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# HISTORY OF STANFORD SELF-MANAGEMENT PROGRAMS

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## 1978+ The Arthritis Self-Management Years

In 1978, Kate Lorig came to Stanford to create an arthritis education program. This program was mandated by a grant from The U.S. National Institutes of Health to the newly funded Stanford Multipurpose Arthritis Center, part of Stanford University School of Medicine.

By early 1979, the Arthritis Self-Management Program had been written and the first 14 leaders trained. Over the next year, nearly 300 people attended programs, and by 1980 Kate had completed her doctoral dissertation for University of California Berkeley, *Arthritis Self-Management: A Joint Venture*.

→ This study showed that a small-group, peer-led arthritis program could change health status and health behaviors.

Based on this evidence, the U.S. National Arthritis Foundation disseminated the program nationally and continued to do so into the 21<sup>st</sup> century.

For the next nearly 30 years, the Stanford Arthritis Center, now named the Stanford Patient Education Research Center, conducted a number of studies of community-based arthritis education programs and established some of the evidence that underlies all of our works today.

The following are some of the key findings from this period and their references.

→ The Arthritis Self-Management Program reduced costs.

→ Self-Efficacy is one of the factors explaining beneficial outcomes.

→ Reinforcement may not add anything

→ Shorter versions of the Arthritis Self-Management Program are not as effective

→ Lack of strong evidence that professionals are better than peers as program leaders.

→ Spanish Speakers benefit from the Spanish Arthritis Self-Management Program

→ People with arthritis have similar benefits if they participate in disease specific (Arthritis Self-Management Program, or generic (Chronic Disease Self-Management) workshops.

→ A mailed version of the Arthritis Self-management program was successful in English,

Spanish and for African Americans who had called and asked for the mail delivered tool kit.

- The Arthritis Self-Management Program leads to sustained (2-year) benefit.
- Arthritis Self-Management can be effective for those 80 and older.
- The Arthritis Self-Management Program can be effective when delivered via the Internet.

## 1990+ The Chronic Disease Self-Management Years

In the early 1990s we developed and studied the Chronic Disease Self-Management Program. Early studies were funded by California state tobacco money and the Agency for Health Care Policy and Research. This study was conducted in conjunction with Kaiser Permanente. We found that treatment participants when compared to randomized controls increased healthful behaviors, improved health status and had less health care utilization.

The original CDSMP study was followed up by a longitudinal study that included several Kaiser Permanente regions. This study had findings similar to the original study.

As part of the U.S. Recovery Act, a second large translation study included 22 sites in the United States. Again, the findings were similar to the original study.

There were several other key studies showing the effectiveness of the CDSMP outcomes and cost savings in England.

A number of studies were also conducted to assess the effectiveness of CDSMP:

- As an on-line program (Better Choices Better Health)
- For people with severe mental health problems
- For people with Diabetes
- As a program delivered through the mail
- Of the CDSMP for people with Depression

In 2017, a workplace version of the CDSMP was developed in cooperation with Matthew Smith at the University of Georgia. The content is the same as the CDSMP, but the wCDSMP meets 55 minutes twice a week for six weeks. It is used only for workplaces. Dr. Smith conducted the wCDSMP study, and a paper is in progress.

## 1994+ The HIV Self-Management Years

In response to the HIV/AIDS crisis, the CDSMP was adapted for use in people who were HIV positive. This was done in conjunction with Allen Gifford MD, who at the time was a Robert Wood Johnson Clinical Scholar at Stanford. There have been several trials of both the original program as well as a program revised in the mid 2000s. Since that time, mainly because of new drugs, the face of HIV has changed to look more like other chronic conditions. Thus, the workshop was revised again and released in early 2016.

## 1995+ The Chronic Pain Self-Management Years

In the mid-1990s, Dr. Sandra LeFort in St. John's Newfoundland adapted the ASMP for use by people with chronic pain. The workshop has been used for many years in Canada and more recently in Denmark. In 2015, the workshop was completely revised and a book was written to accompany the workshop. It was released for public use in mid 2015. It is hoped that a Spanish translation of this workshop will be available in 2016.

## 2004+ The Diabetes Self-Management Years

Of the most common chronic conditions, diabetes, is the most behaviorally complex. For this reason we decided to explore the possibilities of using a community-based self-management program to assist with the growing problem of type II diabetes. Funding for these studies came from the National Institute of Nursing Research, the Archstone Foundation and the National Institute for Diabetes and Kidney Disease. We were assisted by many members of both the American Diabetes Association and the American Association of Diabetes Educators. There are 3 diabetes programs, Spanish (the first program developed), English, an adapted translation of the Spanish program, and Better Choices Better Health, the online diabetes program. All of these programs have been shown to lower A1C, and improve health behaviors and health status.

## 2010+ The Building Better Caregivers Years

In approximately 2010, the U.S. Veterans Administration approached us about developing and evaluating an online program for the caregivers of veterans who suffered from traumatic brain injury, post-traumatic stress disorder, or other cognitive problems. The result was the online Building Better Caregivers, which underwent a small study and is currently used by the V.A. caregiving program, as well as other organizations in the United States.

In 2013 we received a grant from the Archstone Foundation to adapt the online BBC to small face-to-face group format. This has ended, and we released the small group program for general community use in Spring 2017.

## 2012+ The Cancer Thriving and Surviving Years

In the early 1990's the Macmillan Trust (a cancer charity in the United Kingdom), adapted the CDSMP for use with cancer survivors. In addition, Dr. Lorig is a cancer survivor and her personal experience led to an interest in this topic. These two factors came together when Stanford was asked by the University of Hawaii to develop an online program for cancer survivors and to assist with its evaluation. This collaboration resulted in Cancer: Thriving and Surviving.

In 2012, a second collaboration was formed between Cancer Centers in Colorado, Virginia and Texas, as well as the Stanford Patient Education Research Center. This collaboration developed and studied a small group, face-to-face version of online Cancer Thriving and Surviving. This was released for public use in 2015.