

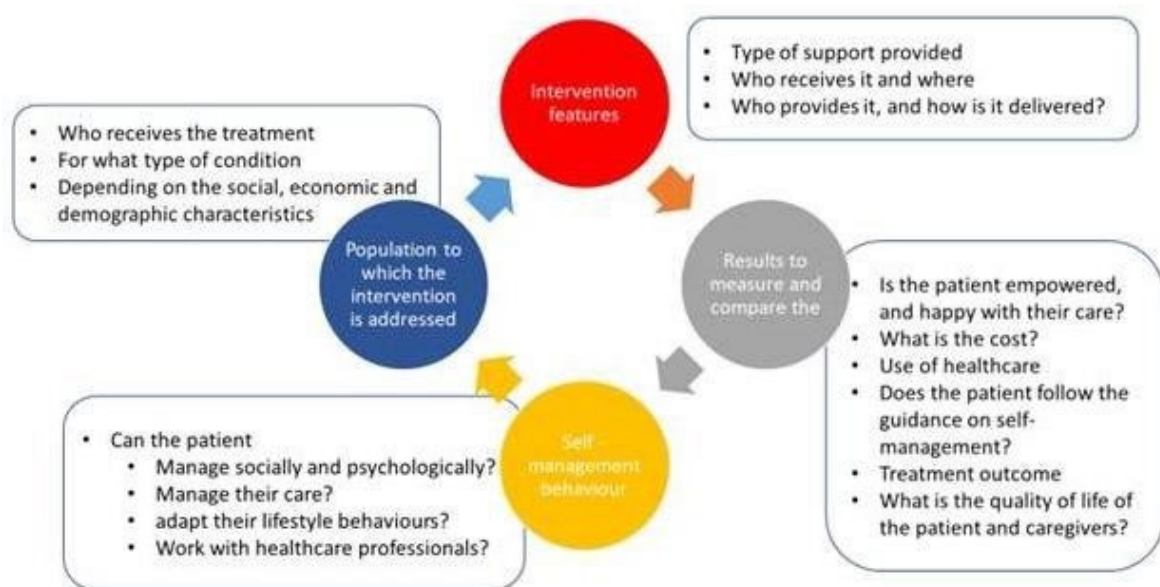
Lay Summary – Creation and Agreement on a Classification of Self-Management Interventions

Background – Interest in self-management is growing because the role of patients in health and care is changing; patients are increasingly active participants in their own healthcare. The number of studies investigating the effectiveness of self-management interventions (SMIs)* is quickly increasing but they vary in quality and terminology used. Creating a consistent taxonomy - a tool to name and classify the interventions - can help provide us a ‘common language’ for all researchers, law makers, healthcare professionals and managers, but also patients and patient organisations, which will facilitate further research in the area of self-management interventions and boost their reputation as well.

Goal – To develop a widely accepted taxonomy - a tool to name and classify self-management interventions— and help identify key elements of these SMIs (for the four chronic conditions of COMPAREU) and then make a comparison among these SMIs.

Methods – The taxonomy/also call COMPAREU tool was developed based on the results of a literature review, later revised by the COMPAREU team, and then validated by a group of international experts in self-management and chronic conditions, together with patient representatives.

Results – Our research identified 132 key elements of the self-management interventions, grouped into four categories: 1) intervention features, 2) self-management behaviours, 3) results to measure and compare the different interventions and focus groups, and 4) population to which the intervention is addressed. The following figure show the most relevant categories.



*SMIs are important health care interventions as they can help address the complex individual, social, and economic impacts of chronic conditions, improve outcomes and reduce health care costs associated with chronic conditions. For this project’s purposes, **self-management** is defined as ‘what individuals, families and communities do with the intention to promote, maintain, or restore health and to cope with illness and disability with or without the support of health professionals. It includes but is not limited to self-prevention, self-diagnosis, self-medication and self-management of illness and disability.’

Background –

In the last ten years more than 41,100 articles regarding self-management interventions (SMIs), or techniques have been published. This growing interest might be related to the more active role of patients in healthcare - patients are more and more seen as co-creators/designers of their treatment pathways, instead of *just* passive recipients.

Although there are many studies, there is not *one* definition of self-management, and the steps are not the same across research, doctors' practices, or in health laws. This makes it difficult for researchers to compare different treatments because the ways in which people describe the steps they took, and their results is *too* different to compare.

The value of self-management interventions for patients

People living with chronic conditions mostly manage their condition themselves, at home and in the community, often helped by family or other informal carers. Providing patients and caregivers with the right support for self-management and living well with a condition is an essential part of good chronic disease care. The right kind of self-management intervention can improve health results making it possible for patients to be active participants and co-creators for their care. Self-management is one piece of the healthcare puzzle – when people are better equipped to manage their condition, it can lead to a better emotional and physical quality of life.

'Self-management' refers to when a person with a chronic condition takes steps to care for their condition themselves, monitors and manages their signs and symptoms, and works together with their doctor(s) to adjust their treatment when necessary and understand when to adjust their behaviours (such as sticking to their treatment, work, leisure or other daily activities).

Why do we need this tool?

A classification tool helps researchers to categorize complex factors according to ideas that are shared and accepted. Having a formal tool helps the COMPAR-EU project to identify the key types of SMI for chronic conditions, and to compare between sometimes very different interventions, hence, developing this tool is so important to the work of the COMPAR-EU project.

[COMPAR-EU](#) is a project funded by the EU that aims to help bridge the gap between current knowledge gained from research studies and the actual practice of SMIs. The COMPAR-EU tool will be able to help to build a common language to understand self-management interventions; the design of future studies to understand their impact; and to compare different interventions. The tool should be easy to understand by different kinds of readers and should be at the same time complete *and* brief.

We believe that developing this tool for SMIs will be very useful for future research and can help us to better analyse, create and apply different SMIs for people who live with chronic conditions.

How was the tool developed?

The COMPAR-EU tool was developed using existing studies and was agreed by a group of international experts in self-management and chronic conditions together with patient representatives, using a type of structured communication which is used by groups to reach a consensus based on a series of questions. The group of experts participated in two rounds of questions to reach an agreement.

The tool has 132 important sections of a self-management tool, which are grouped into four categories: 1) intervention features, 2) self-management behaviour, 3) results to measure and compare the different interventions, and 4) population to which the intervention is addressed. The following figure show the most relevant categories.

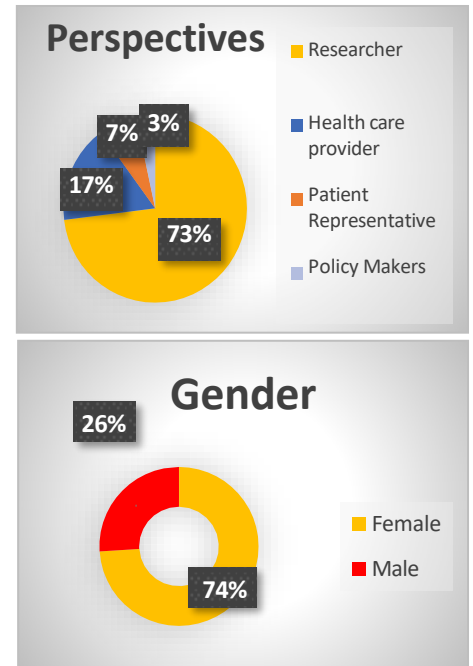
What was the profile of the experts?

The experts came from: the United Kingdom, Australia, Ireland, Canada, Spain, Norway, Belgium, the United States, and Germany.

What value does the tool add to existing knowledge?

The main characteristic of the COMPAR-EU tool is that its main purpose is to include a *complete* review of SMIs.

Earlier studies have found that the type of delivery, intensity, and focusing on changing behaviours were key parts of SMIs. The review of 257 previous studies on self-management classification helped the COMPAR-EU team to develop a solid basis to create a new and complete tool that includes all the important aspects of a self-management intervention.



Strengths and Limitations of the Tool

Strengths

- ✓ It is the first complete taxonomy, focusing not only on self-management support *but also* other characteristics of the intervention and factors like the target group, patient behaviour, and results.
- ✓ It was agreed by a group of experts with almost 10 years' experience each and a mix of professional backgrounds. Some professionals were experts in more than one field.
- ✓ The structured communication technique used is a scientifically proven method to create consensus.

Limitations

- The percentage of experts that responded to the first invitation was low although the final sample is considered appropriate for this technique.
- The number of sessions, doses administered and/or duration of the interventions were not included as characteristics because these were not considered as crucially important for these SMIs.
- One main challenge was to decide between the precision of the classification and the limitation to statistical power in processing very detailed classifications.

What happens next?

COMPAR-EU project will apply the tool to review other studies within the four chronic conditions of the Project: Type II Diabetes Mellitus (T2DM), obesity, COPD/lung disease and heart failure; this will test whether the tool was developed correctly, will help us make any changes if necessary, and will help us for future research.

We believe that this tool can contribute to future research by providing a clear way to categorise interventions. We recommend that the COMPAR-EU tool is used by researchers, healthcare professionals, lawmakers and others to:

- › Categorise self-management interventions based on an agreed terminology and definitions;
- › Translate research into practice for chronic conditions;
- › Design and classify self-management techniques;
- › Investigate existing studies and compare different self-management interventions;
- › Help patients discuss with their HCPs the most appropriate SMI for their particular situation [what the patient / HCP decision aid tools are doing]

Want to know more?

Please contact Mr Lyudmil Ninov, EPF Senior Programme Officer by email: lyudmil.ninov@eu-patient.eu or by telephone: + 32 2 274 08 67. You can also visit the project website: <https://self-management.eu/>

Project Coordinator –



Project partners –



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