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OPPORTUNITIES FOR GROUP SELF-MANAGEMENT PROGRAMS TO REDUCE THE BURDEN OF ARTHRITIS IN AUSTRALIA. R H Osborne, K Whitfield, J Spinks. Centre for Rheumatic Diseases, The University of Melbourne.

Aim: To evaluate the potential of self-management programs to reduce morbidity and improve management of people with arthritis in Australia. To produce a framework which guides researchers in developing stronger targeted research designs for the evaluation of self-management programs.

Methods: The impact, self-efficacy/empowerment and burden of arthritis were examined within a 'program logic' framework incorporating public health, economic and policy opportunities. To develop this initial program logic, a review of the relevant literature and a workshop with key stakeholders was conducted. Stakeholders included clinicians, course leaders, academics and policy makers.

Results: Literature review and workshop findings were consolidated into the development of a schematic program logic for generic self-management programs. The model covers a. Empowerment of individuals and carers, b. collaboration between patients, health care services and non government organisations, c. effects on communities and d. the potential effects on public health. The program logic represents the probable pathways by which self-management programs might lead to improved proximal and long-term outcomes for individuals, communities and public health gains.

Conclusions: The beneficial effects of self-management programs are cited to be improvements in well-being and reduced healthcare utilisation, but these have not been consistently demonstrated in controlled trials. A 'program theory' understanding of how self-management might impact on the burden of chronic disease will assist clinical and public health research in this area. Evidence from strong study designs and system-wide evaluation methodologies are required before we can have confidence that these programs are equitable and effective public health interventions.