

Title of Intervention: Education programs for older males who have diabetes

Intervention Strategies: Group Education, Supportive Relationships

Purpose of the Intervention: To increase or improve diabetes knowledge, psychosocial functioning and metabolic control among older males who have diabetes

Population: 65 to 82 year-old males

Setting: Diabetes clinic in North Chicago, Illinois; health care facility-based

Partners: Clinic, medical professionals

Intervention Description:

- Group Education: Six class sessions were held to address general knowledge, nutritional and drug management, social work support services, stress management skills and self-care techniques.
- Supportive Relationships: Spouses were included in the class sessions.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Multi-disciplinary diabetes education team consisting of a diabetologist, nurse-educator, dietitian, psychologist, podiatrist and social worker
- Training: Not mentioned
- Technology: Not mentioned
- Space: Classroom space
- Budget: Not mentioned
- Intervention: Educational materials
- Evaluation: Questionnaires

Evaluation:

- Design: Quasi-experimental
- Methods and Measures:
 - Questionnaires were used to measure knowledge of diabetes and psychosocial factors, such as quality of life related to diabetes, stress, family involvement with medical care and involvement in social activities.
 - Glycemic control was measured through blood samples.

Outcomes:

- Short Term Impact: Older adults improved their knowledge as a result of the program. For individuals whose spouses participated, there were more significant improvements in knowledge.
- Long Term Impact: Older adults showed significant improvement in overall quality of life and in quality of life factors related to stress and family involvement. In addition, participants that had spouses participating showed significant improvements in metabolic control.

Maintenance: Not mentioned

Lessons Learned: Older adults are typically retired and have more time to apply new knowledge and skills. Thus, the newly acquired knowledge may decrease the stress related to managing a chronic disease. It is evident that families have an important role in the care of diabetes in the older individual.

Citation(s):

Gilden, J. L., M. Hendryx, et al. (1989). "The effectiveness of diabetes education programs for older patients and their spouses." *J Am Geriatr Soc* 37(11): 1023-30.

Gilden, J. L., C. Casia, et al. (1990). "Effects of self-monitoring of blood glucose on quality of life in elderly diabetic patients." *J Am Geriatr Soc* 38(5): 511-5.