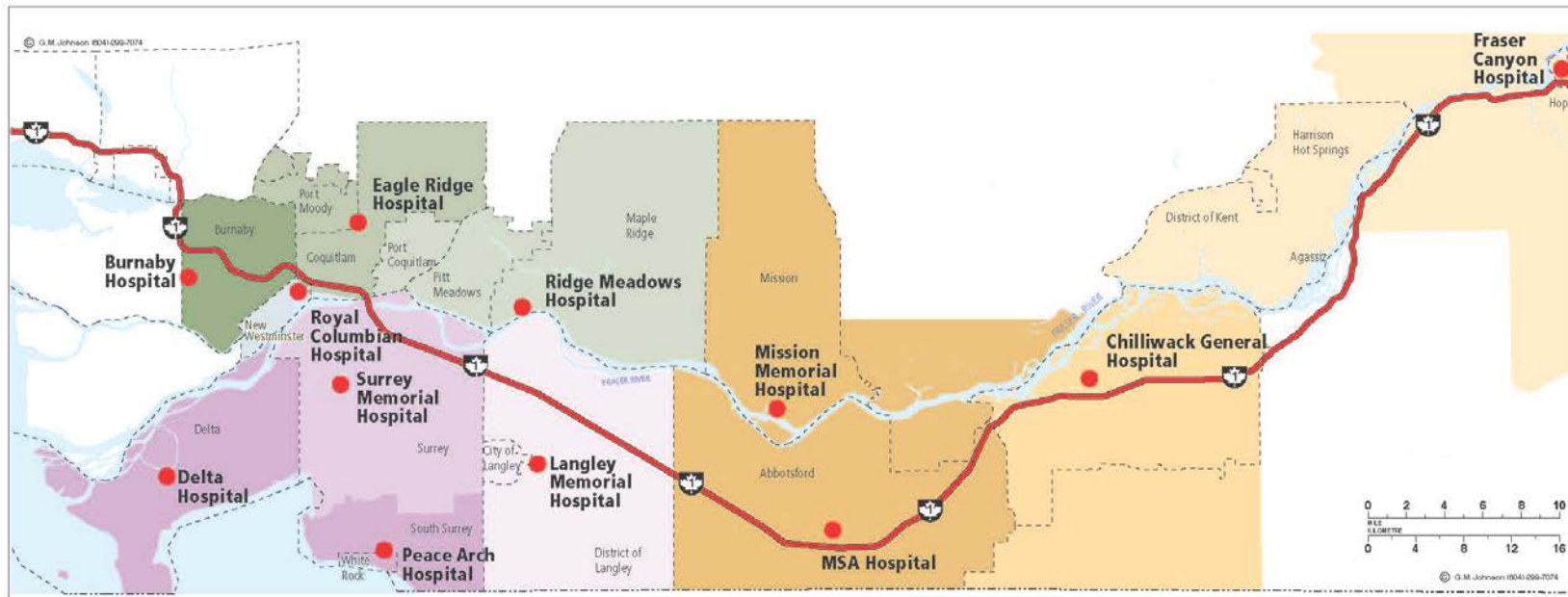
- Estimated population of 34,543,000
- Estimated 1,300,000 South Asians (2006 Census)





Fraser Health

- One of Canada's largest and fastest growing health authorities with over 26,000 employees, 2,500 physicians and nearly 6,500 volunteers.
- Health Authority serves more than 1.6 million people including 300,000 South Asians
- Health care services ranging from 12 acute care hospitals to community-based residential, home health, mental health and public health services.

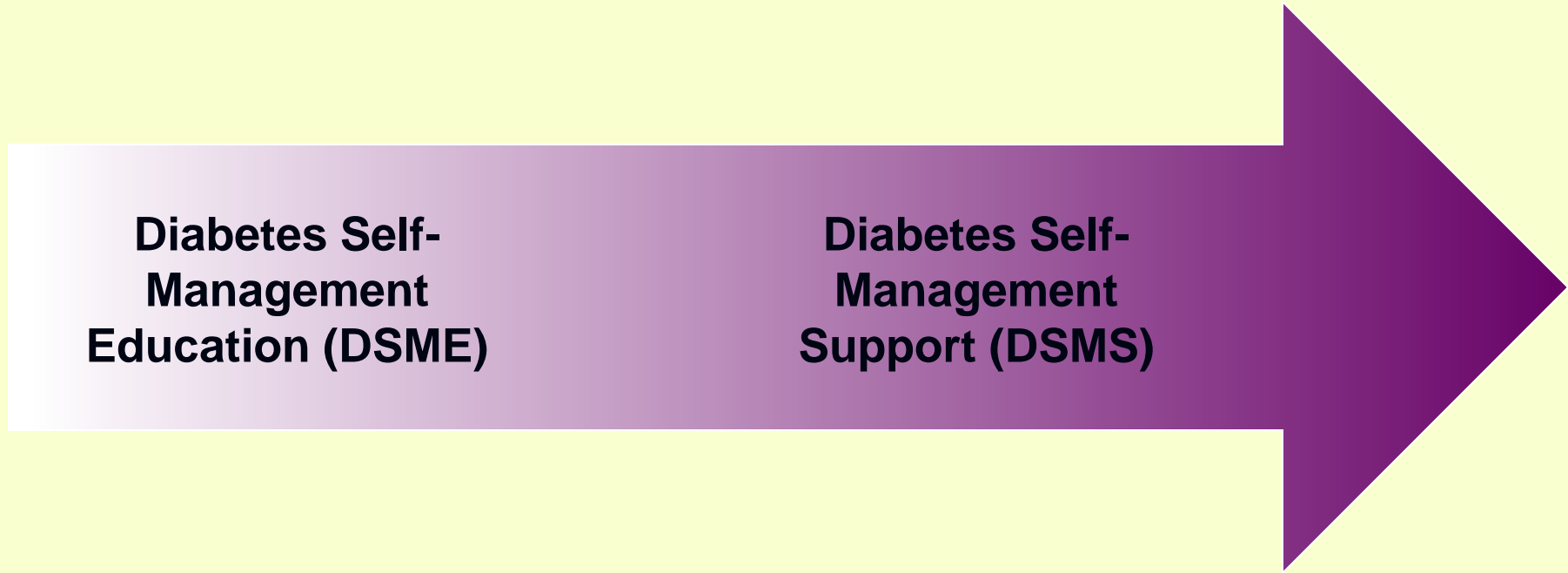


- Fraser Health is interested and committed in lowering the burden of cardiac disease and looking for projects that can help.

Diabetes Self-Care Continuum

**Diabetes Self-
Management
Education (DSME)**

**Diabetes Self-
Management
Support (DSMS)**



Effectiveness of Self-Management Training in Type 2 Diabetes

A systematic review of randomized controlled trials

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OBJECTIVE — To systematically review the effectiveness of self-management training in type 2 diabetes.

quality of life while keeping blood glucose levels manageable (3). One of the goals of the National Diabetes Prevention Program (NDPP) for the year 2010 is to increase to 40% (from the 1998 baseline of 40%) the proportion of individuals with diabetes who have received formal diabetes education (4). This review aims to assess the effectiveness of self-management training in type 2 diabetes, focusing on the impact of such training on knowledge and skills, self-management behaviors, and clinical outcomes (e.g., glycemic control, blood pressure, and lipid levels) and quality of life while keeping blood glucose levels manageable (3). One of the goals of the National Diabetes Prevention Program (NDPP) for the year 2010 is to increase to 40% (from the 1998 baseline of 40%) the proportion of individuals with diabetes who have received formal diabetes education (4). This review aims to assess the effectiveness of self-management training in type 2 diabetes, focusing on the impact of such training on knowledge and skills, self-management behaviors, and clinical outcomes (e.g., glycemic control, blood pressure, and lipid levels) and quality of life while keeping blood glucose levels manageable (3).

Portion control

Short-term gains



Portion control

Short-term gains



Long-term

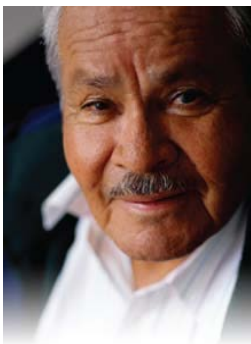


DSME models: Limitations

- **Time-limited**
- **Curriculum-driven**
- **Resource-intensive/Costly**

Time-limited

2009

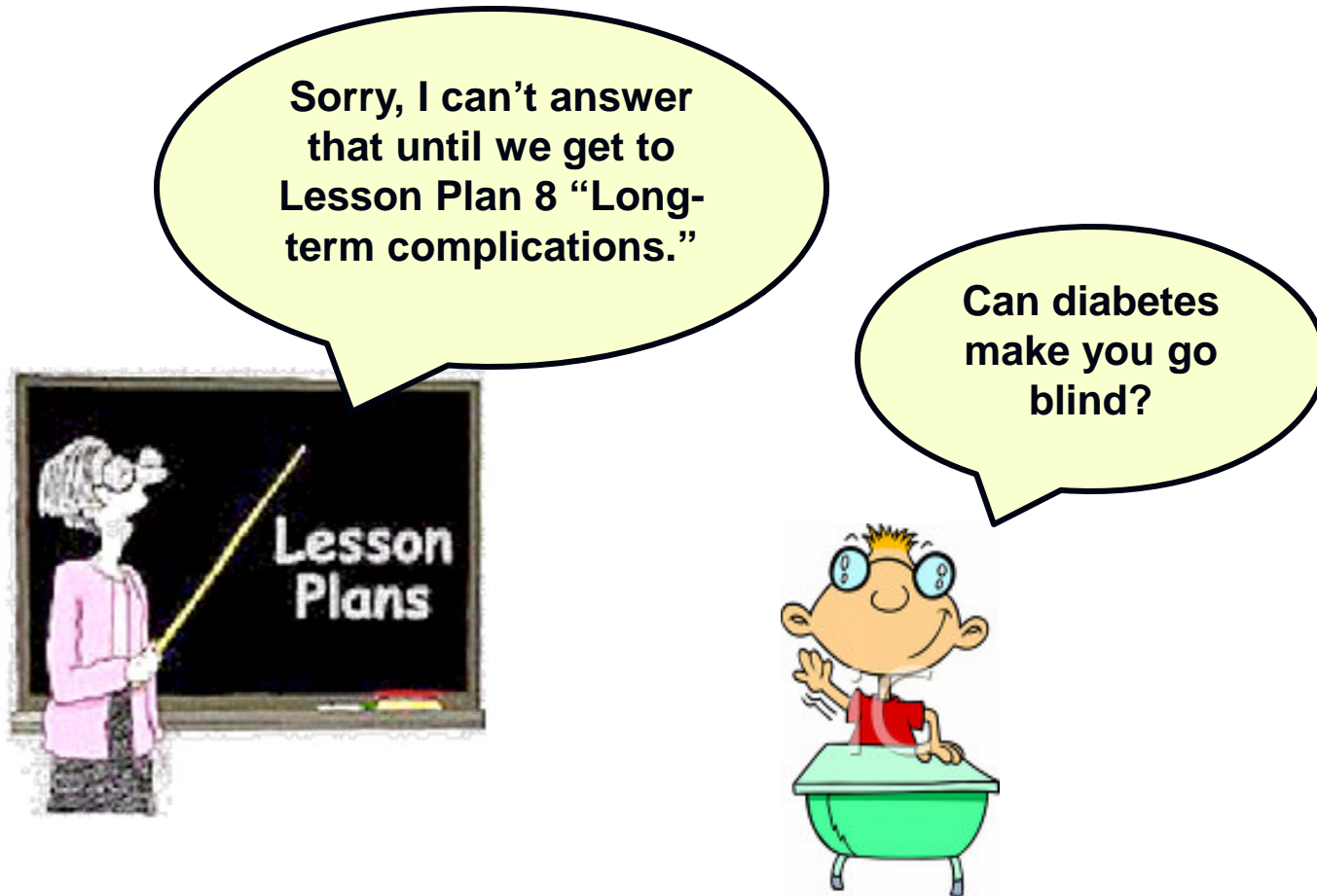


- May NOT exceed 10 hours
- one-time benefit for beneficiaries
- MD must document the specific medical need for follow-up training.
- Follow-up training cannot exceed 2 hours per year.

- ★
- ★ are costs
- ★ What Medicare covers
- ★ Health and prescription drug plans
- ★ Your Medicare rights
- ★ Fraud and identity theft



Curriculum-driven



During Lesson 1 "Healthy Eating," Homer asks a reasonable question.

Resource-Intensive

One CDE

1_super_mom_tat.gif 350x272 pixels



1,547 patients



Diabetes Self-Care Continuum

**Diabetes Self-
Management
Education (DSME)**

**Diabetes Self-
Management
Support (DSMS)**

- Time-limited
- curriculum-led
- Resource-intensive

- Ongoing
- Patient-led
- Low to no-cost

Peer Support

- Peer support is “the provision of emotional, appraisal, and informational assistance by a created social network member who possesses experiential knowledge of a specific behavior or stressor and similar characteristics as the target population”
- “Peer Leader” - term for person who provides peer support

Diabetes Self-Care Continuum

**Diabetes Self-
Management
Education (DSME)**

**Diabetes Self-
Management
Support (DSMS)**

**Certified Diabetes
Educator (CDE)**

- Deliver diabetes education
- Build motivation for change
- Teach skills for behavior change
- Provide support

Peer Leader (PL)

- Maintain motivation
- Sustain behavioral changes
- Provide ongoing support

Study Design

- In Phase one, we will culturally adapt, implement, and evaluate a program training PLs to facilitate empowerment-based diabetes self-management interventions.
- In Phase II we will use a single-group repeated measures design to examine the feasibility, acceptability, and potential health impact of a peer support intervention for diabetes self-management education (DSME) and ongoing diabetes self-management support (DSMS).

Formative Research

- Culturally tailor and adapt a peer support intervention
- Four focus groups
 - 6 to 8 participants
 - Key informants, Patients, Potential PLs
- Discussion Topics
 - Features of an effective program
 - Use of Peer Leaders
 - Evaluate proposed program

PHASE ONE: Objectives

- To culturally adapt and implement a program training Peer Leaders (PLs) to facilitate empowerment-based interventions that support DSME and long-term DSMS for SA adults with type 2 diabetes.
- To determine the feasibility and acceptability (e.g., recruitment, attendance, retention, future intentions) of this training program to facilitate empowerment-based diabetes self-management interventions.
- To determine the feasibility of graduating at least 6 PLs who fulfill the competency-based criteria to become a PL.

PHASE TWO: Objectives

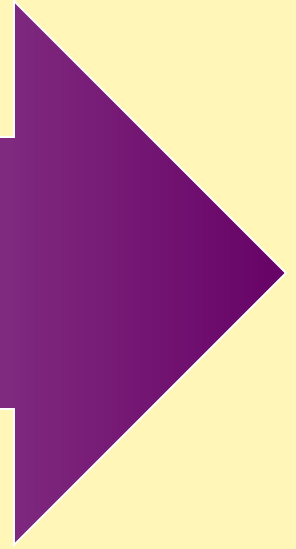
- To determine the feasibility and acceptability of conducting an 8-month peer support DSME and DSMS intervention (2 months of DSME followed by 6 months of peer-led DSMS) for SA adults with type 2 diabetes.
- To examine at 2-months, the impact of the DSME component of the peer support intervention on clinical outcomes.
- To examine whether gains achieved from the first 2 months of the DSME component of the peer support intervention are sustained at 8 months (post 6-month DSMS component).

PLEASED

8-month intervention

**Diabetes Self-
Management
Education (DSME)**

**Diabetes Self-
Management
Support (DSMS)**



PLEASED

8-month intervention

Diabetes Self-
Management
Education (DSME)

Diabetes Self-
Management
Support (DSMS)



2 months of
professionally-led
DSME

PLEASED

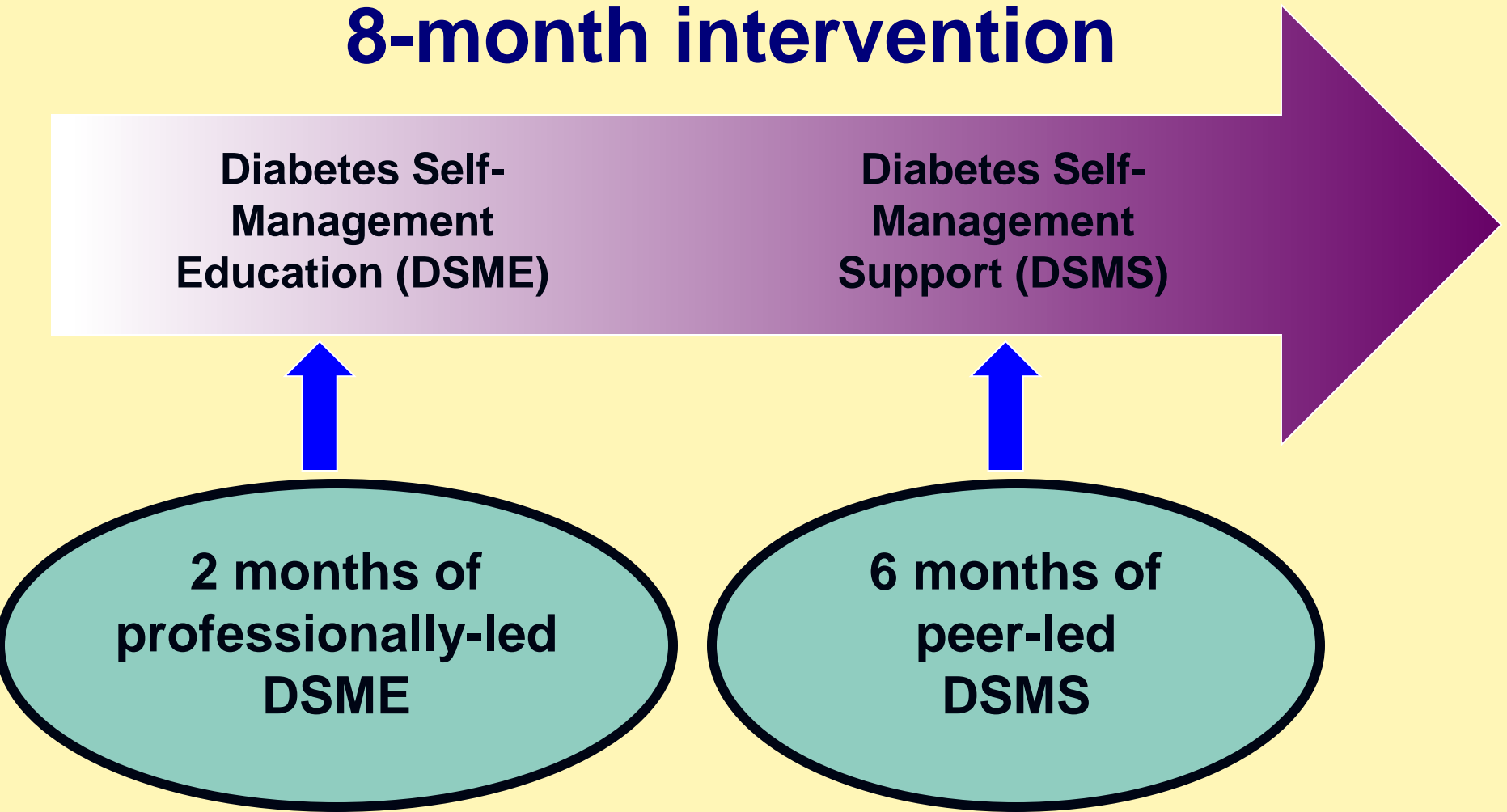
8-month intervention

Diabetes Self-
Management
Education (DSME)

Diabetes Self-
Management
Support (DSMS)

2 months of
professionally-led
DSME

6 months of
peer-led
DSMS



2 months of DSME

CDE



Peer Leader

Peer Leader

- Peer leaders' goals
 - Build motivation
 - Goal setting
 - Action planning
 - Problem solving
 - Emotional support
- Peer leaders' activities
 - One-on-one support
 - Telephone support
 - Group sessions

6 months of DSMS



Peer Leaders

- Peer leaders' goal
 - Sustain motivation & behavior change
- Group-based support
- Support Process
 - Discussing a challenge
 - Recognizing feelings
 - Problem-solving
 - Addressing questions
 - Goal-setting

Recruitment Approaches

- Contact graduates of previous DSME programs
- Referrals from physicians and community leaders



Can YOU Be a PEER Leader in Diabetes?

What is a PEER LEADER?

A **PEER LEADER** in diabetes is a person who has diabetes, understands the challenges of managing diabetes, and shares a similar background (e.g., values, beliefs, traditions) to the community we are trying to help.

Are you interested in helping others take better care of their diabetes? If so, we are looking for people in the Greater Vancouver area who are interested in becoming a Peer Leader in diabetes.

What qualities does a PEER LEADER have?

The qualities we are seeking in a **PEER LEADER** include being:

- A good listener
- Non-judgmental
- Patient
- Responsible
- Dependable
- Honest
- Considerate
- Understanding
- Supportive

What would I be expected to do as a PEER LEADER?

As a **PEER LEADER**, you will be expected to do the following:

- Provide social and emotional support
- Support self-management efforts
- Link participants to resources
- Assist participants in addressing barriers to behavior change
- Provide basic diabetes education
- Make follow-up phone calls
- Work one-on-one with each participant
- Help participants build and maintain motivation to make changes
- Assist participants in setting and achieving their own behavioral goals
- Assist participants in making an action plan
- Assist participants in problem-solving

If you are interested in becoming a PEER LEADER, please turn the page to

Eligibility Screening



program?

What? A 10-session training program that will teach people how to become a **PEER LEADER** and facilitate a diabetes self-management intervention.

What is the time commitment of a PEER LEADER?

- Attend a 10-session training program (3 hours per session; 30 hours in total)
- Lead a 8-month weekly self-management intervention

What are the benefits of becoming a PEER LEADER?

- Give back to the community
- Help other people with diabetes live happy and healthy lives
- Receive a monetary stipend for attending 10-session training program
- Receive a monetary stipend for leading a weekly self-management group for 8-months

To inquire to be a PEER LEADER in diabetes, please call the telephone number (604)-754-7685 email: diabetes@vch.ca and ask about the PEER LEADER study.



- Have diabetes or caregiver
- Be of South Asian background
- Be a resident of the Greater Vancouver
- Be ≥ 25 years old
- Have transportation to attend training
- Be bilingual
- Be willing to commit 10 sessions for training

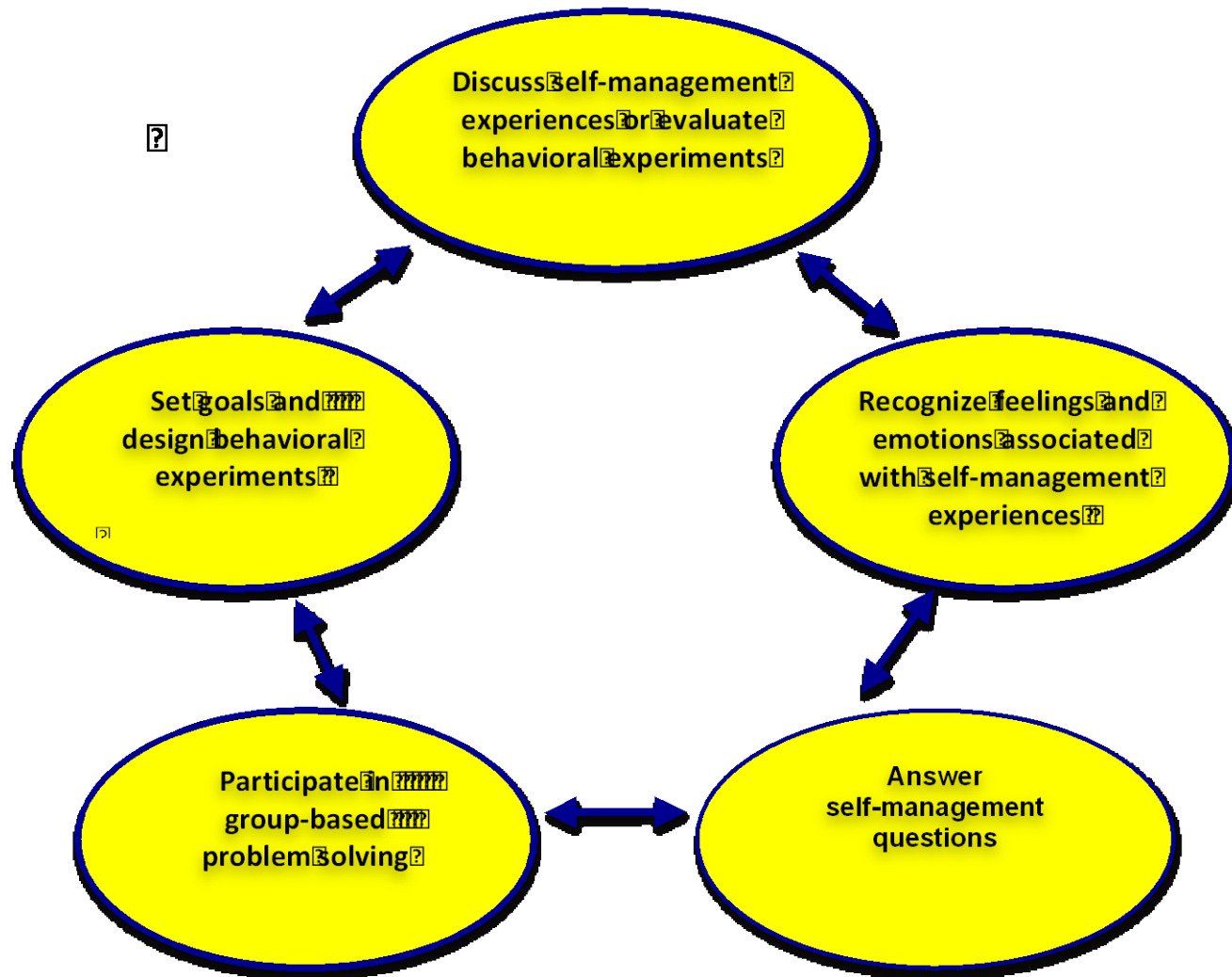
Procedure

- Enrollment session
- Description of study
- Clinical measures
 - Blood draw
 - Height
 - Weight
 - Blood pressure
- Self-report survey
 - 45-60 minutes
- \$50 subject incentive

Measures

- Clinical
 - A1C
 - Blood pressure
 - Lipid panel
- Self-care
 - Summary of Diabetes Self-Care Assessment-revised
 - healthy eating, physical activity, monitoring, foot care, medication/insulin
- Psychosocial
 - Diabetes-specific quality of life: Diabetes Distress Scale
 - Empowerment: Diabetes Empowerment Scale – Short-form

2-month DSME process



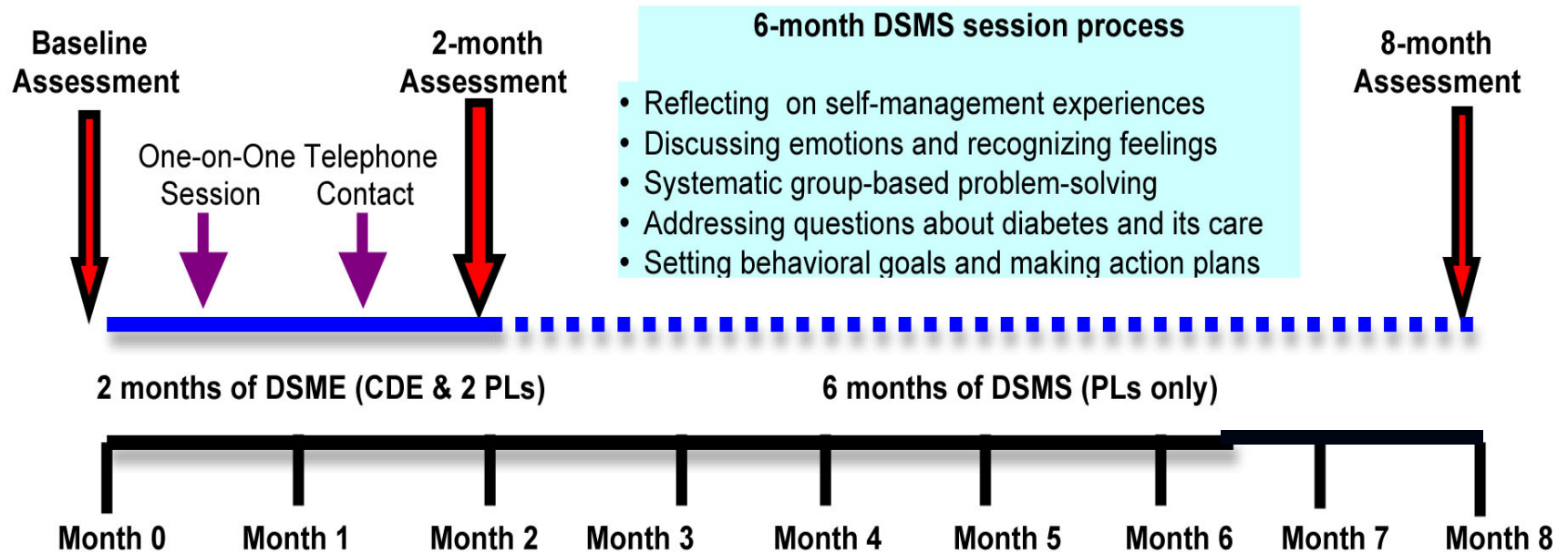
2-month DSME

- Short-term
 - 8 weekly sessions (60-minutes)
- Flexible
 - Community-based location
 - Offered AM and PM
 - Participants attend as frequently as needed
- Responsive to individual needs
 - Patient-led (vs. curriculum-led)
- Co-led by a CDE and two Peer Leaders

6-month Peer-led DSMS

- Ongoing and long-term
 - 24 weekly sessions (60-minutes)
- Flexible
 - Community-based location
 - Offered AM and PM
 - Participants attend as frequently as needed
- Responsive to individual needs
 - Patient-led (vs. curriculum-led)
- Co-led by two Peer Leaders

Figure 4: Timeline and description of peer support intervention component



Summary

- DSME lead to short-term health improvements
- DSME models are needed to promote lifelong self-management
- Peer support has the potential to be effective and cost-effective