

COMPLEMENTARY PROGRAMS TO SUPPORT SELF-MANAGEMENT FOR PEOPLE WITH DIABETES

The evidenced-based Stanford Chronic Disease Self-Management Program (CDSMP) known as **Living Well with Chronic Conditions** in Wisconsin compliments the American Diabetes Association Diabetes Self-Management Education (DSME) Program. The differences between these two programs are explained below.

DSME	CDSMP
Specific to diabetes	Addresses all chronic conditions
Participants all have diabetes	Participants have a variety of chronic conditions
Focuses on knowledge, skills and problem solving	Focuses on problem solving/action planning
Is content-oriented	Is process-oriented
Professional educators	Lay person who has chronic condition
Focuses on medical management and self-management of disease	Focuses on management of lifestyle behaviors and integrates emotional aspects
10 hours (1-2 hours individual counseling; 8-9 hours in group)	15 hours, all in group (2.5 hours/week for 6 weeks)
Standard content for ADA recognized DSME programs to implements national standards	Content scripted with no deviation; timed processes for each session
Content areas: <ul style="list-style-type: none"> • Diabetes disease process and treatment options • Incorporating nutrition management, physical activity, and utilizing medication(s)/insulin • Monitoring blood glucose and using results to self-manage and improve control • Preventing, detecting, and treating acute and chronic complications • Goal setting and problem solving • Integrating psychosocial adjustment • Preconception care and management during pregnancy (if applicable) 	Content areas: <ul style="list-style-type: none"> • Anger, frustration, fear, stress, anxiety • Techniques to deal with problems such as fatigue, pain, and isolation • Appropriate physical activity for strength, flexibility, and endurance • Using medications appropriately • Communicating effectively with family, friends, and health professionals • Overcoming barriers to healthful eating • Evaluating new treatments

DSME addresses more content in fewer hours, typically engaging people soon after diabetes is diagnosed. Hence, the focus is on gaining knowledge/skills for diabetes self-management and solving problems. DSME and CDSMP complement each other, and provide disease-specific knowledge and skills along with practical problem-solving and action planning.

CDSMP is a good complement to the ADA recognized DSME programs because people who have diabetes typically have other chronic conditions and stressful issues at home competing for their time and attention. Compared to diabetes “support” groups, the CDSMP has more structure and accountability.

Adapted from Vermont Department of Health 3/17/05