

Diabetes self-management, support improve health outcomes in underserved communities

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Even in communities with barriers to health care, exercise opportunities and healthy food, residents with diabetes saw improved health outcomes when they participated in programs that took a coordinated care approach to diabetes self-management.

These were the findings of evaluations of such community health efforts in several U.S. communities by researchers at the University of Kansas Work Group for Community Health and Development. Lead by Co-Director Jerry Schultz, the group is evaluating [Together on Diabetes](#), a nationwide initiative funded by the Bristol-Myers-Squibb Foundation to benefit underserved adult populations disproportionately affected by Type 2 [diabetes](#). As part of their role, the Work Group also developed a monitoring and evaluation system that the 25 intervention projects used to document and systematically reflect on project implementation and sustainability.

Work Group graduate research assistants Ithar Hassaballa and Charles E. Sepers Jr., led evaluations of two diabetes interventions in five communities across the country. Both projects reported improved clinical outcomes for participants including reductions in diastolic blood pressure, BMI, body mass index and HbA1c, glycated hemoglobin or blood sugar levels.

Hassaballa published an evaluation of a diabetes care coordination program for 148 African-American women with Type 2 diabetes who lived in public housing in Boston's Roxbury neighborhood. The Whittier

Street Health Center's clinical team provided diabetes self-management education, support and comprehensive diabetes care through a patient-centered medical home, and employed "Diabetes Health Ambassadors," an innovative approach to engaging residents. The ambassadors were African-American women who lived in Roxbury public housing and had Type 2 diabetes, just like the women the project targeted, with the important difference that their diabetes was well-controlled.

While the Whittier Street project reported modest improvements in diabetes-related clinical outcomes, Hassaballa concluded that using Diabetes Health Ambassadors for program delivery has important implications for assuring quality [diabetes care](#) for women living in public housing.

"In a world where resources are limited, it's important to engage community members as champions for diabetes education and support. That way, they are active participants in the provision of care and can play an important role in assuring that interventions fit the context of the local people," said Hassaballa.

Sepers was lead author of an assessment of a coordinated care approach to diabetes management that was a demonstration project of the American Association of Diabetes Educators. The intervention was implemented in four patient-centered medical homes in Jacksonville, Florida; Athens County, Ohio; Oklahoma City and Nashville, Tennessee, all with higher than average rates of diabetes. The approach focused on coordinated care along with diabetes self-management education and self-management support by community health workers for 173 patients. Almost 70 percent of the patients were African-American, and 26 percent were Caucasian. Within six months, there was a significant decrease in A1c and BMI at one of the locations that was associated with the frequency of services.

"This research provides support for improving patient outcomes through a patient-centered care approach that features nonclinical staff like [community health](#) workers," Sepers said. "These types of innovations are necessary to build the health care capacity to keep pace with the growing number of medically underserved Americans experiencing diabetes and other chronic diseases."

"Type 2 diabetes is more common among African-Americans, Latinos, Native Americans and other vulnerable populations than among whites," Schultz said. "The Together on Diabetes initiative supported the development of innovative interventions targeting these groups. Because the disease burden is so great and to have an impact on the problem, it is critical that new, innovative and effective approaches be developed and shared with clinics and communities across the country."

More information: Evaluation of a Diabetes Care Coordination Program for African-American Women Living in Public Housing. www.turner-white.com/pdf/jcom_aug15_diabetes.pdf

Provided by University of Kansas

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