

OH, THE THINGS YOU'LL LEARN: BENEFITS OF A FEASIBILITY STUDY

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Many investigators define all preliminary studies as pilot studies. Some, however, recognize a feasibility study as an initial, even smaller-scale test of a promising idea done to determine whether the idea is sufficiently workable to justify continued development. The PURPOSE of this report is to describe a feasibility study and the benefits gained by conducting it.

METHOD: Our feasibility study “In-Home Diabetes Education for Rural Black Families” used 3 families, composed of an adult with type 2 diabetes, a non-diabetic adult support person, and a child age 9-18. We visited each family 7 times over 10 months: once for baseline assessment, four times for diabetes education, and twice for follow-ups. Instruments included a family functioning scale, a diabetes self-efficacy scale, a 3-day diet history, the SF-12, and an activity scale. We also kept field notes for each visit.

FINDINGS: The intervention increased families’ knowledge of diabetes and healthy food choices and their skills. One woman who had diabetes for 5 years tested her own blood glucose for the first time. The children memorized the signs of high and low blood sugar and learned to test their parents’ sugar and check their feet. The intervention had no effects on changing adults’ food habits or activity. Several unexpected “spin-offs” occurred, as when an adult support person introduced diabetes-friendly recipes into her church’s meals. Findings about the study conceptualization and method were many. Families meeting our sample criteria were scarcer than anticipated. Finding times when the participants could meet together at all and scheduling visits within the planned periods across families were extremely difficult. The instruments were too long and did not capture the nature of the rural or cultural contexts. Social class was an enormous influence on participant comprehension and benefit. Diet instruction for a family with only a sack of potatoes was a sobering experience, and low literacy required major adaptations of content. Having two people go on each visit was essential to allow working with family members separately and simultaneously. Field notes on each visit were crucial, especially as the study took much more time to complete than anticipated, and memory is fallible.

DISCUSSION: This very small study was extremely helpful to the development of our research. It made clear the need to reconceptualize the aims and study criteria, find shorter instruments that fit Black families better, revise the study timeframe, measure health literacy, and either build in or follow diffusion of the intervention into the larger community. It will enable us to write a stronger, wiser proposal for funding of a true pilot study. We commend the feasibility study practice to others.