GACD Implementation Science e-Hub

ADVANCED PROGRAMME

GLOBAL ALLIANCE FOR CHRONIC DISEASES
AN ALLIANCE OF HEALTH RESEARCH FUNDERS

MODULE 5 | AT SCALE IN THE REAL WORLD

Scale up and sustainability of Participatory Learning and Action to address type 2 diabetes in rural Bangladesh

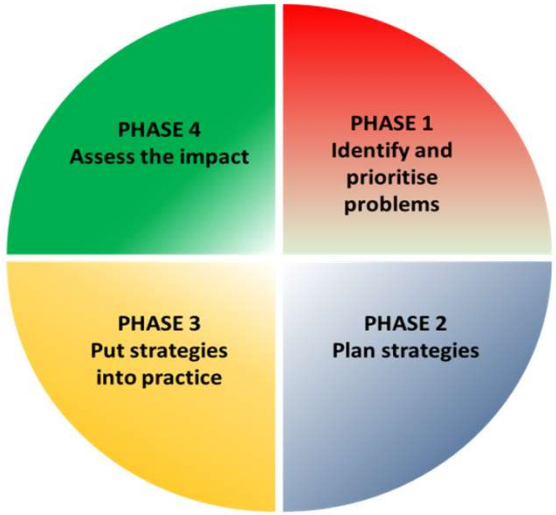
Dr Joanna Morrison and Dr Abdul Kuddus

UCL Institute for Global Health – UK

Centre for Health Research and Implementation – Bangladesh

Participatory learning and action (PLA)

- Dmagic was a three-arm, cluster-randomised trial
- Community mobilisation applied a four phase PLA cycle
- A large reduction in the combined prevalence of type 2 diabetes and intermediate hyperglycaemia with an absolute reduction of 20·7%.
- The 2-year cumulative incidence of diabetes was significantly lower in the PLA group compared with control, with an absolute incidence reduction o f 8·7%



Sustainability and scale-up

- Was PLA effective in improving health outcomes after the support ended?

Survey; Qualitative research

- How is scalability and sustainability possible outside of a research context?

Qualitative research and stakeholder engagement

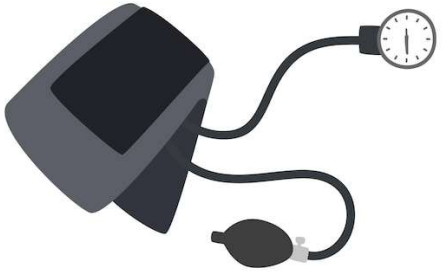
Pilot of an NCD mobiliser intervention

What happened when DMagic ended?

No groups were active

52% (n=63) had not met since the trial ended

+60 mins per week



Hypertension OR (95%CI) 0.73 (0.54, 0.97)

Controlled hypertension OR (95%CI) 2.77 (1.34, 5.75)

Why did groups stop meeting?

- Sustained effect of the group

"People don't meet. But their lifestyles have changed. Previously they thought, good food means rich food. Now, they realise that in most cases, rich food causes fatal diseases. They now eat more fruit and vegetables. I saw many group members give up smoking. People with diabetes walk (for exercise)…Your meetings have changed our community".

- Need for someone trusted, trained, and resourced, who gives new information

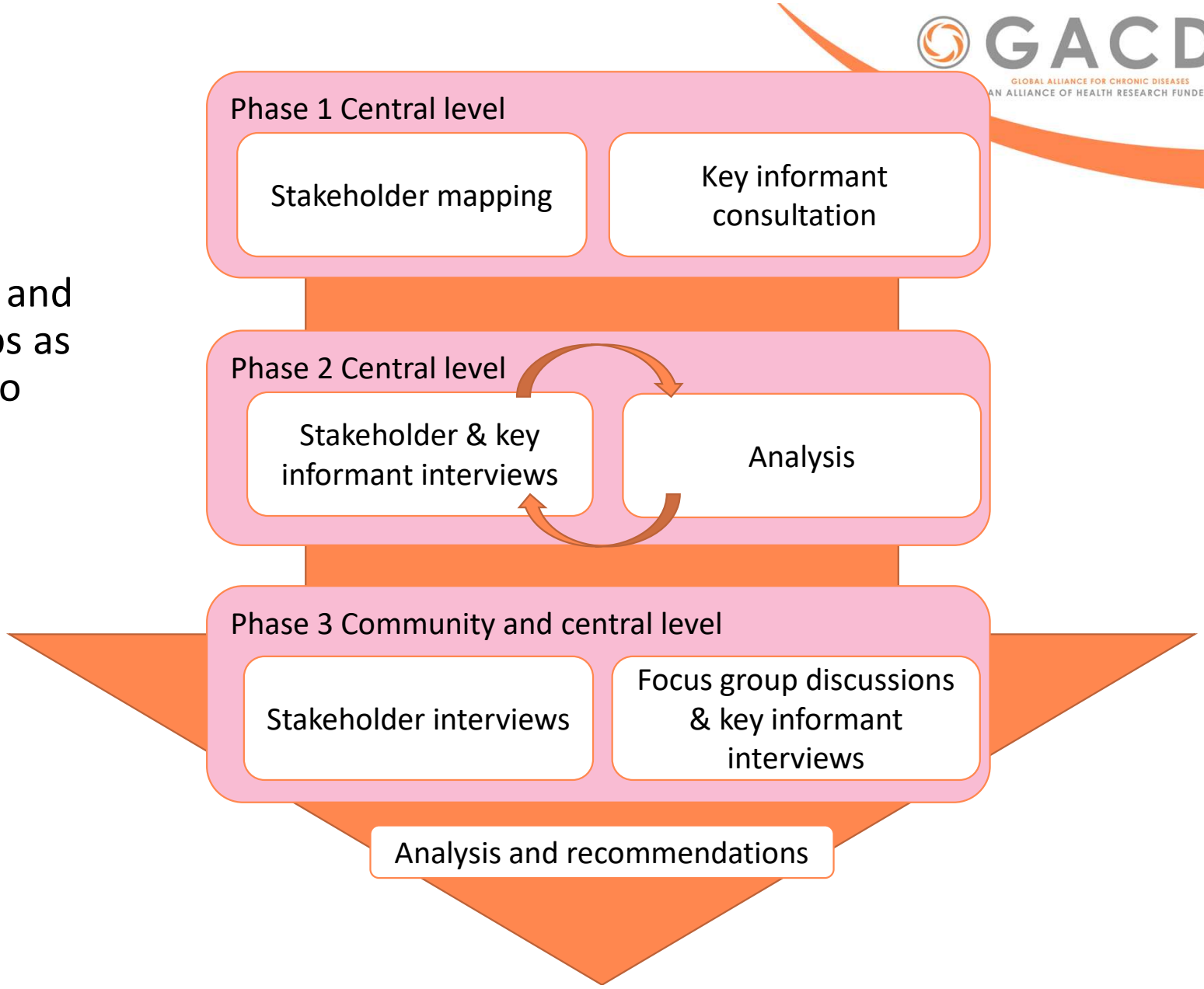
"*People want someone to guide them, gather them for meetings. Someone from outside and more qualified. Generally, people find organizations reliable…It's true. A normal village man cannot facilitate a meeting like a member of staff from a relevant organization*."

- Gathering people and running a group is a lot of work, particularly when there are no incentives

"*Husbands wouldn't allow this type of unsalaried work that wastes time*."

So how could groups be sustained?

Stakeholder analysis to understand the feasibility and acceptability of PLA groups as a scaled-up intervention to prevent and control NCDs



- Scale-up of PLA was considered feasible and acceptable
- Preference for scale-up through existing health systems but challenges were anticipated with:

1) Limited flexibility to let the community lead, particularly when they wanted to work with the private sector

2) Almost all Community Health Workers are institution-based => difficult for them to mobilise communities

3) Most Community Health Workers are women and have historically focused on maternal and reproductive health, => challenges in engaging men

4) Gender norms restricting women's movement in the evenings => challenges for female Community Health Workers to reach men who often want to meet in the evenings

Non Communicable Diseases (NCD) mobiliser

- Two NCD mobilisers run 36 PLA groups per month in six villages,
- Screening implemented around meeting 7/8, Nov 2023
- Five days training and 2 days supervised implementation
- Screening, counselling and referral in communities for hypertension, diabetes and obesity
- Cost of different packages determined by a contingent valuation survey
- Protocol for free screening

Process evaluation – feasibility & acceptability

- 358 Screened (Women 61%)
  - 348 (97%) diabetes
  - 256 (72%) hypertension
  - 126 (35%) obesity
- Screening usually separate from group meeting
- Easier for women to screen in the community
- Weighing machines are available in homes (for vegetables etc).
- Screening for hypertension is often free at pharmacies
- Cost of screening is a barrier – free screening not offered routinely

Key Messages

- Running a PLA intervention in the current health systems context would be challenging.
- There is potential for a PLA intervention to be sustained if paired with supported service provision
- More research is needed about the long term effects of PLA, and testing of the NCD mobiliser model at scale

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