Chronic Disease Self-Management

Fact Sheet for Primary Care Partnerships

What is Self-management?

Self-management is what the person with a chronic disease does, not the health clinician.

- It includes healthy lifestyle choices, informed decisions regarding ongoing treatment options that fit within the person's broader social context, actively monitoring and managing symptoms and impacts of chronic health conditions and working in partnership with a team of healthcare workers.
- It requires life-long choices, skills and strategies on the part of the individual for optimal management of their health condition in the long-term.

Definitions of Self-management

The Centre for Advancement of Health states that Self Management:

> *`involves (the person with the chronic disease) engaging in activities that protect and promote health, monitoring and managing the symptoms and signs of illness, managing the impact of illness on functioning, emotions and interpersonal relationships and adhering to treatment regimes.'*

Kate Lorig, one of the leading researchers in this area adds that self-management is also about enabling:

> *`participants to make informed choices, to adapt new perspectives and generic skills that can be applied to new problems as they arise, to practise new health behaviours, and to maintain or regain emotional stability `*

The Chronic Disease Management Guidelines for Primary Care Partnerships and Community Health Services use the Flinders University definition; that Self-management is:

> *The client (and family/carers as appropriate) working in partnership with their health care provider to:*
> *• know their condition and various treatment options*
> *• negotiate a plan of care*
> *• engage in activities that protect and promote health*
> *• monitor and manage the symptoms and signs of the condition(s)*
> *• manage the impact of the condition on physical functioning, emotions and interpersonal relationships.*
>
> *Self-management is the ability of the client to deal with all that a chronic disease entails, including symptoms, treatment, physical and social consequences, and lifestyle changes.*

What is Self-management Support?

Self-management support is what health care practitioners provide to assist a person with their self-management practices, and to support their self efficacy and ability to effectively self-manage. Self management support;

- Can be provided through a range of strategies and approaches - individual and group based, face-to-face or by phone, as part of clinical intervention and/or as a separate interaction with the person with a chronic disease.
- Includes not only provision of information, but also assistance in practical application of health information in the individual context through goal setting and problem solving.
- Is not just an intervention, it is a philosophy or entire approach to how a clinician works in partnership with people with chronic diseases.

Essential Characteristics of Self-Management Support;

- Respects choices and individual circumstances of the person with a chronic disease, but assists to address barriers to self management.
- Involves goal setting and problem solving as key components.
- Is an ongoing collaborative process between the health practitioner and person with a chronic disease; not something that is completed in a time-limited intervention. Self-management is a life-long practice for the individual and self management support needs to be available when the person needs support in maintaining this approach.

Why Provide Self-Management Support?

There is a strong evidence base around self-management as a core component of integrated chronic disease management.

Cochrane reviews on self management strategies for COPD, diabetes and arthritis have demonstrated evidence of:

- decreased presentations to hospital
- improved clinical indicators (eg HBA1C) and
- increased self-efficacy and well being.

The following links provide supporting evidence behind the Wagner chronic illness care model (of which self management is a core component) and behind some of the common models of self management support described in more detail below;

http://www.improvingchroniccare.org/index.php?p=Evidence_for_Better_Care&s=5

http://patienteducation.stanford.edu/programs/cdsmp.html

http://som.flinders.edu.au/FUSA/CCTU/publications.htm

On the basis of this evidence, self-management has been identified in the National Chronic Disease Strategy as a key component of routine health care

Myth Busting

There have been recent statements made that 'the evidence shows self management doesn't work'. This appears to be a reference to a study conducted of health impacts for people with arthritis one year after participation in a Stanford Chronic Condition Self Management Course (Buszewicz M et al. Self Management of arthritis in primary care: randomized control trial. *British Medical Journal 2006*; 333:879).

The study demonstrated significant improvements in self efficacy and well-being measures and positive trends but not statistically significant improvements in several other measures including pain and attendances at GPs for people with arthritis.

Concluding from this that self-management doesn't work fails to fully represent the results, and also fails to recognise that self-management support is an ongoing process, not a time-limited course of intervention.