Evaluation of PEP Talk: Diabetes, Healthy Feet and You
A Peer-led Program modeled on the Chronic Disease Management Framework

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Background
Diabetes, like other types of chronic diseases, requires the use of self-management educational models to increase individuals' self-confidence and foster their motivation to control their disease to help them prevent and manage complications, such as foot ulcers and amputations (Lurig et al., 2006). Self-management education has been enriched by involving lay peer educators who share their personal journeys and commitment to change. The Peer Education Program PEP Talk: Diabetes, Healthy Feet and You, the first self-management program to focus on the prevention of Diabetic foot ulcers, was delivered in 10 Canadian provinces. The program consisted of the delivery of workshops led by trained volunteer peer leaders (living with diabetes and neuropathy) supported by healthcare professionals (HCPs), connected via a web portal, and electronic reminders for community participants.

Purpose
- To evaluate PEP Talk: Diabetes, Healthy Feet and You in terms of impact on self-management behaviours and foot complications; development of a network of dedicated Peer Leaders and HCPs; knowledge gained; satisfaction with community workshops; and portal use.

Methods
With ongoing input from a national interprofessional Expert Advisory Group (EAG), HCPs and Peer Leaders were recruited in 12 communities in 10 provinces
- Curriculum was developed for the training event for HCPs and Peer Leaders and for the community workshops
- A face-to-face training event was conducted
- A web portal was developed
- Peer Leaders and HCPs
- Developed individualized outreach action plans for their communities and conducted regular community educational workshops
- Were supported throughout the program by the PEP Talk team through conference calls, email, e-tips.

Results
- 62 workshops were conducted in 12 sites in 10 provinces within the 12 months of the program.
- Self-management behaviour change: 91% of interviewed workshop participants indicated that they altered specific self-management behaviours, e.g., checking their feet more frequently, wearing shoes inside the house, checking their blood sugar.
- Impact on foot complications: Of the community workshop participants who provided feedback up to a year after attending a workshop, only one person (3%) developed an ulcer and no one had an amputation.
- Dedication of the Peer Leaders and HCPs: Peer Leaders and HCPs volunteered and were highly committed to bringing the program to their communities.
- Participants' knowledge: Community workshop participants' knowledge increased from 7.8 to 8.4 out of 10 from pre-to post-workshop (based on combined feedback from 294 participants from 45 sites).
- Community workshops endorsed the program and were enthusiastic about the opportunity to hear the stories of the Peer Leaders and to learn about self-management from them.
- Web portal success: In less than one year there were 54,559 visits with 36,703 unique page views.

Conclusions
Persons with diabetes, aided by family or carers, were empowered to achieve their potential to self-manage their feet through Diabetes, Healthy Feet and You peer-led education, support, and linkages to the diabetes community, to promote ulcer and amputation prevention.

References

Future plans for PEP Talk
A licensing model has been developed for PEP Talk, Healthy Feet and You to expand it across Canada and train more trainers in different communities.

www.diabetespeptalk.ca

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