

# EDUCATIONAL TRAINING IN DISEASE MANAGEMENT FOR PERSONS PROVIDING PEER SUPPORT TO PATIENTS WITH TYPE 2 DIABETES AND ARTERIAL HYPERTENSION AT THE PRIMARY HEALTHCARE LEVEL

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## INTRODUCTION:

Good metabolic control of a patient with type 2 diabetes (T2D) and arterial hypertension (AH) requires continuous monitoring of patient's health and associated diseases, where lifelong education and support represent key factors in patient empowerment and successful self-management. This is a task beyond the capabilities of healthcare professionals in Slovenia, which could be solved with engagement and cooperation of partners outside the healthcare system. Therefore, appropriate organisation, training and functioning of lay persons, who will provide peer support, can significantly contribute to improved integrated care in patients with T2D and AH. In this way trained peer supporters will voluntarily share their knowledge, experiences and support to other patients with the same chronic disease without linguistic nor cultural barriers.

## AIM:

The aim of our pilot study was to determine the acceptability, effectiveness and feasibility of educational training in disease management for persons providing peer support to patients with T2D and AH at the primary healthcare level in Slovenia.

## METHODS:

This study is a part of an ongoing international research project SCUBY (Scale Up diabetes and hypertension care). Our pilot study started with recruitment of 36 patients with T2D and/or AH. Participants were educated in a total of 15 hours of group and individual training by nurses with special skills. Before and after completing the training, participants filled out questionnaires including sociodemographic and clinical data, knowledge about T2D and AH, Appraisal of Diabetes Scale and Theoretical Framework of Acceptability.

## RESULTS:

31 patients (21 women and 10 men) successfully completed structured educational training in management of their T2D and AH and became trained peer supporters. Their average age was  $63,9 \pm 8,9$  years, they were treated for T2D on average of  $14,3 \pm 11,7$  years and for AH on average of  $7,9 \pm 8,1$  years. Compared to the knowledge at the time of entering the research, their knowledge about T2D ( $p < 0,001$ ) as well as about AH ( $p = 0,022$ ) increased significantly. The impact on the quality of life with T2D was insignificantly better ( $p = 0,146$ ). The participants rated training as highly acceptable in all 7 domains of acceptability; the total mean score on a 5-point scale was  $4,44 \pm 0,52$ .

## CONCLUSIONS:

Educational training in disease management for peer supporters proved to be highly acceptable, effective and feasible, which indicates a great potential for successful implementation of peer support for patients with T2D and AH at the primary healthcare level in Slovenia. Active role of trained peer supporters will lead to the development of a new form of cooperation and collaboration between patients, their family members, informal caregivers in local community and healthcare professionals.



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