

# An Investigation of the Chronic Disease Self-Management Program

## *Assessing CDSMP Facilitators' Perceptions of the Program's Effect*

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## INTRODUCTION

The rising numbers of older adults means an increased need for chronic disease management programs. The use of community peer leaders and trainers is becoming more popular in light of rising health care costs, the lack of community health interventions, and the decrease in health resources.

- Chronic Disease Self-Management Program (CDSMP)
  - Innovative, evidence-based program
  - Actively uses community lay leaders
  - Encourages strategic self-management skills training

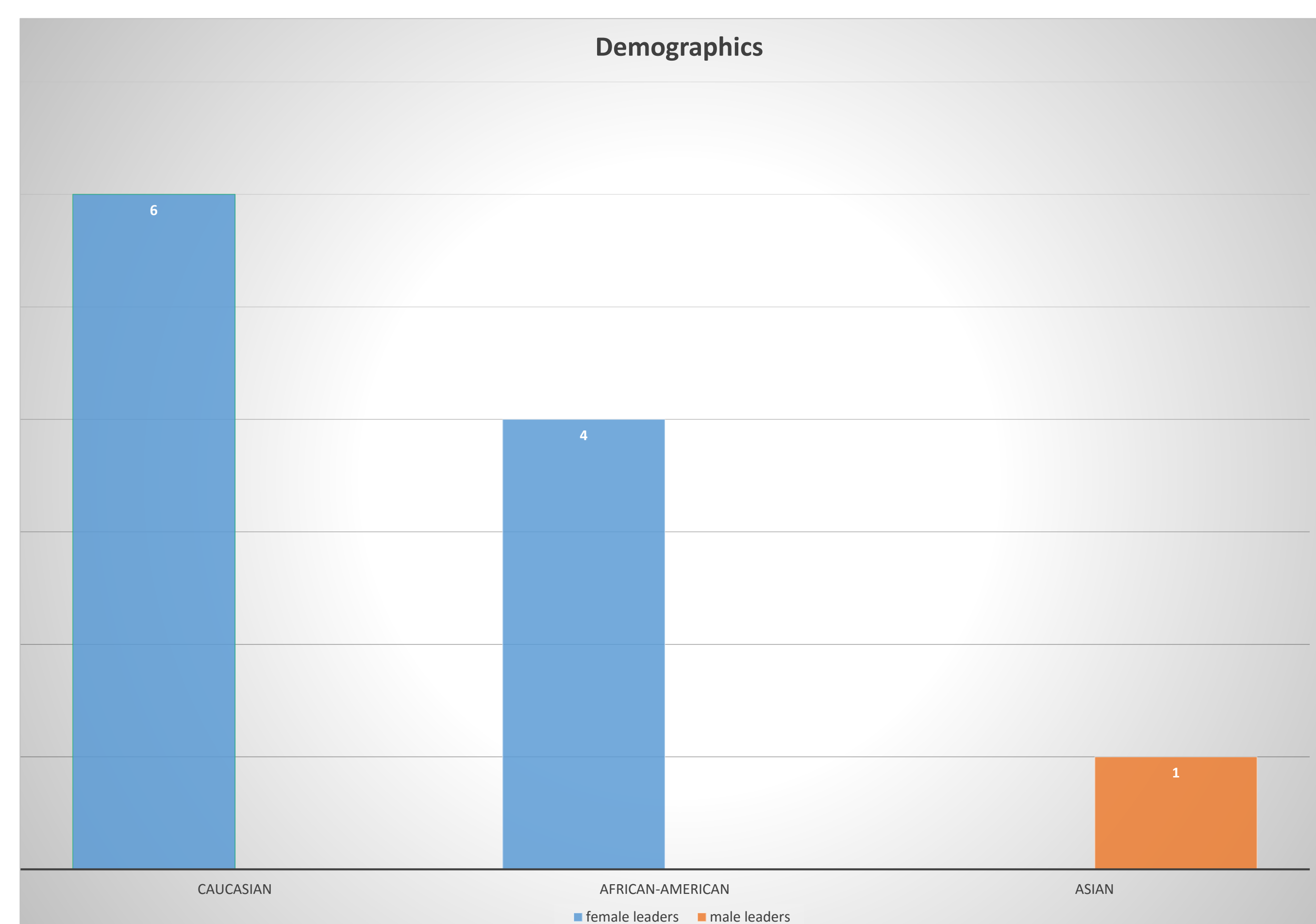
The popularity of the CDSMP has prompted the need to explore the views, opinions, and beliefs of the services the leaders and trainers provide and how these perceptions affect their own quality of health.

## METHODS

The data collection method involved a telephone interview protocol:

- Informed participant of the study's purpose
- Participants were notified they may leave the study at any time
- Researcher obtained the participants views, opinions, and thoughts around being a leader of the CDSMP
- Interviews lasted less than 1 hour each

Data analysis focused on coding—in the tradition of content analysis—such that themes and commonalities were meaningfully identified.



## RESULTS

### RQ1:

**What are the perceptions of CDSMP facilitators towards the health benefits of the program?**

Sub question:

*What are the perceptions of CDSMP facilitators toward their own health habits?*

#### Themes

The CDSMP program benefits health in general  
The CDSMP program helps manage chronic disease  
Facilitator health behaviors

- The CDSMP program benefits health in general

Participant empowerment  
Learning a new useful skill  
Awareness of new abilities

#### Leader's perception

Useful stress reduction tools  
Breathing techniques  
Increased awareness of responsibility to model techniques

- The CDSMP program helps manage chronic disease

Improvement seen during the 6 week program

#### Leader's perception

Gained control  
No decline in current state of health  
Medication management

- Facilitator health behaviors

Scarce recall of past behaviors  
Perceptions of undesirable habits were few.  
Before facilitating the CDSMP, there was no consideration of current health habits.

### RQ2:

**How has facilitating the CDSMP changed the health habits of the facilitator?**

Sub question:

*What are the perspectives of CDSMP facilitators toward their own quality of life living with a chronic condition?*

#### Themes & Sub-Themes

Facilitators gained healthy habits  
The program increased facilitators' quality of life

- Facilitators gained healthy habits

*"I'm more aware."*  
*"My diet has improved."*  
*"The program might help facilitators the most."*

- ✓ Ease of integration and use
- ✓ Confidence improved in successfully completing tasks
- ✓ Gentle integration to habitual change
- ✓ Having "choices" to make healthier decisions
- ✓ Adopting model behavior
- ✓ Increased frequency in leading classes enhanced commitment to change.
- ✓ Trusted information

- The program increased facilitators' quality of life

*"I love watching learners' live improve."*  
*"I'm less stressed."*

- ✓ Familiarity with concepts
- ✓ Adoption of techniques
- ✓ Self-fulfillment
- ✓ Integration in current role
- ✓ Socialization
- ✓ Pre-cursors for stress
- ✓ Coping mechanisms

## CONCLUSIONS

- Will supplement to the body of knowledge on CDSMPs.
- Administrators of the program have a conceptual understanding of the benefits.
- May influence other leaders to adopt additional recruitment efforts.
- May decrease operating costs with the advent of peer volunteers.

## CLINICAL IMPLICATIONS

- Sustainment
- Improvement
- Reduction of overall medical costs
- A deeper understanding of peer led interventions
- Promotion of effective leadership strategies
- Recruitment of new and old leaders
- Revitalization of old leaders that haven't led in a while.

## REFERENCES

All associated references can be found in the original document at:  
<http://scholarworks.waldenu.edu/dissertations/3105/>

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