

Caregiver Participation in Chronic Disease Self-Management Education Programs: Findings from a National Study

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INTRODUCTION

- Over the next several decades, the number of older Americans will increase substantially
 - More people will be living longer with co-morbid conditions
 - Self-care behaviors can compensate for, or delay, physical limitations & chronic conditions progression
 - Implications for healthcare costs

Family Caregiving

- Nearly 90% of older adults have one or more chronic conditions, and nearly 73% having two or more
 - Increasing the odds that individuals will either provide or receive informal care during their lifetime
- Approximately 34.2 million Americans providing unpaid care to adults age 50 and older
 - Females represent about 75% of all caregivers
 - Almost 20% of caregiver provide care to 2+ adults
- Caregivers have higher risk for negative physical and mental health issues, especially those living with chronic conditions
- Less is known about the reach and utilization of evidence-based disease self-management programs among those who provide care to others with long-term disability

STUDY PURPOSES

- Identify personal characteristics of participants who attended CDSME workshops by caregiving status
- Examine the influence of caregiving on successful program completion (i.e., attending 4+ of 6 offered sessions)

METHOD

- Data from a nationwide delivery of CDSMP from 2013-2016
 - Initiated as part of the American Recovery and Reinvestment Act (ARRA) in 2009
 - Delivered in 36 states, Washington DC, & Puerto Rico

Chronic Disease Self-Management Education (CDSME)

- Class-based, behavioral intervention to develop skills & improve confidence to self manage chronic conditions
 - Shown to improve health indicators & healthcare utilization in a randomized control trial
- 6 sessions; each lasting 2.5 hours; held over 6 weeks
 - Most offered in English & Spanish
- Facilitated by 2 trained leaders (preferred at least 1 is a non-health professional & 1 has a chronic disease)
- Delivered in a variety of community settings through the aging services network & public health system
- For additional information: <https://www.selfmanagementresource.com/programs>

Measures

- Dependent Variable
 - “Successful” Completion (attending 4+ of 6 sessions)
- Personal Characteristics
 - During the past year, did you provide regular care or assistance to a friend or family member who has a long-term health problem or disability? (yes, no)
 - Age; Sex; Race; Ethnicity; Education; Self-reported chronic conditions; Living situation; Residential rurality
- Delivery Site & Workshop Characteristics
 - Site type; Class size
 - Workshop language (English or Spanish)

Statistical Analyses

- Pearson’s chi-squared tests for categorical variables
- Independent sample t-tests for continuous variables
- Binary logistic regression

RESULTS

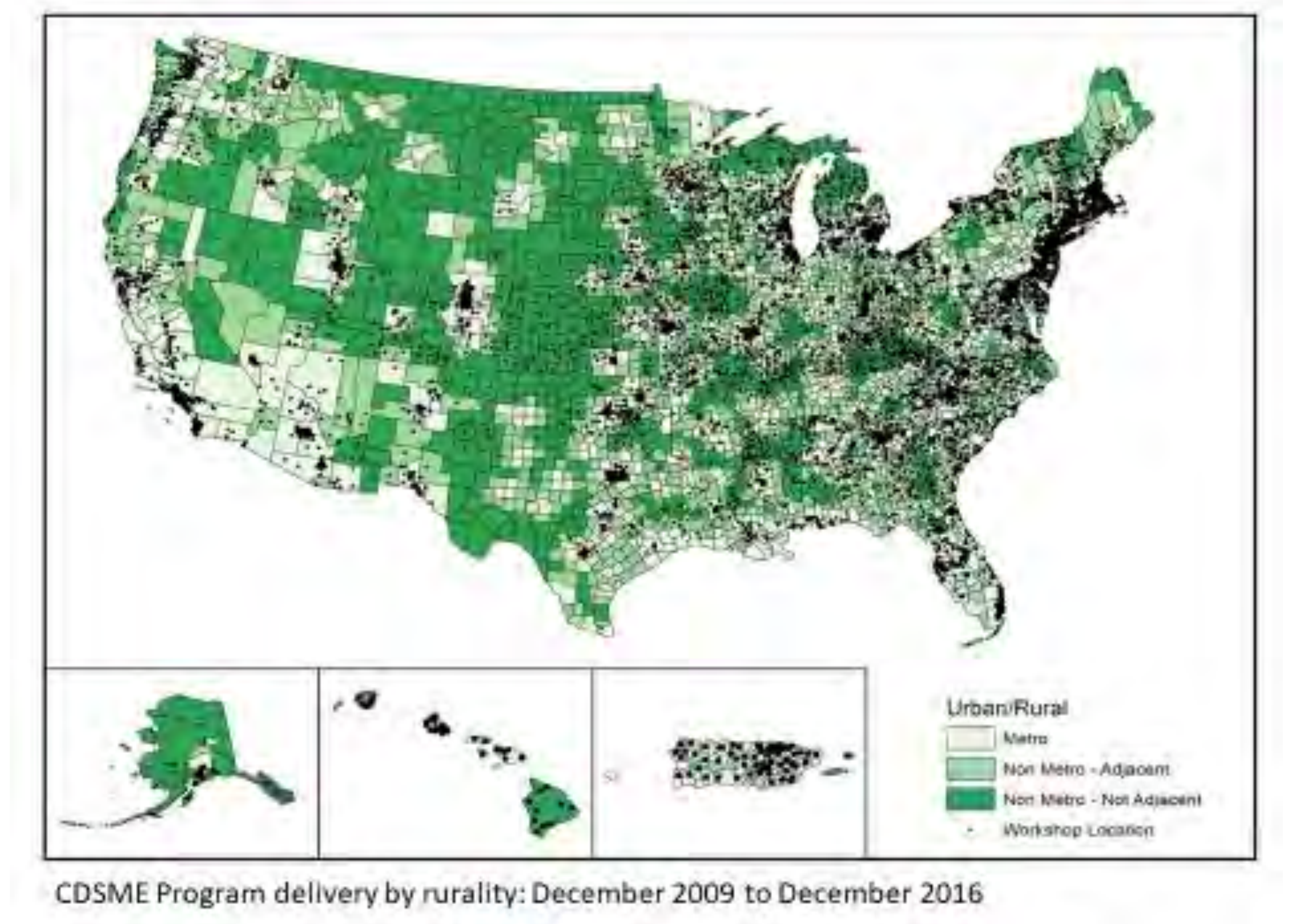
- Data were analyzed from 73,317 adult participants
- 28% provided care to a friend or family member
- On average, 64.6 (±15.4) years old
- 75% female; 58% live with others
- 65% white; 20% African American; 12% Hispanic
- On average, 2.6 (±1.7) self-reported chronic conditions
 - 65% heart disease; 40% arthritis; 40% diabetes; 21% chronic pain; 19% lung disease; 13% cancer
- 25% of workshops delivered in healthcare organizations;
 - 21% senior centers/AAA; 18% residential facilities; 13% community/multi-purpose centers; 8% faith-based organizations
 - 62% attended workshops delivered in English
- On average, class sizes of 13.6 (±7.1) participants
- 74.3% successfully completed workshops

Bivariate Analyses

- Relative to non-caregivers, caregiving participants:
 - Younger; female; live with others
 - Larger proportion had no chronic conditions
 - Higher successful program completion rate

Binary Logistic Regression

- Among all participants, *successful completion* was associated with:
 - Caregiver
 - Female
 - Hispanic
 - African American
 - College educated
 - Resided in rural areas
 - Lived with others
 - Had fewer chronic conditions
 - Attended English workshops
 - Attended workshops with more caregivers



Factors associated with successful completion

	P	OR	95% CI	
			Lower	Upper
Caregiver: No	—	1.00	—	—
Caregiver: Yes	<0.001	1.13	1.09	1.17
Age	0.510	1.00	1.00	1.00
Sex: Male	—	1.00	—	—
Sex: Female	<0.001	1.14	1.10	1.19
Hispanic: No	—	1.00	—	—
Hispanic: Yes	0.042	1.07	1.00	1.13
Race: White	—	1.00	—	—
Race: African American	<0.001	1.27	1.22	1.33
Race: Asian/Pacific Islander	<0.001	1.37	1.25	1.52
Race: American Indian/Alaska Native	0.657	0.97	0.86	1.10
Race: Hawaiian Native	<0.001	2.90	2.23	3.76
Race: Other/Multiple	<0.001	1.16	1.08	1.24
Education: Less than High School	—	1.00	—	—
Education: High School /GED	0.662	1.01	0.96	1.07
Education: Some College / Technical	0.003	1.09	1.03	1.15
Education: College Graduate+	<0.001	1.37	1.29	1.45
Lives with Others: No	—	1.00	—	—
Lives with Others: Yes	<0.001	1.09	1.05	1.13
Rurality: Metro	—	1.00	—	—
Rurality: Non-Metro	<0.001	1.27	1.21	1.33
Number of Chronic Conditions	0.017	0.99	0.98	1.00
Workshop Language: Non-English	—	1.00	—	—
Workshop Language: English	<0.001	1.23	1.19	1.27
Percent of Caregivers in Workshop	<0.001	1.48	1.35	1.63

CONCLUSIONS

- Caregivers may be more likely to successfully complete CDSME workshops because they recognize the program’s benefits for themselves *and* those for whom they care
- Efforts are needed to embed CDSME in organizations that reach and serve caregiving adults
 - Consider also offering Building Better Caregivers