

The ENCOURAGE Study: Implementation of a volunteer diabetes peer support intervention in rural Alabama

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ENCOURAGE Study -Overview

- Group randomized controlled trial in rural Alabama
- Determine the effectiveness of a volunteer peer support + education vs. education alone in improving diabetes outcomes
- Outcomes: A1c, health-related quality of life, cost effectiveness

Residents: 86,614

54% female

72 % African American

Median household income \$25,563

31% residents live below poverty line

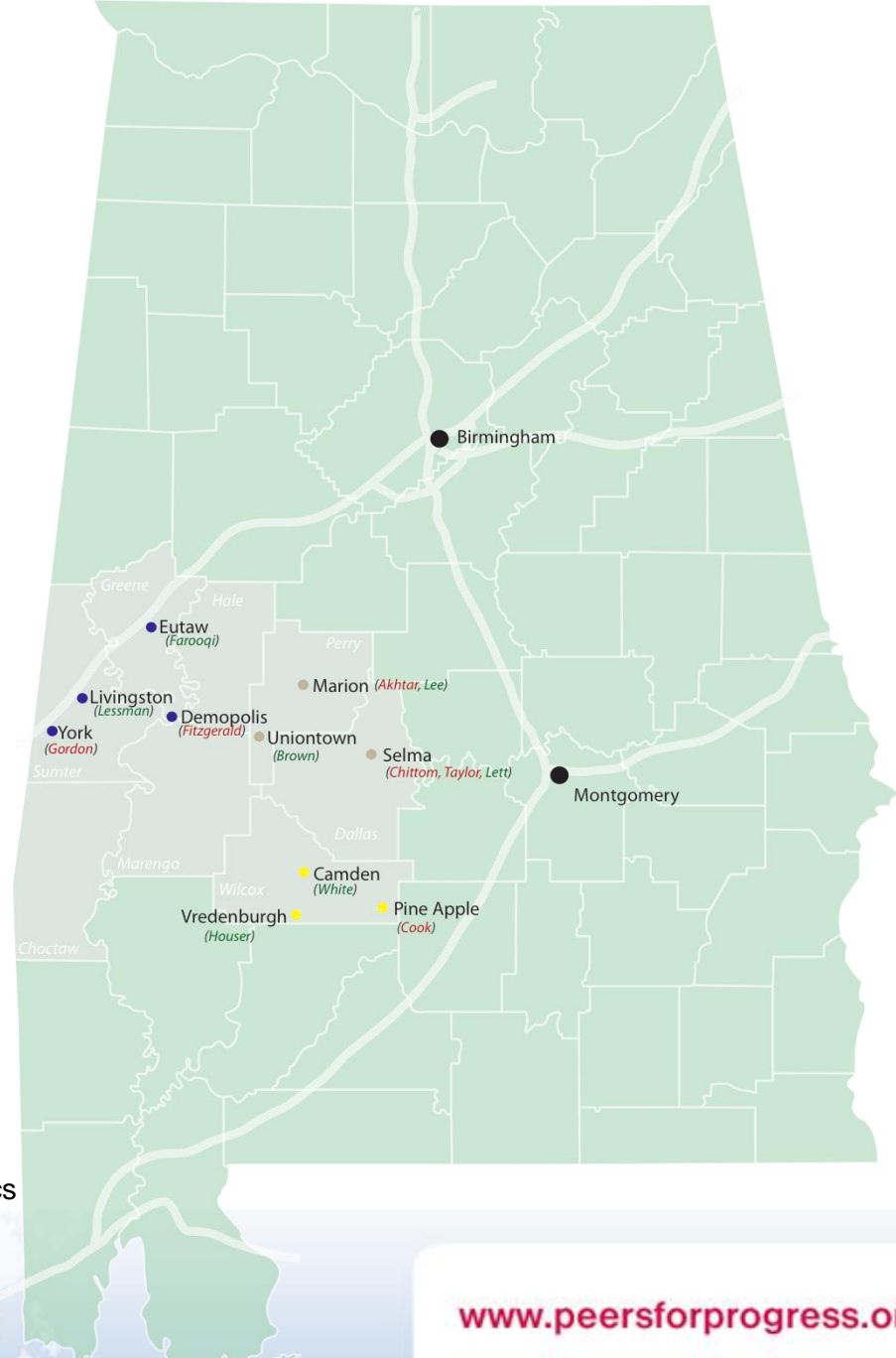
1 in 3 adults > 50 have diabetes

Health care access is limited

- One Certified Diabetes Educator

Large variation between practices

- Size, staff & services



Alabama Department of Public Health, Center for Health Statistics



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Peer Support Intervention

1. Assist with daily self-management

- Weekly telephone calls for 8-12 weeks
- Emphasis on setting “SMART” goals, problem solving & overcoming barriers

2. Social & emotional support

- Active listening to provide emotional support, encourage participants to engage social network

3. Link to clinical care

- “Raise the BAR (Be prepared; Ask and learn; Reflect and reach out)” on your health care provider office visit

4. After 8-12 weeks, monthly calls to provide ongoing support

	Overall N = 424	Intervention n = 198	Control n = 226	p-value*
HbA1c, %				
Mean ± SD	8.0 ± 2.0	8.1 ± 2.1	7.9 ± 1.9	0.32
HbA1c ≥ 7.0%, n (%)	61%	62%	60%	0.79
Age, years				
Mean ± SD	59.6 ± 12.8	59.4 ± 12.2	59.8 ± 13.3	0.74
Gender, n (%)				
Male	24%	21%	27%	0.20
Female	76%	79%	73%	
Race**, n (%)				
African American	87%	95%	80%	<0.001
Caucasian	13%	5%	20%	
Education, n (%)				
Less than high school	30%	32%	28%	0.06
GED‡, high school, or 12 th grade	44%	47%	41%	
More than high school	26%	21%	31%	
Total Annual Household Income, n (%)				
<\$10,000	34%	37%	32%	0.03
\$10,000-\$20,000	18%	19%	17%	
\$20,000-\$30,000	15%	13%	17%	
>\$ 30,000	18%	13%	23%	
Don't know, refused, missing	14%	18%	11%	

Evaluation of Peer Support

- Contact logs
 - To capture number of contacts & content
- Qualitative feedback from peer advisors
- Questionnaires at 6 and 12 months

Contact Logs

Evaluating Community Peer Advisors and Diabetes Outcomes in Rural Alabama

ENCOURAGE Contact Log

Client Name: _____
 Client Phone: _____
 Date: _____
 Peer: _____

I. Contact Information

1. Initiation of Contact
 Peer
 Client
 Other, _____
 (specify)

2. Length of contact:
 0-15 minutes
 16-30 minutes
 31-45 minutes
 46-60 minutes

3. Mode of Contact
 Phone
 Person-to-Person
 Email
 Other, _____
 (specify)

4. Was this a scheduled contact?
 Yes No

II. Medication Check (for scheduled contact)
 Prompt client to take out their medicine list to review.
 5. Problems / concerns with medications since last phone call.
 No problems or concerns
 Problem or concerns: _____

III. Review Short Term Goal Set Last Time
 Prompt client to take out their Action Plan.
 6. Last goal was: _____
 7. Goal met?
 Completely achieved and sustained behavior change
 Completely achieved but not sustained
 Not achieved but some behavior change
 No behavior change
 8. Goal attainment reinforced? Yes No

IV. New Short Term Goal (Review Initial Needs Assessment if needed)
 SMART Goal
 Specific
 Measureable,
 Achievable,
 Realistic
 No new goal set
 Time (when, how often, how long)

Assess confidence
 If confidence is less than 7, ask client to revise

No Confidence	1	2	3	4	5	6	7	8	9	10	Completely Confident
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New Goal (put N/A if confidence is 7 or greater).

Assess confidence
 If confidence is less than 7, ask client to revise.

No Confidence	1	2	3	4	5	6	7	8	9	10	Completely Confident
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Client will track their progress by:

V. Other areas covered today

Topic Initiated by:	Peer	Client	Topic Initiated by:	Peer	Client
Exercise	<input type="checkbox"/>	<input type="checkbox"/>	Talking to my Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Diet	<input type="checkbox"/>	<input type="checkbox"/>	Other, specify:	<input type="checkbox"/>	<input type="checkbox"/>
Stress Management	<input type="checkbox"/>	<input type="checkbox"/>			

No Other Issue Discussed

VI. Next Phone Call

Date:	Time:	Next Doctor's visit:	Date:	Time:

- **2410 Contact logs received**
 - Range 0-58, median 12
 - 160 office visit forms
- **Categories for first goals set**
 - Diet, Exercise, or Diet & exercise, 50%
 - Weight loss, 35%
 - Stress management, 8%
 - Medication Adherence, 3%
 - Doctor's Visit, 2%
 - Other, 2%
 (monitor blood sugar, quit smoking, eye care)

REMEMBER! SMART GOAL: Specific, Measurable, Achievable, Realistic, Ime

REMEMBER! OARS: Open-ended Questions, Affirmations, Reflective Listening, Summarize

ENCOURAGE Contact Log: Months 6-12
 Client Name: _____
 Client Phone: _____
 Peer: _____

Today's Date: _____ Date/Time of Next Call: _____ Was this a scheduled contact? Yes No

1. Initiation of Contact
 Peer
 Client
 Other, specify

2. Length of contact:
 0-15 minutes
 16-30 minutes
 31-45 minutes
 46-60 minutes

3. Mode of Contact
 Phone
 Person-to-Person
 Email
 Other, specify

4. Problems / concerns with medications since last phone call.
 No problems or concerns
 Problem or concerns, specify

Main Topic or Goal Discussed: _____

61% of the goals set met 3 to 4 of the four SMART criteria

Results – “Daily Management”

<i>Has your peer advisor...</i>	not at all	little	moderate amount	great deal
...asked you what would be helpful to you in managing your diabetes?*	7%	11%	29%	53%
...helped you set specific goals to manage your diabetes?*	11%	13%	24%	52%
...helped you learn skills or improve your skills to achieve your goals?***	7%	15%	27%	51%

*N = 143, missing = 55

***N = 142, missing = 56

Results – “Emotional Support”

<i>Has your peer advisor...</i>	not at all	little	moderate amount	great deal
...helped you solve problems that arise in managing your diabetes?	10%	15%	27%	48%
...helped you figure out how to deal with stress?	18%	14%	22%	46%
...helped you become confident to manage your diabetes?	10%	12%	25%	53%

*N = 143, missing = 55

Results – “Social Support”

<i>Has your peer advisor...</i>	not at all	little	moderate amount	great deal
...helped you get support from family ?*	20%	13%	19%	48%
...helped you get support from friends ?*	20%	17%	18%	45%
...helped you get support from others ?**	20%	17%	19%	44%

*N = 143, missing = 55

**N = 141, missing = 57

Results – “Linking to Care”

<i>Has your peer advisor...</i>	Not at all	little	moderate amount	great deal
...encouraged you to get regular diabetes care?*	7%	8%	24%	61%
...helped you get the care you need from doctors and nurses?**	12%	15%	23%	50%
...helped you find other resources in your community to help you take care of your diabetes?**	25%	12%	19%	44%
...helped you communicate effectively with your doctor or nurse about your diabetes?**	12%	12%	19%	57%

*N = 142, missing = 56

**N = 143, missing = 55

Ongoing support

- 68/198 participants had 16 or more contacts
 - Typically turned in 1 form per week
 - Range was 0 to 58, median 12
- Number of contacts (and perhaps duration of support) depended on whether individuals knew each other previously or not

Support & prior relationship

First time meeting	59%
Family member	4%
Neighbor	5%
Friends > 5 years	16%
Friend 5 years or less	6%
Acquaintance	9%

N=161, missing = 27

Mean # of contacts
11 if no prior relationship
vs.
14 if prior relationship
($p=0.01$)

Challenges

- Contact forms don't always reflect what did or did not occur in an encounter
 - May not capture emotional support provided “off topic”
- Many participants did not move to 2nd goal
 - More emphasis on intensifying intervention & monitoring
 - Specific barriers to diet & physical activity
- Difficult to link to community resources
 - Depends heavily on what is available, this varies by

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Linking to Care by Area

% Participants who answered “a great deal”

<i>Has your peer advisor...</i>	Area 1	Area 2	Area 3	<i>P value</i>
...encouraged you to get regular diabetes care?	57%	64%	57%	.423
...helped you get the care you need from doctors and nurses?	36%	56%	50%	.385
...helped you find other resources in your community to help you take care of your diabetes?	29%	52%	43%	.331
...helped you communicate effectively with your doctor or nurse about your diabetes?	45%	62%	57%	.587

Area 1 = Western Black Belt

Area 2 = Southern Black Belt

Area 3 = Central Black Belt

Challenges

- Sustainability & Scaling up
 - Need reliable funding stream to support formal, ongoing peer support programs
 - To date, programs have been largely research grant funded
 - Potential funding for CHWs through the Affordable Care Act promising
 - Limited resources & staff combined with unfamiliarity with peer support programs present challenges for integration of this model with clinical care

The Encourage Team

- Monika Safford, MD, PI
- Andrea Cherrington, MD, Co-PI
- Jewell Halanych, MD; Michelle Martin, PhD; Annette Wright, RN, PhD
- Susan Andreae, Lynn Andreae, Marquita Lewis
- Debra Clark, Ethel Johnson, Sheree Stallworth
- Our peer volunteers
- Our participants
- Numerous Black Belt community businesses and groups who supported the study through donations of space, time and enthusiasm