

Laura Jackson

Telephone-based Peer Support for African Americans with Diabetes: A Pilot Study

Background & Purpose: African-Americans have one of the highest rates of diabetes and diabetes-related complications among ethnic populations and face significant health care disparities despite membership in managed care organizations. The purpose of this 3-month pilot study was to evaluate the impact of a racially concordant telephone-based peer support program and clinician-led diabetes educational classes on hemoglobin A1c (HbA1c) levels of African American patients diagnosed with type 2 diabetes in a managed care setting. We hypothesized that these patients would be more motivated to perform the diabetes self-care necessary to improve glycemic control if they were giving and receiving support from fellow African American patients with diabetes and attended classes given by African American clinicians.

Methods: Twenty-one African American patients with poor glycemic control who were receiving care at a large managed care organization completed HbA1c lab draws, received peer communication skills training, and attended monthly support meetings on diabetes self-management. At the initial group session, participants self-selected their telephone partners and were asked to contact their partner at least once a week by telephone. At the completion of the 12-week period from August 1 to October 31, 2012, participants completed lab draws (HbA1c) and a patient satisfaction questionnaire. Sixty-two percent of subjects experienced a clinically meaningful reduction of HbA1c levels of greater than 1%. A significant reduction in average HbA1c levels following the intervention was found (mean reduction -1.5%, standard deviation 1.4%) ($p < .0001$). Findings from the study suggest that the combination of racially concordant telephone-based peer support and clinician-led education offers a promising cost-effective means of supporting and improving the health outcomes of African American patients with diabetes.

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