

# Identification of Reliable Measures of Outcomes: Consensus Measures of Outcomes and Key Mediators of Benefits of Peer Support in Diabetes Management

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*August 4, 2010*



**Peers for Progress**

*Peer Support Around the World* | DIABETES

# Outline

- In the context of Peers for Progress, describe a participatory process for determining a consensus set of cross-site evaluation measures
- Examine such cross-site evaluation measures, indicators, tools, and instruments
- Consider challenges and opportunities related to the consistent documentation of peer support's contribution to diabetes self-management and, more broadly, the idea of core, shared measures that are then applicable to other areas

# Peers For Progress

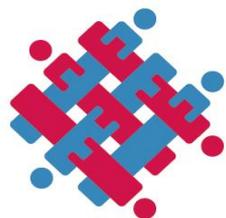


- Accelerate and promote best practices in peer support as a regular part of health care and prevention around the world
- Responsive both to the promise of peer support and need for further research
  - Better self-management will have far greater impact on population health than improvement in specific medical treatment (WHO, 2003)
  - WHO Consultation on Peer Support Programmes in Diabetes (2008)

## EVIDENCE

Reliable,  
Up-to-Date  
Information on  
Peer Support

Program  
Models,  
Materials for  
Program  
Development



# Peers for Progress

*Peer Support Around the World*

*“Go to” Source on Peer Support*

Tools for  
Program  
Monitoring,  
Quality  
Improvement

Regional  
Networks for  
Collaboration,  
Advocacy

Global  
Networking and  
Website for QI,  
Knowledge  
Sharing

## EVALUATION

Enhanced  
Quality  
and  
Availability  
of Peer  
Support  
Worldwide

# Peer Support Around the World

-Starting with 14 grants in nine countries on six continents  
(8 evaluation grants and 6 demonstration sites)



# Dissemination/Evaluation

## KEY FUNCTIONS:

- Assist in managing diabetes in daily life
- Social and emotional support
- Link to clinical care
- Ongoing support



Diverse  
Implementation  
of Key Functions  
According to  
Local, Regional,  
Cultural  
Influences



Evaluate  
Implementation  
or Achievement  
of  
Key Functions  
e.g., extent to  
which  
participants  
report being  
aided in  
implementing  
management  
plans, feel  
encouraged to  
use skills



## OUTCOMES:

- Self Management Behaviors (AADE7™)
- Metabolic Control
- Other Clinical Indicators (e.g., blood pressure)
- Quality of Life

# Challenge & Opportunity

- » Key functions/shared peer support framework
- » Necessary attention to cultural differences for both intervention and evaluation
- » NOT a “multi-site clinical trial” where we govern and sites are accountable to our study design, questions, and measures
- » Cross site evaluation, common set of shared data
- » Limited budgets
- » Focus on both site specific and common, collective aspects across studies

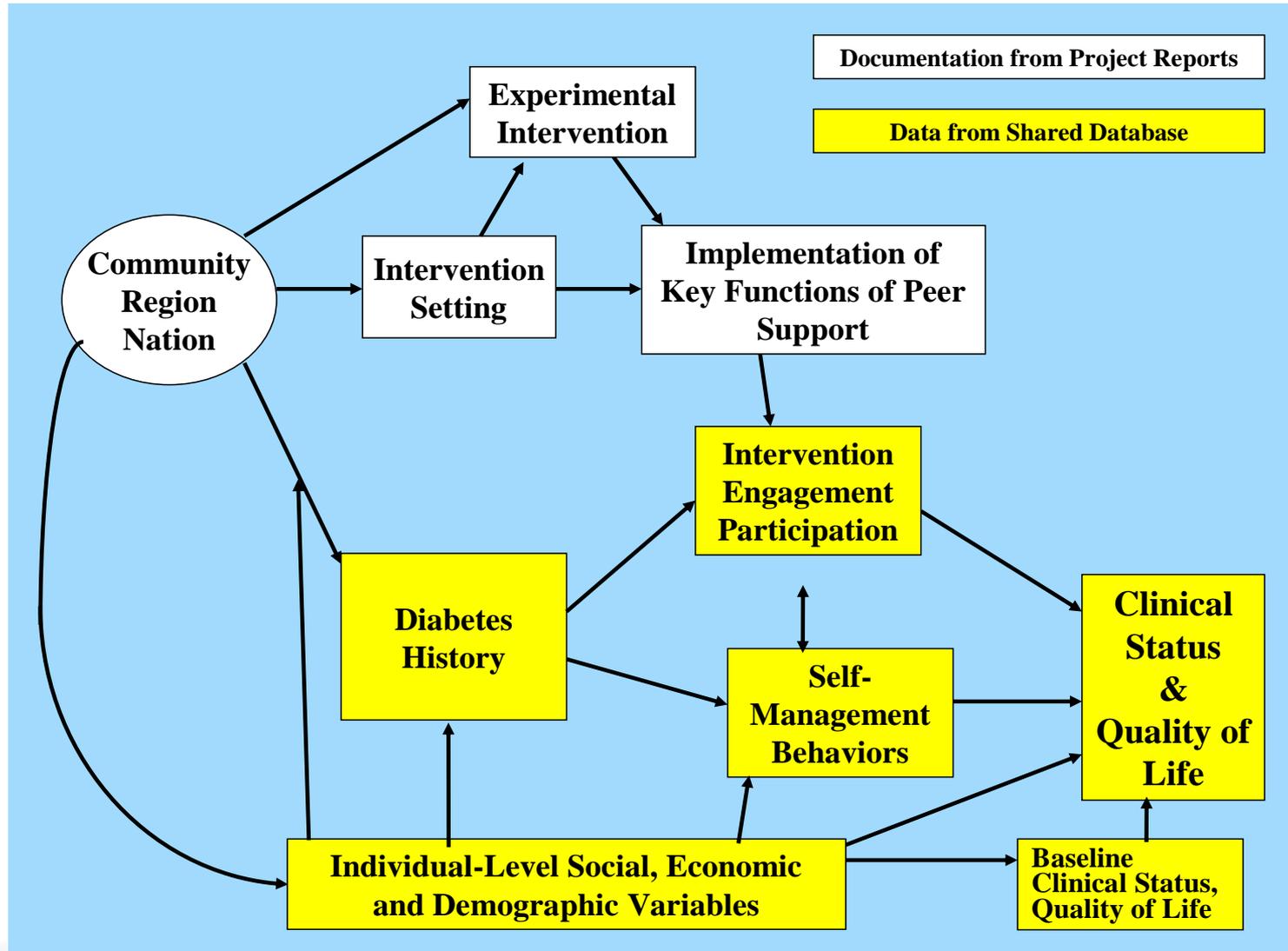
# Participatory Process

- Summarized inventory of all measures, tools as proposed by study sites/principle investigators
- Reviewed literature regarding validity, reliability, sensitivity, relevance/utility
- Via “teamlets” of grantee investigators, examined empirical and experiential literature for international use and general applicability, ease of use across sites (e.g., length/respondent burden, providing health utilization data often used in cost analyses)
- Generated iterations of recommendations for “required” and optional measures

# Consensus Measures

Category	Measures, Indicators, Measurement Tools
Clinical endpoints and demographic measures to describe study population	On insulin/other injectables/oral agents, initiation, dose ; HbA1c, blood pressure, weight; age, sex, height, year of diagnosis, highest education, marital status
Behavioral measures (incl. medication adherence)	Selections from Summary of Diabetes Self Care Activities, Behavioral Risk Factor Surveillance System (BRFSS), and Morisky Scale (4-item)
Quality of Life	EQ5-D (general); Diabetes Distress Scale (2-item screen); PH-Q 8 (depression)
Process Evaluation	Perceived Availability of Peer Support by core functions and sub-elements
Mediators and Moderators	Health literacy; Support from Family, Friends , and health care team; Non-directive vs. Directive Support (8-item)
Costs	System costs (clinic, hospital, ED visits)

# Possible Multilevel, Multivariate Evaluation



## Challenges, Opportunities, Next Steps

- ✓ Defining a core set of evaluation indicators, measures, and approaches for tracking change
- ✓ Minimizing burden of cross-site measures while building strong framework for cross-site learning
- ✓ Pooled database of shared, standard measures across separate study sites
- ✓ Increased power of analysis to detect differences
- ✓ Core set of evaluation measures to serve the broader community of peer support and diabetes researchers and, as modified, researchers in chronic disease management and health promotion

# Acknowledgments

Colleagues and our broader Learning Community . . .

- ❖ Ed Fisher, PhD, Global Director of Peers for Progress
- ❖ Principle Investigators and Collaborative Teams at Peers for Progress Grantee/Research Sites
- ❖ Peers for Progress Team Members at University of North Carolina at Chapel Hill (UNC-CH) and the American Academy of Family Physicians Foundation
- ❖ Faculty Advisors at UNC-CH

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