

COMMENTARY ON THE WORLD DIABETES CONGRESS IN MELBOURNE

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The International Diabetes Federation meetings in Melbourne included a number of presentations related to peer support and many of the interests of readers of this newsletter. The accompanying spotlight and table provide details on these presentations. In this commentary I would like to share my personal observations.

The last day of the meeting included a debate on whether peers or professionals are better providers of patient education. Of course, the forced, "either-or" dichotomy is obvious from the outset – both peers and professionals have important contributions to patient education and can be complementary rather than competitive. Nevertheless, the two speakers, Ikenna Anthony Nwaturuocha, co-founder of the Greenleaf Diabetic Patients Foundation in Nigeria, and Jaime A. Davidson, endocrinologist and professor at the Touchstone Diabetes Center at The University of Texas, Southwestern Medical Center in Dallas, as well as the moderator, John Grumitt, Vice President of the International Diabetes Federation, did a good job of advocating for their respective positions.

The discussion included the kinds of concerns with which many of us are familiar – the possibility of misinformation or of dangerous responses to emergent clinical

developments, etc. Not being sure what kind of a crossfire I might be walking into, I rose during the discussion to make three major points.

The first, that across a wide variety of peer support programs with which we are familiar, we have seen little, if any, evidence of serious problems related to misinformation, inappropriate handling of emergent situations, etc.

Second, I emphasized that critical in peer support programs is adequate backup of the peer supporters. We select peers supporters to be resourceful and responsible. In the absence of backup, they will deal with problems as best they can. However, when backup is available, they will use it!

And third, I mentioned the complementarity of peer and professional participation in patient education and support, the ways in which peer supporters have advantages relative to professionals (time, direct experience with the circumstances of the recipient, etc.), and the attractiveness of integration of peer support with clinical care.

Far from the trepidation I felt before making the comments, the response of the audience was very positive. This was very gratifying in

that it pointed to the broad recognition and endorsement of the roles of peer supporters in diabetes self-management education and support. Most striking perhaps, Dr. Davidson, the proponent of the superiority of professional education, ended up endorsing the perspective of strong contributions from well-trained peer supporters linked with clinical care, given that they are provided good backup.

In addition to this debate, I had the opportunity to present a paper on the results of a number of projects sponsored by Peers for Progress. The [slides from this presentation](#) are available through the IDF website, as well as through the [Peers for Progress website](#). Again, the response to the presentation was very positive, indicating the same kind of widespread acceptance of the contributions of peer support as reflected in the debate.

Peers for Progress also hosted an "open house" for people at the meeting interested in talking about peer support. This was well attended by about 30 people including leaders of projects sponsored by Peers for Progress, such as Linda Baumann, Brian Oldenburg, and David Simmons, who provided very thoughtful observations on selection and ongoing backup and support of peer supporters.

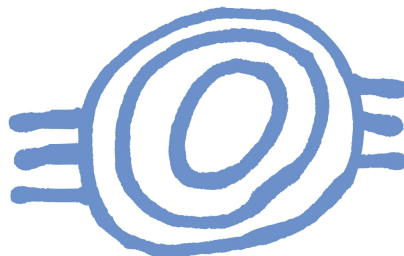
WORLD DIABETES CONGRESS 2013

THE ROLE OF PEERS IN DIABETES SELF-MANAGEMENT EDUCATION AND SUPPORT IN THE WESTERN PACIFIC REGION

The International Diabetes Federation (IDF) held its [22nd World Diabetes Congress](#) in Melbourne, Australia from December 2-6, 2013. An alliance of over 200 national diabetes associations across 160 countries, the IDF convenes the biennial World Diabetes Congress to showcase and inspire the global diabetes community. Peers for Progress (PfP) and our colleagues around the world were invited to disseminate the latest findings on the role of peers in diabetes self-management education and support.

With the growing burden of diabetes in the Western Pacific Region, the IDF chose Melbourne to host the 2013 World Diabetes Congress. According to IDF President Sir Michael Hirst, more than a third of all people with diabetes are found in the Western Pacific Region. This region also has the highest number of undiagnosed cases and the highest number of deaths attributable to diabetes. Watch the [president's address](#).

This Congress attracted 400 expert speakers and 12,000 delegates, which attended 275 hours of scientific sessions, 1000 poster presentations, and 7 program streams. The 7 streams, which formed the core of the scientific sessions, were organized around the following topics: Basic and Clinical Science; Diabetes in Indigenous Peoples; Diabetes in the 20th Century: a Historical Perspective; Education and Integrated Care; Global Challenges in Health; Living with Diabetes; and Public Health and Epidemiology.



IDF 2013
melbourne
world diabetes congress
2 - 6 December 2013

In the [Peer to peer](#) session of the Education and Integrated Care Stream, Prof. Ed Fisher delivered an oral presentation on behalf of the Peers for Progress Investigators titled [“Feasibility, reach, effectiveness, and sustainability of peer support in diabetes management: Results from Peers for Progress”](#).

Martha Funnell, from the University of Michigan, presented on [“Self-management support: empowerment and motivational interviewing”](#) as part of the symposium on [Innovative approaches to engaging people with diabetes](#).

These two presentations from the PfP network focused on the role of peers in diabetes self-management support. To complement these presentations, our colleagues shared their findings on the implementation and effectiveness of peer education.

Our collaborator in Nanjing, China, Prof. Zilin Sun, co-chaired the symposium on [Innovative approaches to diabetes education](#). Dr. Xiaohui Guo kicked off the session with an overview of the present and future development of diabetes education in China.

In a symposium on multidisciplinary and primary healthcare, our good friend and Chair Elect of IDF Western Pacific Region, Prof. Wayne Sheu presented on the state of [Diabetes care in Taiwan](#).

Prof. Juliana Chan, an outstanding PfP grantee from the Chinese University of Hong Kong, presented on [“Involving people with diabetes in developing medicines”](#). Prof. Chan also helped develop a multisite study on [“The association of clinical and psychosocial risk factors with depression in Chinese patients with Type 2 diabetes”](#).

Video recordings of the streams may be found on the [program website](#). Please see the table on page 3 for links to sessions on peer support, diabetes self-management, facing comorbidities, care integration, engagement through technology and social media, diabetes in special populations, and practical strategies for behavior change.

EDUCATION AND INTEGRATED CARE	FORMAT
Peer to peer	Oral Presentation
Innovative approaches to engaging people with diabetes	Symposium
Innovative approaches to diabetes education	Symposium
Peer educators are more effective than health professionals	Debate
Involving people in development and using therapies	Symposium
DAWN 2	Symposium
The integrated care: rhetoric or reality? Sharing experiences and finding solutions	Workshop
Managing diabetes is harder in older people than in children and adolescents	Debate
Managing diabetes in the presence of complex comorbidities	Teaching Lecture
Mental health: the key to physical health	Symposium
Diabetes transitions and their psychosocial effects	Symposium
Enhancing patient care and self-management with e-health	Oral Presentation
Modern technology and social media: how it is shaping diabetes care, education and research	Symposium

GLOBAL CHALLENGES IN HEALTH	FORMAT
Meeting the challenge of diabetes in the ageing population	Symposium
Diabetes care at the coal face: manpower, multidisciplinary and primary healthcare	Symposium

PUBLIC HEALTH AND EPIDEMIOLOGY	FORMAT
Public health challenges in treating diabetes	Symposium
Socio-economic and ethnic issues in diabetes	Symposium
Psychological and other complications of diabetes	Oral Presentation

LIVING WITH DIABETES	FORMAT
Self-management	Oral Presentation
Effective lifestyle modification strategies	Teaching Lecture
How to get people with diabetes to be more active	Teaching Lecture
Living with diabetes in a busy world	Open Forum
How to build effective relationships with a healthcare practitioner	Open Forum
Internet, social media and community	Oral Presentation
Patient empowerment through social media	Workshop