

CONFERENCE ABSTRACT

Addressing social determinants of NCDs through community mobilisation: comparative research for effectiveness assessment

18th International Conference on Integrated Care, Utrecht, 23-25 May 2018

Tatyana Haplichnik¹, Yauhenia Kechyna², Tatyana Svetlovich³

1: Swiss Red Cross, Belarus;

2: Belarus State University, Belarus;

3: Belarus Red Cross, Belarus

An introduction: Since 2014, Swiss Red Cross has been running a “Community Action for Health” project in Belarus. Directly implemented by the Belarus Red Cross, the project is aimed at improving knowledge, changing attitudes and behaviour of the local population on such determinants of NCDs as physical activity and healthy nutrition via establishing Initiative Groups IGs in the communities.

To identify effectiveness of the community mobilisation approach, a project end-line survey was done in March-July 2017.

Theory/Methods: Community mobilisation was implemented in selected geographical areas of 5 pilot districts. Base-line data on NCD related knowledge, attitudes and behaviour of people living in the pilot districts was collected in 2014. The end-line data collection was organised using quasi-experimental method. 1866 respondents were organised in three target groups TGs: 417 IGs members and volunteers with full coverage; a sample of 385 systematic random sampling from 76,500 people in pilot communities covered by the IGs’ work; a sample of 1,067 people not covered by the IGs’ work multistage samplings with district stratification at the first stage, rural/urban stratification at the second stage from 208,411 people living in the pilot districts. First two groups were considered as experimental, the third one – as a control group. The end-line results were also compared with the base-line data.

Results: Not only people directly involved in the IGs – members and volunteers, - but also people “covered” by the IGs’ work are more physically active ride a bicycle every day/few times a week 31.9% of “covered” population versus 19.2% of general population; go for a walk 71.4% versus 58.5% respectively. The IGs members/volunteers and the “covered” population reported switching to healthier diet 53.3% and 41.5% respectively and weight loss 29.2% and 20.1%.

Discussions: How does the research

- assess “spill over” effect of targeted interventions;
- eliminates role of “external environmental factors” increased state attention to the NCD prevention over the recent years;

- foster programme sustainability and development.

Conclusions: The research showed a high degree of effectiveness of the community mobilization approach in improve both the health status and life quality improving subjective well-being, increasing communication of the population covered by the project activities.

Survey results: broadly used for advocacy, played an important role in further geographical expansion of and stronger involvement of the state health institutions in community mobilization for NCD prevention.

Lessons learned:

Comparative analysis experimental and control groups made a stronger policy influence;

Distribution of the information on the IGs work during interviews with the “non-covered” population target group 3 was a good strategy of involving new people/communities in NCD prevention.

Limitations:

Questions on subjective assessment of health and wellbeing change within the project time-frame were used only for the experimental groups.

Difficulties in defining “covered” population target group 2 in the urban areas.

Suggestions for future research Longitude survey, based on the existing questionnaire could be used to monitor longer-term impact of community mobilisation for NCD prevention.

Keywords: NCD prevention; community mobilisation; comparative survey
