

Chronic Disease Self-Management Program

Developed at Stanford University, the Chronic Disease Self-Management Program is a self-management education intervention that aims to build participants' confidence in managing their health and to keep them active and engaged in their lives. People with chronic health conditions such as arthritis, diabetes, heart disease, and lung disease participate in the program together. Those with multiple chronic conditions may find it especially helpful. In a series of interactive workshops, participants learn techniques—such as problem-solving, decision-making, and goal-setting—for managing problems common to people with chronic diseases.

Selected Studies at a Glance

Author, Year	Design	Participants	Outcomes
Lorig KR, Ritter P, Stewart AL, et al. (2001)	2-year longitudinal followup to RCT	831 participants from community settings in U.S. > 40 years old	↓ ER/outpatient visits ↓ health distress ↑ self-efficacy
Lorig KR, Sobel DS, Ritter PL, et al. (2001)	Before-after cohort study in "real-world" setting Baseline and 12-month outcomes	489 participants	↑ exercise ↑ cognitive symptom management ↑ communication with physician ↑ self-efficacy ↑ health status ↓ ER visits
Barlow JH, Wright CC, Turner AP, et al. (2005)	12-month followup to pre-post study of community-based chronic disease self-management course	171 participants from community settings in England	Sustained outcomes at 4 months: ↑ cognitive symptom management ↑ self-efficacy ↑ communication with physician ↓ fatigue ↓ anxiety and depression ↓ health distress
Kennedy A, Reeves D, Bower P, et al. (2007)	RCT with wait-list control 6-month outcomes	629 participants from community settings in England	↑ energy ↑ self-efficacy ↔ health utilization ↑ quality of life 70% probability of cost-effectiveness
Gitlin LN, Chernet N, Harris LF, et al. (2008)	Pre-post evaluation of culturally modified CDSMP Baseline and 4-month post-interviews	519 African-American elders	↑ exercise ↑ cognitive symptom management ↑ energy ↑ self-efficacy ↓ health distress ↓ interference in life activities ↔ health utilization
CDC (2011)	Meta-analyses of 4–6 month and 12-month outcomes	23 studies, RCTs and longitudinal 8,688 participants	Outcomes sustained at 12 months: ↑ self-efficacy ↑ cognitive symptom management ↑ aerobic exercise ↓ health distress, depression ↓ social/role limitations ↓ pain, shortness of breath

Selected References

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