



# Implementing The 3Ms eHealth Intervention in Clinical Settings: Exploring Health Care Providers' Impressions

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## Introduction



an eHealth Intervention to promote parental supervision and monitoring among Black youth with Type 1 Diabetes (T1D)

### What We Know:

- Parental monitoring, i.e., direct supervision and monitoring of adolescents' daily diabetes care, is associated with improved diabetes outcomes
- Adolescence = high-risk period during which youth with T1D often experience declines in illness management and increases in HbA1c

**Target Population:** African American teens and their caregivers

**Why?:** Black youth with T1D demonstrate worse illness management and diabetes health compared to White youth, elevating their risk for poor health outcomes including diabetes complications



### The 3Ms Advantage:

A brief three-session, eHealth approaches offer a flexible and accessible strategy to expand delivery of parenting interventions during routine diabetes clinic visits utilizing Motivational Interviewing (MI)

**Motivational Interviewing (MI)** is a goal-oriented method for increasing intrinsic motivation to modify behaviors by examining and resolving ambivalence.

**Past e-Health interventions** for adolescents with T1D have been developed but did not use MI, targeted parenting behaviors related to diabetes care, nor focused on BIPOC adolescents.

## Objective

Explore Healthcare providers (HCP) impressions of *The 3Ms*, an eHealth intervention to increase parental monitoring of Black adolescents' daily diabetes management.

## Methods

- Research assistants interviewed HCPs (N=7) from various disciplines at clinics where *The 3Ms* was delivered.

Who?:



- Ascension St. John Hospital
- Children's Hospital of Michigan



- Comer Children's Hospital
- University of Chicago
- University of Illinois Chicago
- La Rabida Children's Hospital

- Pediatric endocrinologists (n = 3)
- Clinical psychologist (n = 1)
- Behavioral health team member (n = 1)
- Certified diabetes educator and dietician (n = 1)
- Registered nurse diabetes educator (n = 1)



How?:

- Semi-structured telephone interviews
- Conventional content analysis via Nvivo
- Two coders who resolved all coding discrepancies to consensus

## Results

### Factors to Facilitate Intervention In-Clinic Delivery

**HCP Buy-in:** extent to which the intervention fits with the provider's ideas about patient care, patient needs, their beliefs about the intervention's efficacy

**Institutional buy-in:** perceived fit of the intervention within the overall institutional (leaders of organization saying yes) environment

**Good Fit:** fits with their individual provider goals regarding patient care and patient needs, highlighting their belief about the importance of family involvement

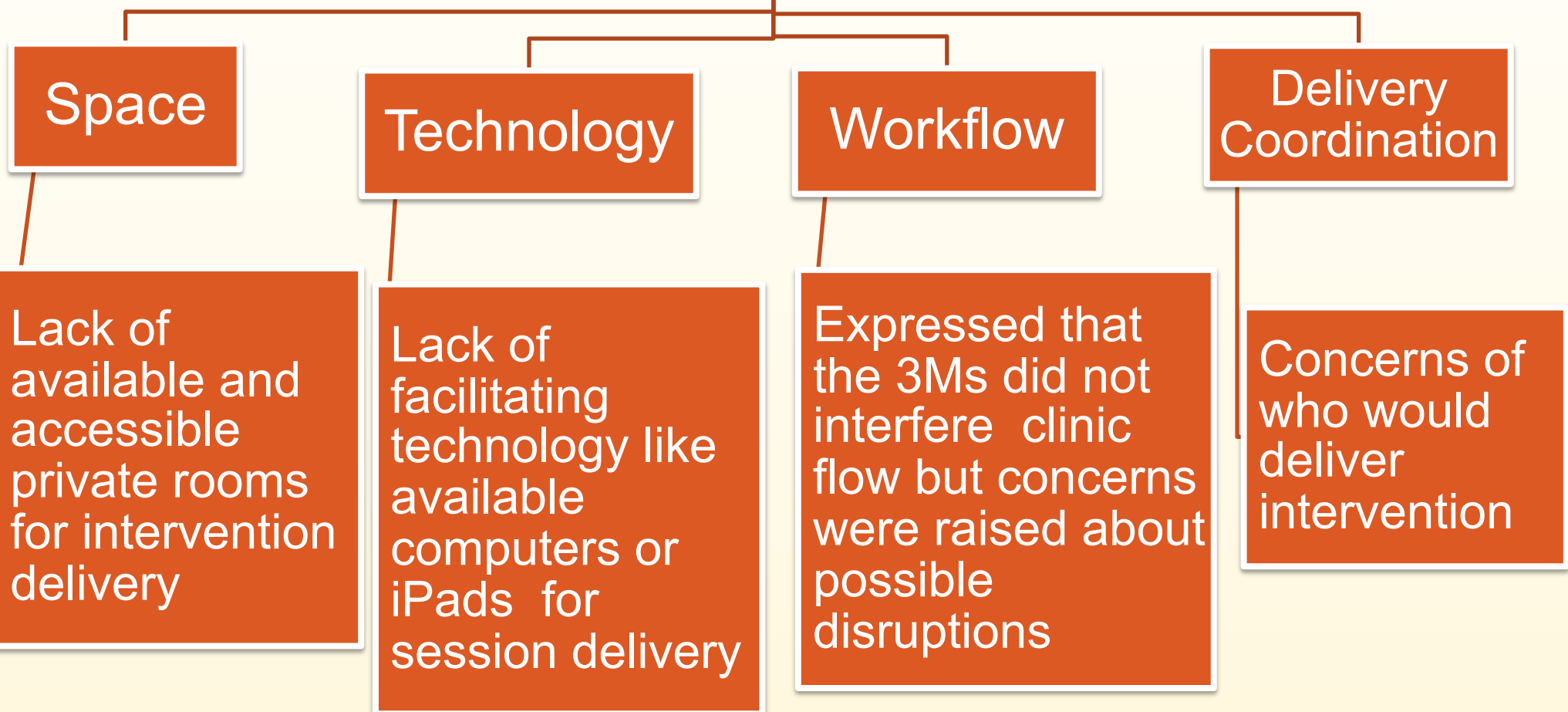
**Fill a Gap:** psychosocial support provided by The 3Ms, in conjunction with routine clinical care, would help improve diabetes health

"It would be great to further standardize our approach. So, it seems like it would fit really, really neatly."

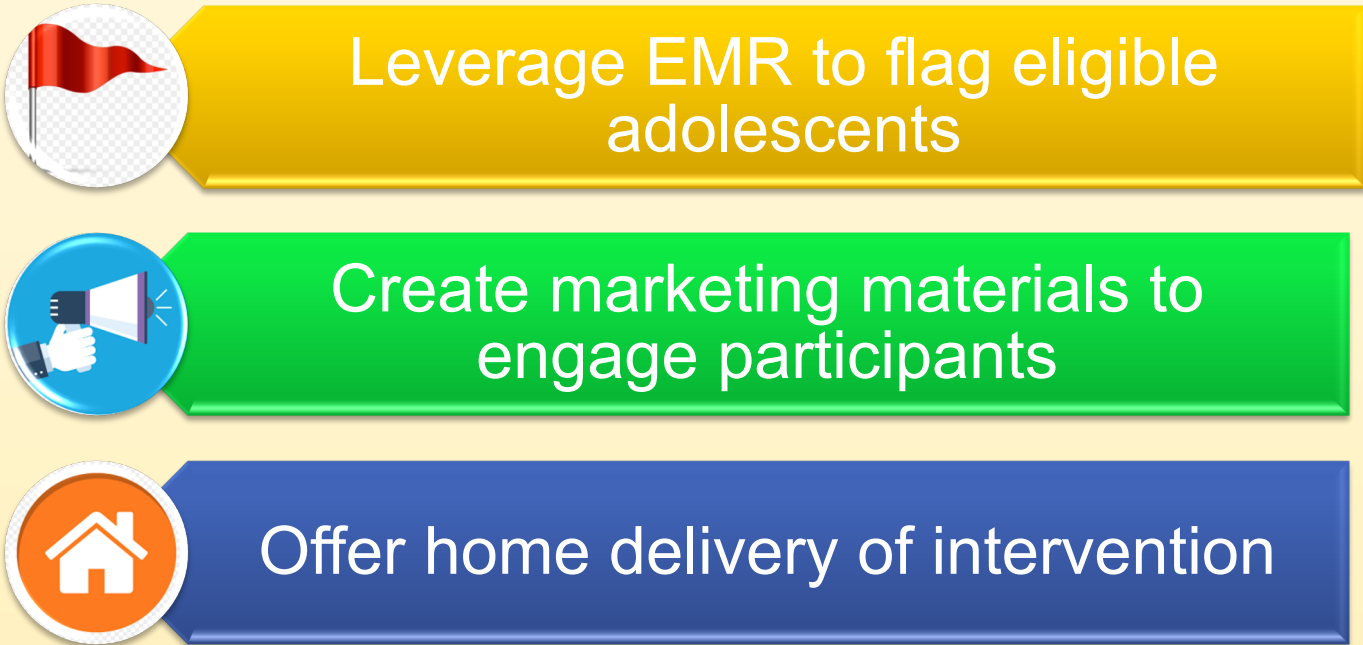
Lack of national guidelines for parental supervision of adolescent T1D, 3Ms could help further standardize diabetes parental management

## Results

### In-clinic Delivery Barriers



### Suggestions:



"I guess the barriers I see are time and space... if the providers are running behind, then we can't use the patient space, the clinic room to see the patient then we can't see the patient then we can't deliver the intervention."

## Conclusions

**HCPs reported:** they liked the intervention, it fit with their and the institutions' scope of practice and filled an important gap in care.

**HCP surfaced:** barriers and offered suggestions that could be tested in future studies.

"...pediatric endocrinologists understand the importance of parents' involvement. So, they would be excited to address that with their patients... and use any tool to improve that with their patients."

## Public Health Implications

*The 3Ms* intervention may provide a useful tool to optimize parenting strategies in a high-risk group of adolescents. Improved parental monitoring may improve teens' diabetes self-management which, in turn, could decrease the risk for adverse health complications.

## Acknowledgements

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