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**Abstract:** The Tennessee Arthritis Education Partnership has packaged funding from CDC through the Tennessee Department of Health, the arthritis evidence-based programs of the Tennessee Chapter of the Arthritis Foundation (AF) and the statewide educational network of the University of Tennessee to reach rural Tennesseans with arthritis self-management education.
ARTHRITIS EDUCATION PARTNERSHIP REACHING RURAL TENNESSEANS

BACKGROUND

Arthritis is the nation’s leading cause of disability. One in five adults reported doctor-diagnosed arthritis. As the population ages and becomes overweight, these numbers will continue to increase dramatically. Approximately two-thirds of people with arthritis are younger than sixty-five. Although arthritis affects all ages and racial and ethnic groups, women and older adults suffer more from the disease. Pain, aching, stiffness, and swelling in or around the joints are the common symptoms of this disease.

ACTION

One out of every three Tennesseans (approximately 36%) has some form of arthritis. To reverse this trend, the Tennessee Arthritis Action Plan recognized the importance of building partnerships to create opportunities to address the burden of arthritis in a variety of settings. In response to this state plan, the Tennessee Arthritis Education Partnership has packaged funding from Centers for Disease Control and Prevention (CDC) through the Tennessee Department of Health’s Arthritis Control Program ($60,000), the arthritis expertise and evidence-based programs of the Tennessee Chapter of the Arthritis Foundation (AF) and the statewide educational delivery network of the University of Tennessee (UT) Extension.

RESULTS

Since 2003, 60 UT Extension educators have become certified to teach the AF evidence-based programs: Arthritis Self-Help Program (ASHP), Arthritis Foundation Exercise Program and Tai Chi. These programs teach participants arthritis self-management skills. Research has shown that these programs reduce the pain of arthritis by 20% and physician visits by 40%. Certification training, travel expense and educational materials are funded through CDC. Program trainers and teaching materials are provided by AF.

The UT Extension certified instructors collaborate, plan, promote, implement and evaluate each program they offer in their counties. They partner with newspapers, health care providers (physicians, pharmacists, and physical therapists), senior centers, churches, recreation/wellness centers, county health councils, hospitals, worksites and health departments. Program evaluation includes a post-session survey and a three-month follow-up survey developed by a team of UT Extension educators, who have taught the programs. In 2006, 2,383 participants completed the AFSP, 747 participants completed the AFEP, and 3,607 participants completed the Tai Chi Program. Participants reported significant improvements in balance, overall health, ability to cope with arthritis and confidence in self-management and a decrease in pain and stiffness. Three-month follow-up surveys revealed that all.

participants continued to practice Tai Chi and maintained their ability to better cope with their arthritis and 88% of participants continued the AF exercise routines.

CONCLUSIONS

All partners at the state and local levels achieve more because of this partnership’s ability to package the resources of each partner. This unique partnership approach has expanded the availability of educational programs and resources in rural areas of Tennessee that previously had no participation and where access to arthritis health information and health care is severely limited. In 2005, CDC recognized the partnership as an Exemplary Program Model. In 2006, CDC awarded this partnership the prestigious Partnership Award, as a partnership model for other states to replicate. The Arthritis Foundation presented the partnership with the National Public Health Innovation Award for outstanding achievement.

REFERENCES


Tennessee Arthritis Education Partnership Web site: http://fcs.tennessee.edu/healthsafety/tnaep.htm