

Self-Man: How effective, accessible and acceptable are self-management support interventions for men with long-term conditions?

This project

 will review the published evidence on selfmanagement support interventions to assess how effective, cost-effective, accessible and acceptable they are for men with long-term conditions.

It aims to

- assess the comparative effectiveness, costeffectiveness, accessibility and acceptability of self-management support interventions in men with long-term conditions.
- identify the perceived acceptability of selfmanagement support interventions amongst men of differing age, ethnicity and socioeconomic background.
- make recommendations for service commissioners and healthcare practitioners.

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THE UNIVERSITY of York

Around 15 million people in the United Kingdom have a chronic or long term condition — one that cannot currently be cured but can be managed through medication or changes in lifestyle. At any given age, men are more likely than women to develop the most common and disabling long term conditions, for example, diabetes, stroke, lung conditions or heart disease. These differences between men and women are not simply the result of genetic differences or something that cannot be changed.

There is very good evidence that supporting people to 'self-manage' a long term health condition results in better health for patients, fewer admissions into hospital, and large cost savings for the NHS. As a result, there are various initiatives, support systems and programmes in place throughout the NHS to help people improve their self-management skills. However, less than one third of attendees at these types of interventions are male.

Although we know that men are worse than women at managing their health and attending health services, we know little about whether there are differences in how men and women respond to self-management support interventions and, if there is, the types of interventions that are the most effective, cost-effective, accessible and acceptable for helping men manage their condition.

This project will review the published evidence on self-management support interventions to assess how effective, cost-effective, accessible and acceptable they are for men with long-term conditions.



How will the review work?

Much of the existing research that has been carried out on self-management support interventions has been drawn together into several Cochrane Reviews – the highest standard in evidence-based health care – which offer a summary of the benefits and shortcomings of these types of interventions. Although many high quality Cochrane Reviews now exist, it is difficult for practitioners, service planners and policy makers to determine 'what works best for whom' because none of these existing reviews have specifically focused on the benefits and shortcomings of self-management support interventions for men.

Our review will:

i) identify randomised controlled trials from existing Cochrane Reviews in this area to investigate whether self-management support interventions are beneficial, cost-effective, accessible and acceptable for men with a long term health condition; and,

ii) identify qualitative research to investigate men's actual experiences of self-management interventions and whether these may differ between men of differing age, ethnicity and socio-economic status.

How can this review help inform health care practice?

We will generate outputs that will provide clear guidance to NHS commissioners, managers and practitioners on whether (and how) current self-management interventions need to be adapted to be optimally effective in, accessible by, and acceptable to men with long term conditions.

We will develop bespoke, user-friendly summaries containing evidence-based actionable messages that will highlight the implications of the evidence generated from our project in relation to local service delivery.

The Research Team

The project research team is a collaboration between researchers at the University of York, University of Manchester, Glasgow Caledonian University and the University of Glasgow.

- Dr. Paul Galdas, Chief Investigator, Department of Health Sciences, University of York
- Professor Pete Bower, Professor in Health Services Research, University of Manchester
- Professor Simon Gilbody, Professor in Health Services Research, University of York
- Dr. Lisa Kidd, Research Fellow in Public Health, Glasgow Caledonian University
- Professor Kate Hunt, MRC Social and Public Health Sciences Unit, University of Glasgow
- Dr. Christian Blickem, Research Associate, University of Manchester
- Dr. Kerri McPherson Reader/Health Psychologist, Glasgow Caledonian University
- **Dr. Gerry Richardson,** Senior Research Fellow, Centre for Health Economics, University of York
- Ms. Jennifer Fell, Research Fellow, Department of Health Sciences, University of York
- Dr. Zoe Darwin, Research Fellow, Department of Health Sciences, University of York

Timeline

The study commenced in June 2013. The estimated publication date of our final report is in December 2014.







Contact

Dr Paul Galdas Chief Investigator



Department of Health Sciences Seebohm Rowntree Building University of York Tel: 01904 321647 Email: paul.galdas@york.ac.uk