

**Title of Intervention:** In Control program: Increasing children's responsibility for diabetes self-care

**Intervention Strategies:** Group Education, Supportive Relationships

**Purpose of the Intervention:** To empower children with insulin-dependent diabetes (IDDM) to become more independent with self-management without compromising metabolic control

**Population:** Children between the ages of 8-12 years who had at least a 3-month history of IDDM and their parents

**Setting:** Diabetes clinic at a large, metropolitan children's hospital; community-based, health care facility-based

**Partners:** None mentioned

**Intervention Description:**

- Group Education: The In Control program consisted of a series of six, small-group sessions held for one hour per week over a six-week period. An instructor's manual included scripts to guide each session. A different self-care concept was discussed at each session and children learned and practiced relevant self-care behaviors.
- Supportive Relationships: In separate, but concurrent sessions, parents were taught specific parenting skills to enhance their ability to promote developmentally-appropriate self-care independence. At the end of each session, children and parents met together. Children set a specific self-care behavioral goal for themselves and practiced the behavior with their parents. If a child failed to demonstrate mastery of an essential behavior, he/she was encouraged to modify the goal and master a less demanding skill. Because the goal was mutually agreed upon by both child and parent and because mastery of the behavior was enhanced through behavioral rehearsal, developmentally-inappropriate self-care expectations were minimized.

**Theory:** Social cognitive theory

**Resources Required:**

- Staff/Volunteers: Instructor
- Training: Not mentioned
- Technology: Not mentioned
- Space: Learning facility
- Budget: Not mentioned
- Intervention: Materials for session, instructor's manuals
- Evaluation: Clinical testing materials to determine metabolic control

**Evaluation:**

- Design: Randomized controlled trial
- Methods and Measures:
  - The Children's Diabetes Inventory assessed the frequency with which 35 self-care behaviors were practiced in the home and the degree to which the child assumed responsibility for performing each of these behaviors.
  - Metabolic control was determined from blood samples measuring glycohemoglobin levels.

**Outcomes:**

- Short Term Impact: Children who completed the In Control program were reported to be significantly more responsible for insulin administration, responding to symptoms of hypoglycemia and hyperglycemia, maintaining records of insulin administration and glucose levels and communicating with others about diabetes and diabetes care. These children assumed greater responsibility in these areas without reducing the frequency with which these self-care behaviors were performed.
- Long Term Impact: Children were able to assume greater responsibilities in areas of self-care without incurring any associated compromise in metabolic control.

**Maintenance:** Not mentioned

**Lessons Learned:** Diabetes self-management education programs for children ages 8 to 12 years can be effective in empowering children to become more responsible for their own diabetes management.

**Citation(s):**

McNabb WL, Quinn MT, Murphy DM, Thorp FK, Cook S. Increasing children's responsibility for diabetes self-care: the In Control study. *Diabetes Educ.* Mar-Apr 1994;20(2):121-124.