

Family Intervention – Goals

- **Improve diabetes self-management care**
- **Increase physical activity and healthy eating**
- **Enhance family-provider relationships**
- **Increase access to community resources**
- **Increase healthcare consumer skills**



Family Intervention – Design

- Patients with type 2 diabetes recruited from 2 hospitals, 1 community health center
- Phase 1: Legacy of distrust in the community → non-randomized, 1 group, pre-, post-test design (n=180, cohort 1)
- Phase 2: Increased community trust → randomized intervention & control, pre-post design (n =164; 87 delayed [control], 77 immediate)

CBPR Principle: Integrates and creates a balance between knowledge generation and action for mutual benefit of all partners.

Family Health Advocates (FHAs)

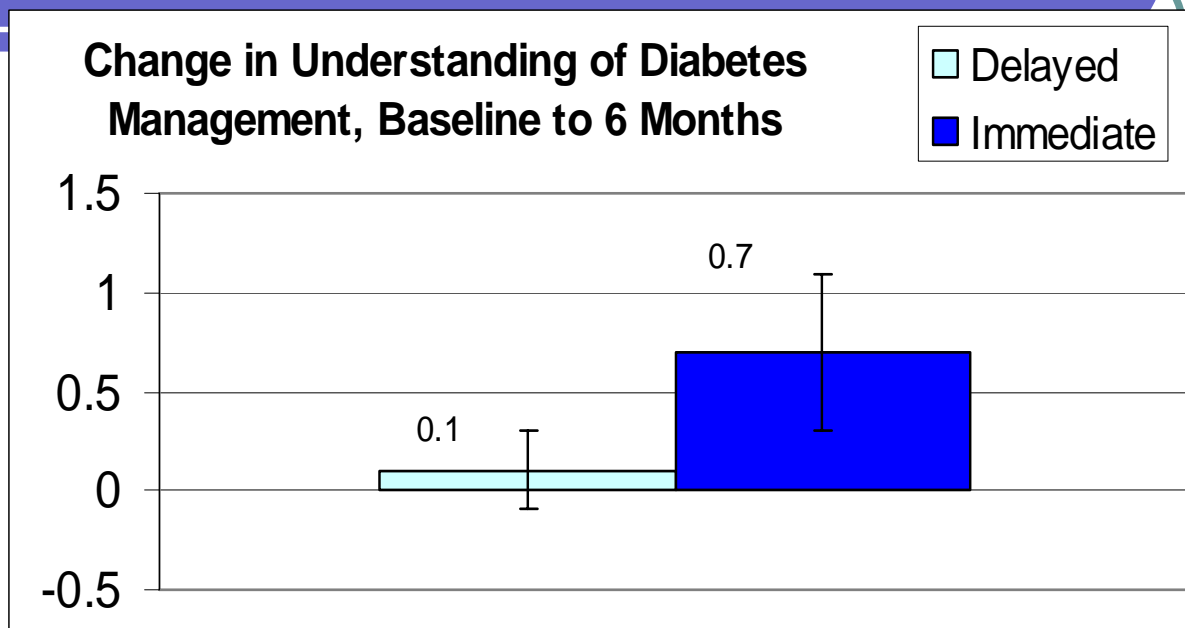
- Led 11-session Journey to Health/*El Camino a la Salud* curriculum
- Conducted home visits with clients
- Attended clinic visits, and provided resources



CBPR Principles: Promotes co-learning and capacity building among all partners involved. Begins with and builds on strengths and resources within the community.



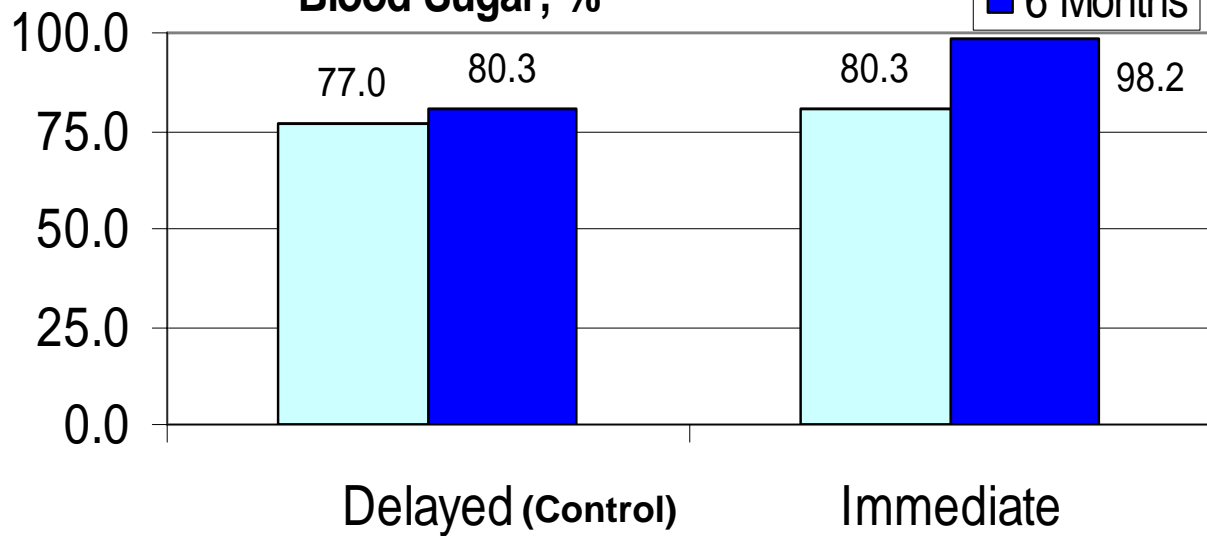
Understanding of Diabetes Management, Mean (s.e.)



Question: "How well do you understand how to manage your diabetes?",
1 = Not at All to 5 = Very Well. Significant improvement between
immediate and delayed arms, $p < .01$.

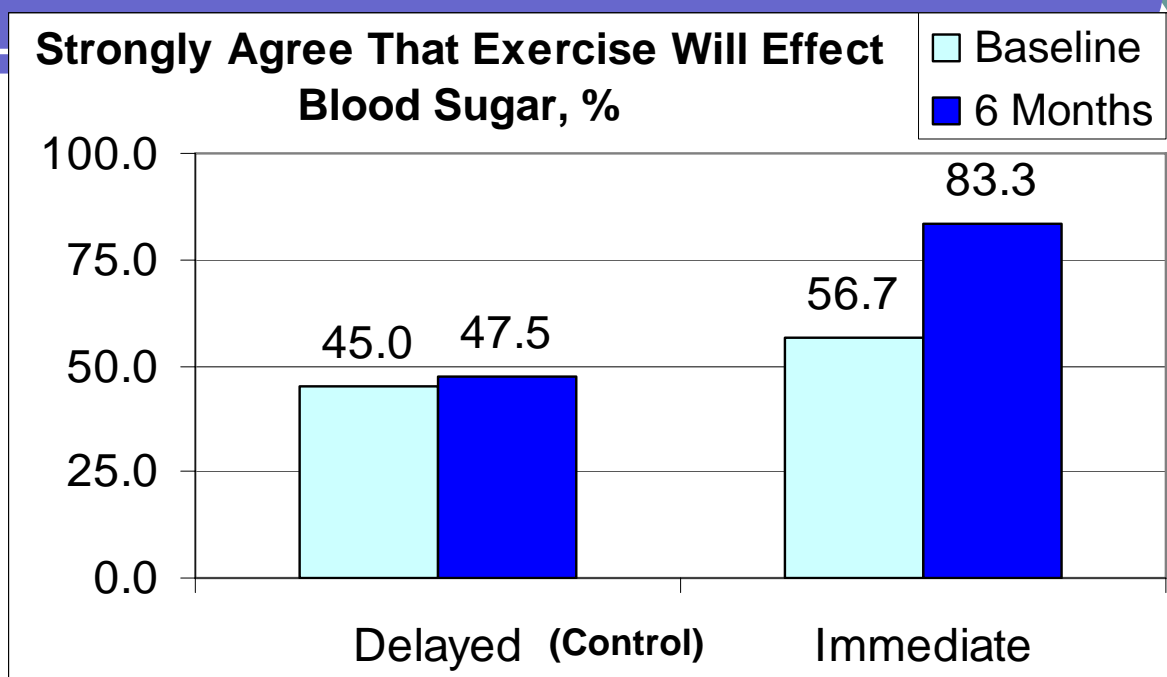
Knowledge of Diet and Blood Sugar

Strongly Agree That What One Eats Will Effect
Blood Sugar, %



People in the immediate intervention improved, relative to the delayed intervention group, in understanding the relation between diet and blood sugar, $p < .05$.

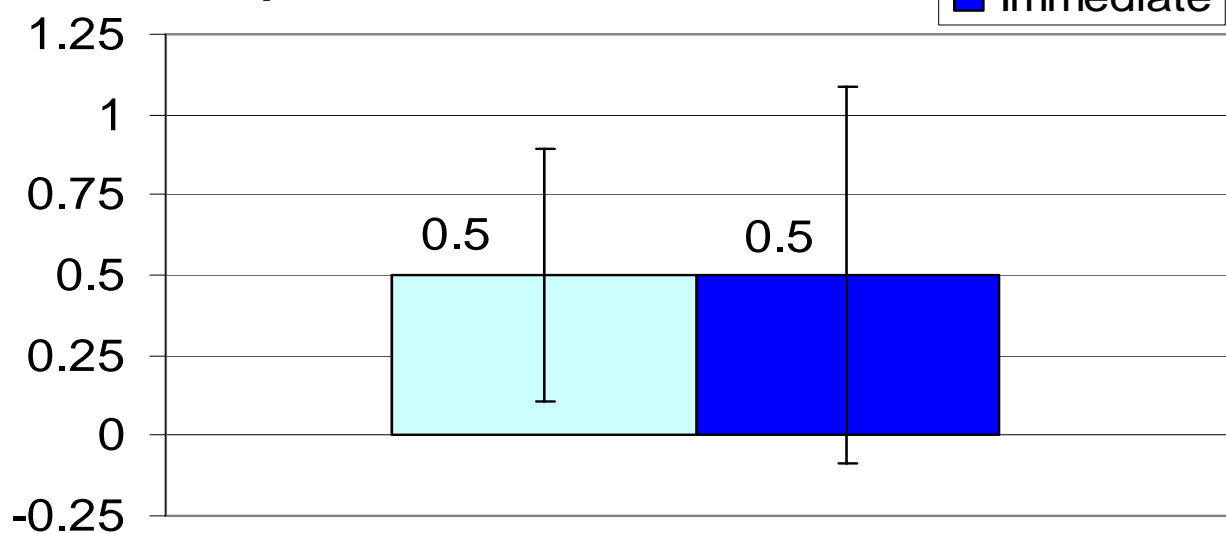
Knowledge of Exercise and Blood Sugar



People in the immediate intervention improved, relative to the delayed intervention group, in understanding the relation between exercise and blood sugar, $p < .01$.

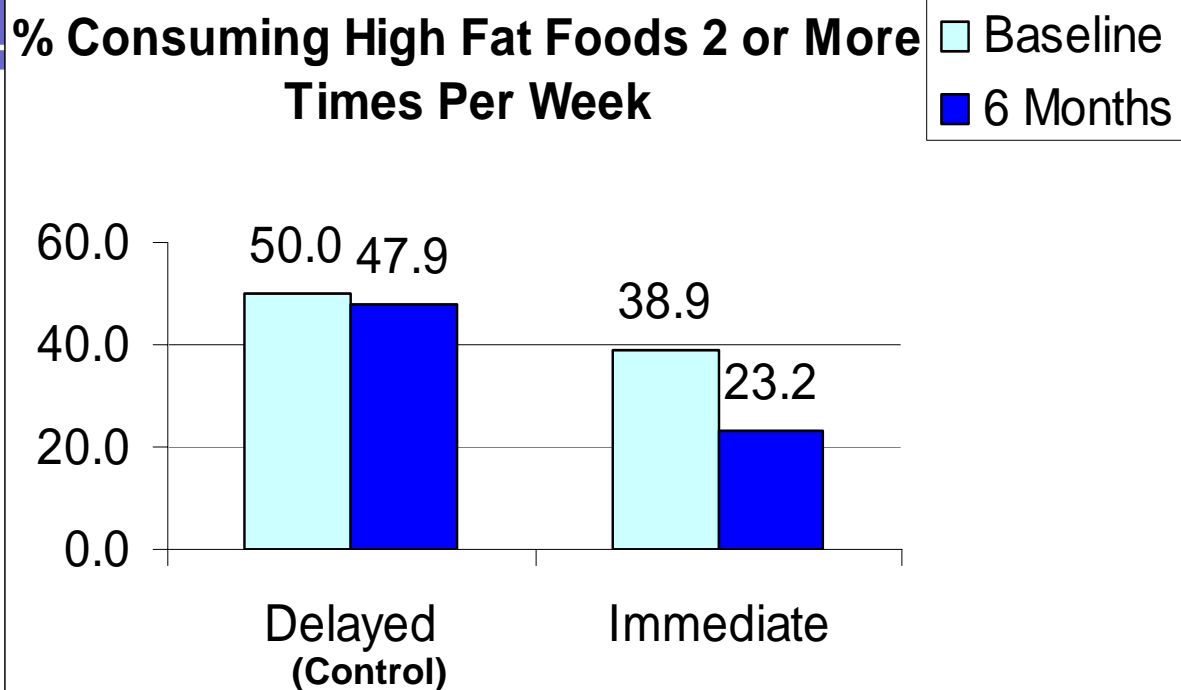
Fruits & Vegetables, Baseline to 6 Months

Increase in Mean Daily Fruit & Vegetable Consumption, Baseline to 6 Months



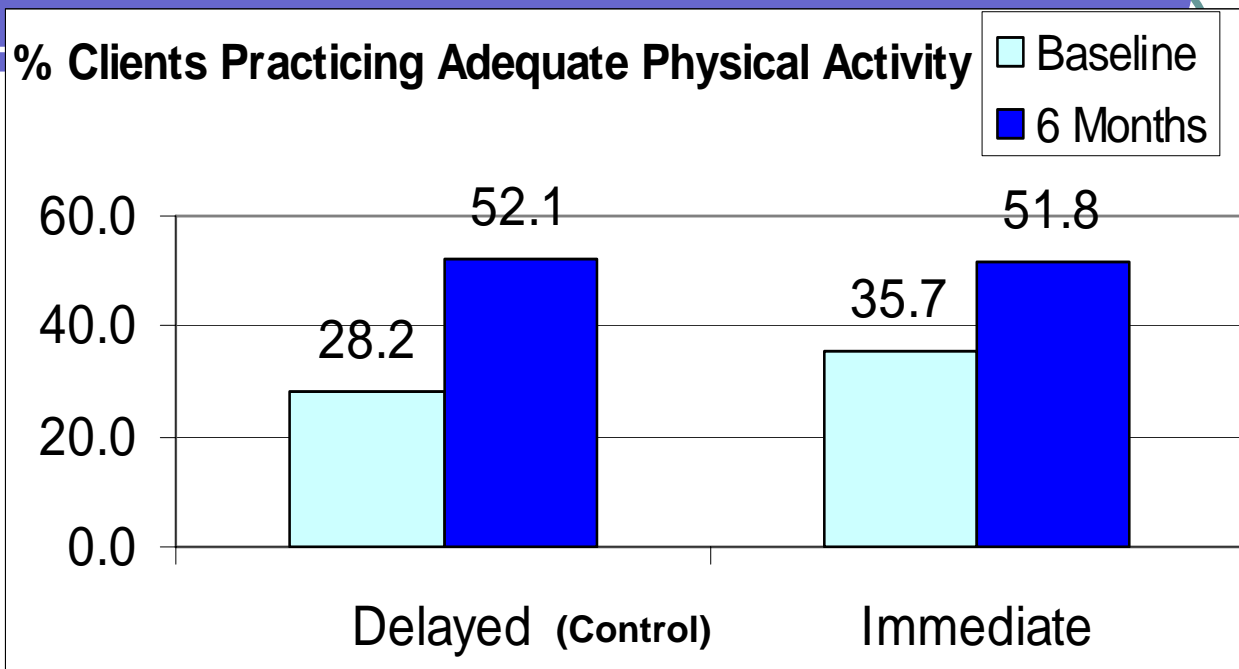
Average daily fruit and vegetable consumption improved in both the delayed and immediate intervention arms.

High Fat Foods, Baseline to 6 Months



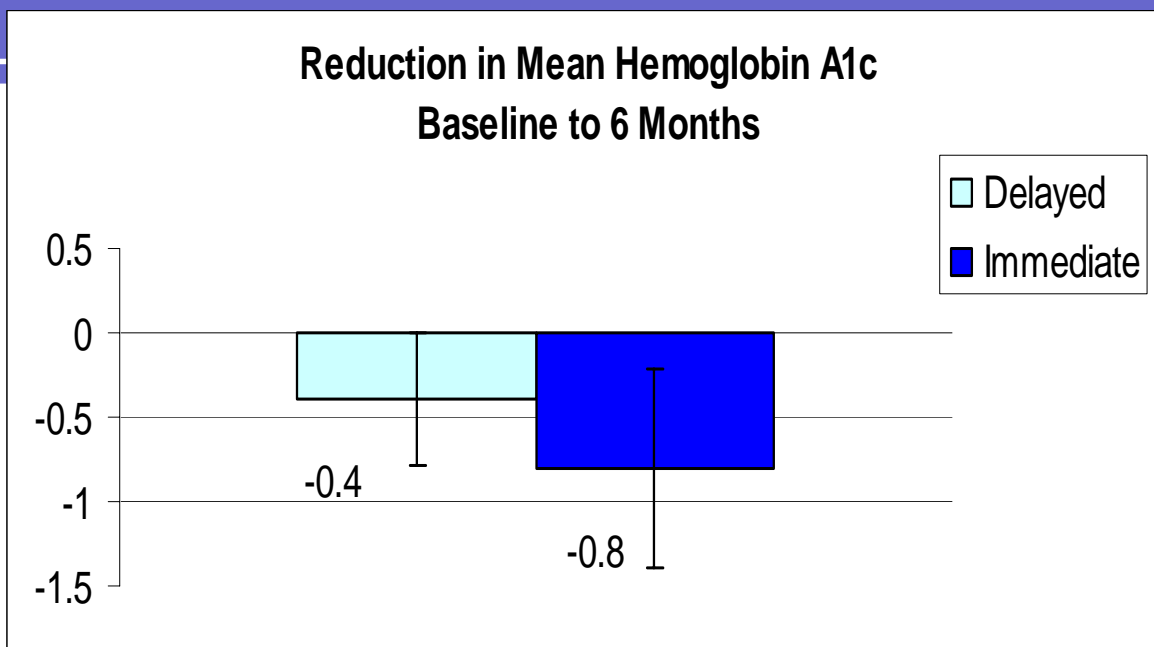
Immediate intervention participants reduced consumption of high fat foods from baseline to 6 months, $p < .10$. High fat foods include fried foods, potato chips, pork rinds, gravy, etc.

% Practicing Adequate Physical Activity



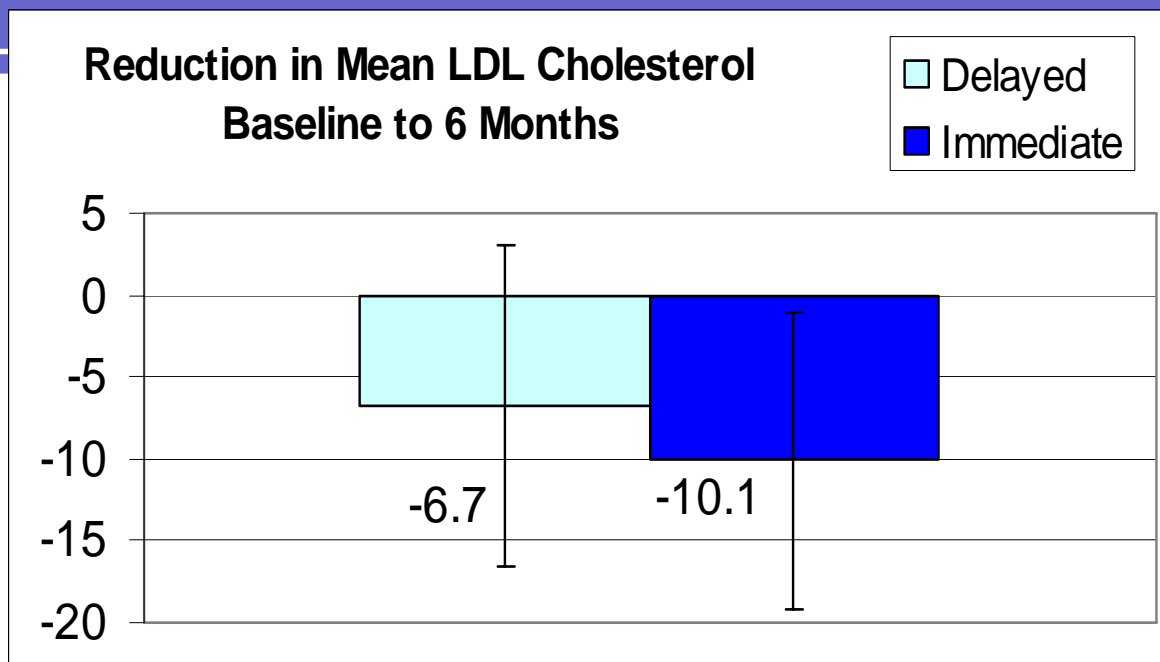
Both the immediate and delayed groups increased their physical activity from baseline to 6 months. Adequate physical activity is 30 minutes/day of moderate activity 5 days/week or 20 minutes of vigorous 3 days/week.

Hemoglobin A1c, Baseline to 6 Months



Hemoglobin A1c dropped significantly within the immediate intervention Group, $p < .01$. The difference between the drops in A1c between the immediate and delayed groups was not statistically significant.

LDL Cholesterol, Baseline to 6 Months



The mean LDL dropped at a borderline significant level, $p < .10$, within the immediate group. The difference between the drops in LDL between the immediate and delayed groups were not statistically significant.