



RESEARCH BRIEF

Home Visits by Certified Diabetes Educators and a Monthly Community-Based Group Program Support Diabetes Self-Management in Older Adults with Type 2 Diabetes and Multiple Chronic Conditions

KEY POINTS

- ✓ A Diabetes Education Centre partnered with a local seniors association to carry out a community-based intervention for older adults with diabetes and multiple chronic conditions.
- ✓ The 6-month intervention included 4 home visits and a monthly group program.
- ✓ The intervention was feasible to carry out and acceptable to participants.
- ✓ The intervention showed promising evidence of positive effects on diabetes self-management and health-related quality of life.

What is the topic of this research?

Older adults with type 2 diabetes (T2DM) and multiple chronic conditions have poorer diabetes self-management and quality of life, higher risk for diabetes-related complications, and increased use of health services compared to those with diabetes alone. New ways are needed to support chronic disease self-management among the growing population of community-dwelling older adults with T2DM and multiple chronic conditions.

Research Purpose

The purpose of this pilot study was to evaluate the feasibility and acceptability of a new 6-month intervention for older adults with T2DM and multiple chronic conditions, and obtain preliminary evidence of its effectiveness.

How was the study done?

Forty-five older adults (≥ 65 years) with T2DM and multiple chronic conditions were recruited from a Diabetes Education Centre (Diabetes Care Guelph). Participants completed questionnaires at the beginning of the study and six months later. They were asked about self-management of diabetes, health-related quality of life (physical and mental), and symptoms of depression and anxiety.

All participants were offered a 6-month intervention, delivered by Diabetes Care Guelph (DCG) in partnership with the Guelph Wellington Seniors Association (GWSA).

Participants were offered four in-home visits by Certified Diabetes Educators (a Registered Nurse and Registered Dietitian).

Participants were also invited to attend monthly group wellness sessions, hosted by the GWSA. Each group session included a lunch, light physical activity, diabetes education led by the DCG nurse and dietitian, and interaction with peer volunteers.

The group program coordinator and physical activity leader from the GWSA met with the nurse and dietitian from DCG monthly for case conferences.



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Key Research Findings?

The intervention was feasible to carry out and acceptable to participants.

- On average, participants received 3 home visits and attended 3 group program sessions over 6 months.
- Participants said they learned a lot from the nurse and dietitian and from each other during the group program.
- Participants said the home visits were a relaxing setting to ask questions and discuss their health. The nurse and dietitian said they were able to get a better picture of participants' strengths and challenges in managing diabetes.

The intervention showed promising evidence of effectiveness.

- 36 participants completed questionnaires at the end of the intervention.
- There was a significant improvement in the physical component of health-related quality of life at the end of the intervention.
- The dose of the intervention (combined number of in-home or in-clinic visits and group sessions attended) had a positive impact on diabetes self-management.

Key message

This pilot study demonstrated that a newly designed 6-month community-based intervention for older adults with T2DM and multiple chronic conditions is feasible, acceptable, and has promising effects on diabetes self-management and health-related quality of life.

Where do we go from here?

The findings from this pilot study are being used to refine the intervention for a multi-site randomized controlled trial to further evaluate its feasibility, acceptability, and outcomes.

Who are the researchers?

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