

# **CHRONIC DISEASE SELF-MANAGEMENT PROGRAM (CDSMP)**

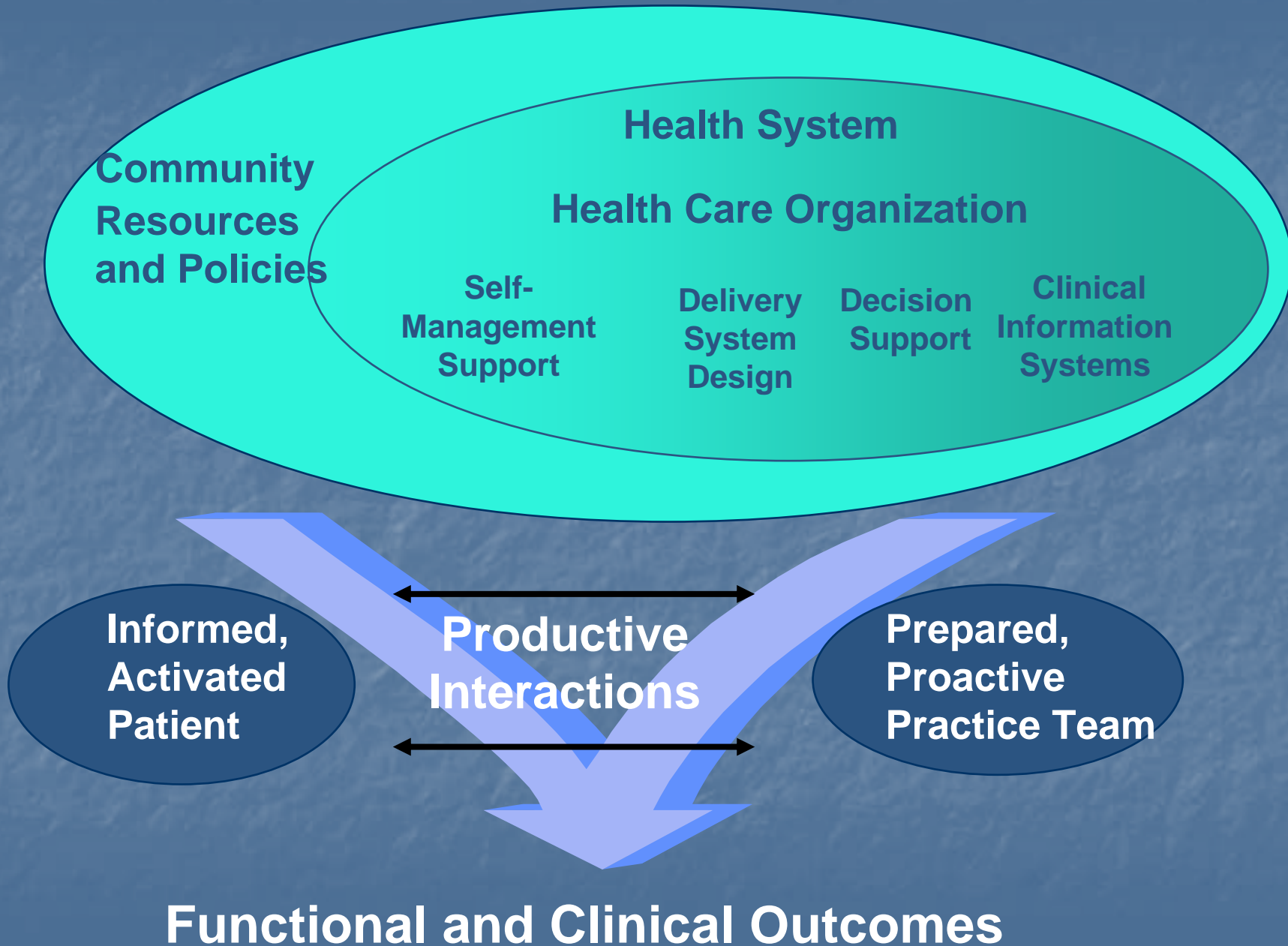
*“Living a Healthy Life with  
Chronic Conditions”*

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**University of Victoria - Centre on Aging**



# BC'S CHRONIC CARE MODEL



# DIFFERENCES BETWEEN ACUTE & CHRONIC DISEASE

	ACUTE DISEASE	CHRONIC DISEASE
<b>BEGINNING</b>	Rapid	Gradual
<b>CAUSE</b>	Usually one	Many
<b>DURATION</b>	Short	Indefinite
<b>DIAGNOSIS</b>	Commonly accurate	Often uncertain, especially early
<b>DIAGNOSTIC TESTS</b>	Often decisive	Often of limited value
<b>TREATMENT</b>	Cure common	Cure rare
<b>ROLE OF PROFESSIONAL</b>	Select and conduct therapy	Teacher and partner
<b>ROLE OF PATIENT</b>	Follow orders	Partner of health professionals, responsible for daily management

# **NEW TASKS**

- 1. Recognize and act on symptoms**
- 2. Make most effective use of medications and treatments**
- 3. Deal with acute attacks or exacerbations (manage emergencies)**
- 4. Maintain nutrition and diet**
- 5. Maintain adequate exercise**
- 6. Give up smoking**
- 7. Use stress reduction techniques**
- 8. Interact effectively with health care providers**
- 9. Use community resources**
- 10. Manage work and the resources of employment services**
- 11. Manage relations with significant others**
- 12. Manage psychological responses to illness**

# TRADITIONAL PATIENT EDUCATION

- **Asthma**
  - Proper use of inhaler
  - Self-monitoring
  - Environmental control measures
- **Diabetes**
  - Insulin injection
  - Blood-glucose monitoring
  - Healthy eating (glucose levels)
- **Heart disease**
  - Medication
  - Information on pacemakers, arrhythmias, chest pain, acute complications
  - healthy eating (cholesterol)
- **Rheumatoid arthritis**
  - Medication
  - Joint protection & use of adaptive equipment

# PATIENT CONTACT WITH HEALTH PROFESSIONALS

- GP visits per annum = 1 hour
- Visits to specialists = 1 hour
- PT, OT, Dietitian = 10 hours
- Total = 12 hours with professionals
- 364.5 days or 8,748 hours managing on their own



Barlow, J. Interdisciplinary Research Centre in Health, School of Health & Social Sciences, Coventry University, May 2003.

# IMPORTANT REALIZATIONS

- Clinicians are present for only a small fraction of the time
- Almost all outcomes are mediated by the person's behaviours



# DEFINITION OF SELF-MANAGEMENT

The tasks that individuals must undertake to live well with one or more chronic conditions. These tasks include having the confidence to deal with medical management, role management, and emotional management of their conditions.

- No matter what we do, we are managing our chronic conditions. Our choice is to be a **PASSIVE** or an **ACTIVE SELF-MANAGER**.
- An **ACTIVE SELF-MANAGER** is willing to take on these self-management tasks:
  - Taking care of their health problems
  - Carrying out normal activities
  - Managing emotional changes

# **THE CHRONIC DISEASE SELF-MANAGEMENT PROGRAM (CDSMP)**

***“Living a Healthy Life with  
Chronic Conditions”***

# OVERVIEW OF THE CHRONIC DISEASE SELF-MANAGEMENT PROGRAM (CDSMP)

1. Does not replace traditional patient education
2. Persons with any ongoing or recurrent health issues attend together
3. Self-referral
4. Family members, friends and caregivers are welcome

5. Led by pairs of lay persons with chronic health conditions
6. Leaders attend a 4-day CDSMP Leader Training workshop
7. Leaders follow a scripted Leader's Manual
8. Program is 2 ½ hours, once a week for six consecutive weeks (6 sessions total)
9. Ideal group size is 10 to 12 persons

10. Courses are delivered in community based settings
11. Participants receive “Living a Healthy Life with Chronic Conditions” reference book
12. No cost to participants
13. Highly interactive – participants learn from each other
14. Evaluated for long-term outcomes

## Living a Healthy Life

People with long-term conditions such as heart disease, diabetes, emphysema, asthma, and arthritis face challenges every day. Not only must they manage their condition medically, they must also maintain the ability to do the simple things life requires of them each day. At the same time, they often need to deal with the frustration, anger and depression that can accompany any chronic health problem.

This is a revised edition of the original classic work, prepared specifically for Canada. The information gathered in a 5-year study at Stanford University to develop this work includes the input of hundreds of people with long-term health conditions. The new material includes updated information and totally revised sections on nutrition, exercise, working with health-care professionals and the health care system, and new information on using the power of the mind to help manage symptoms. In addition, the authors have added a new chapter on sexual intimacy as well as the latest information on specific diseases.

The simple goal of this book is to help people to live the best possible life with a long-term condition.

**Kate Lorig, RN, DrPH**, is Director and Associate Professor at the Stanford University School of Medicine's Patient Education Research Center.

**Halsted Holman, MD**, is a Professor of Medicine at Stanford University School of Medicine.

**David Sobel, MD**, is Director of Patient Education and Health Promotion, Kaiser Permanente Medical Care Program, Northern California Region.

**Diana Laurent, MPH**, and **Virginia Gonzalez, MPH** are Health Educators at Stanford Patient Education Research Center.

**Marian Minor, RPT, PhD**, is Assistant Professor at the University of Missouri, Department of Physical Therapy.

Canadian content added by **Patrick McGowan, PhD**



COVER PHOTO BY MICHELE BEE

Living a Healthy Life with Chronic Conditions

CANADIAN EDITION

"A remarkable resource for anyone with any chronic health problem." —American Lung Association



# Living a Healthy Life with Chronic Conditions

Self-Management of Heart Disease,  
Arthritis, Diabetes, Asthma,  
Bronchitis, Emphysema and others

**Kate Lorig, RN, DrPH, Halsted Holman, MD**  
**David Sobel, MD, Diana Laurent, MPH**  
**Virginia Gonzalez, MPH, & Marian Minor, RPT, PhD**  
Canadian Content by **Patrick McGowan, PhD**



Living a Healthy Life  
With Chronic Conditions  
Self-Management Course

# LEADER'S MANUAL



 BRITISH  
COLUMBIA  
BC MINISTRY OF HEALTH

 CENTRE  
ON AGING  
UNIVERSITY OF VICTORIA



# Symptom Cycle



4

Poor me  
Life's great  
I can't do  
I can't teach  
I'm too  
I'm too  
Sucks  
wild  
of the

### Signs for Diagnosis of Stroke

Change in  
consciousness  
sudden weakness  
sudden feeling  
numbness of  
face, arm  
sudden  
change in  
vision  
sudden  
change in  
speech

What are some things you can do  
to manage or avoid risk factors of stroke?

- low sodium
- exercise
- manage
- medication
- avoid acidic coffee
- alcohol
- lose weight
- avoid salt and  
sugar
- quit smoking
- drink
- breathing exercises
- take vitamins

# PERCEIVED SELF-EFFICACY

“One’s belief that one can perform a specific behaviour or task in the future”

Dr. Albert Bandura

# **SELF-EFFICACY : HEALTH OUTCOMES**

Coping with challenges requires confidence in one's ability to use certain skills and the belief that these skills will produce desired outcomes.

# **SELF-EFFICACY AFFECTS EVERY PHASE OF BEHAVIOUR CHANGE**

- **Whether one even considers changing a behaviour**
- **How much one benefits from the changed behaviour**
- **How well one maintains the change achieved**
- **How vulnerable one is to relapse**

# **SELF-EFFICACY ENHANCING STRATEGIES**

- **Mastery learning**
- **Modeling**
- **Reinterpreting symptoms**
- **Persuasion**

# WHAT DO PEOPLE LEARN IN SELF-MANAGEMENT PROGRAMS?

## PRACTICAL SKILLS

- Getting started skills
- Problem-solving skills
- Communication skills
- Working with health care professionals
- Dealing with anger/fear/frustration
- Dealing with depression
- Dealing with fatigue
- Dealing with shortness of breath
- Evaluating treatment options

# WHAT DO PEOPLE LEARN...(cont'd)

## COGNITIVE TECHNIQUES

- Self-talk
- Distraction
- Relaxation techniques

## INFORMATION

- From the program
- From other participants





Northern Health Authority

Vancouver Coastal Health Authority

Interior Health Authority

Vancouver Island Health Authority

Fraser Health Authority

# BC COMMUNITIES WHERE CDSMP HAS BEEN IMPLEMENTED

100 Mile House	Abbotsford	Agassiz	Alkali Lake	Armstrong	Ashcroft
Atlin	Avola	Bella Bella	Bella Coola	Burnaby	Campbell River
Canyon City	Castlegar	Chase	Chemainus	Chilliwack	Clearwater
Comox	Coquitlam	Courtenay	Cowichan	Cranbrook	Creston
Dawson Creek	Duncan	Enderby	Falkland	Fort Nelson	Fruitvale
Gitsegukla	Golden	Gold River	Greenville	Hazelton	Hope
Iskut	Kamloops	Kaslo	Kelowna	Kitkatla	Kitimat
Kyoquot	Ladner	Ladysmith	Langford	Langley	Lillooet
Logan Lake	Madeira Park	Maple Ridge	Masset	Mission	Moricetown
Mount Currie	Nanaimo	Nelson	New Aiyansh	New Hazelton	New Westminster
North Delta	North Saanich	North Vancouver	Parksville	Pemberton	Pender Island
Penticton	Port Coquitlam	Port Hardy	Port McNeill	Port Moody	Port Simpson
Powell River	Prince George	Prince Rupert	Proctor	Qualicum Beach	Quesnel
Revelstoke	Richmond	Saanich	Salmo	Salmon Arm	Saltspring Island
Sechelt	Sicamous	Sidney	Smithers	Sointula	Sooke
Sorrento	Spences Bridge	Squamish	Stewart	Surrey	Terrace
Texada Island	Tofino	Tumbler Ridge	Valemount	Vancouver	Vernon
Victoria	West Vancouver	Williams Lake	White Rock		

# CDSMP IMPLEMENTATION IN BC

	<b>2003/ 2004</b>	<b>2004/ 2005</b>	<b>2005/ 2006</b>	<b>2006/ 2007</b>	<b>2007/ 2008</b>	<b>Total</b>
<b>Leader Training Workshops</b>	<b>24</b>	<b>22</b>	<b>19</b>	<b>19</b>	<b>19</b>	<b>103</b>
<b>Leaders Trained</b>	<b>267</b>	<b>248</b>	<b>191</b>	<b>213</b>	<b>221</b>	<b>1140</b>
<b>6-Session Participant Workshops</b>	<b>92</b>	<b>149</b>	<b>145</b>	<b>147</b>	<b>141</b>	<b>674</b>
<b>Participants</b>	<b>1070</b>	<b>1693</b>	<b>1605</b>	<b>1494</b>	<b>1508</b>	<b>7370</b>

# **CDSMP CONTACT INFORMATION**

**TOLL-FREE LINE IN BC:**

**1-866-902-3767**

**WEBSITE:**

**[www.coag.uvic.ca/cdsmp](http://www.coag.uvic.ca/cdsmp)**

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