



MBARARA CENTER FOR SPORTS AND HEALTH PROMOTION



DIABETES PREVENTION THROUGH SCHOOLS PROGRAMME

Project Agreement # WDF13-819

Project Final Report

Prepared by: Byakatonda Milton Acbor, Project Focal Point July, 2018

Acknowledgement

The Mbarara Center for Sports and Health Promotion (MCSHEP) would like to acknowledge the funding by The World Diabetes Foundation for the project: Diabetes Prevention through Schools Programme and the important roles played by the District health and education Officers and Coordinator Non communicable diseases prevention and control in the Ministry of Health, Commissioner for PE in the Ministry of Education, Science, Technology and Sports over the three years period of the project implementation.

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I am equally very grateful to the Head teachers, lead teachers and peer educators in participating schools who played a vital role in supporting the project.

Byakatonda Milton Acbor

Project Focal Point

List of Acronyms and Abbreviations

BMI-Body Mass Index

DLG-District Local Government

GDW-Global Diabetes Walk

KAP – Knowledge, Attitude and Practices

MCSHEP - Mbarara Center for Sports and Health Promotion

MoESTS – Ministry of Education, Science, Technology and Sports

MoH - Ministry of Health

MRRH – Mbarara Regional Referral Hospital

NCDs - Non-communicable diseases

NGOs – Non-governmental organisation

PA-Physical Activity

USHRD - Uganda Sport for Health, Recreation and Development

WDD-World Diabetes Day

WDF - World Diabetes Foundation

Project Final Description

Organisation	Mbarara Center for Sports and Health Promotion			
Project Name	Diabetes Prevention through Schools Programme			
Project Number	WDF13-819			
Project Goal	The goal of this project is to promote the adoption of healthy lifestyle behaviours among school children, teachers and their parents to prevent development of diabetes and other chronic diseases by providing information on healthy eating and physical activity.			
Project Objectives	 To increase knowledge and awareness of diabetes and chronic diseases prevention. To reduce the risk of developing diabetes and chronic diseases through improving the diet and physical activity patterns among students. To conduct training and capacity building of the teachers, students and parents to promote practices in the primary prevention of diabetes and chronic diseases in schools participating in the project. To promote the development of an environment within the schools that facilitates the adoption of healthy lifestyles. 			
Project Location	Mbarara and Isingiro districts, Uganda			
Project Duration	01 July, 2015 – 01 October, 2018			
Project Sponsor	World Diabetes Foundation, Denmark			
Project Partners	Vision group, Mbarara Regional Referral hospital, and Uganda Sport for Health, Recreation and Development			
Project Team	 Project Focal Point: Byakatonda Milton Acbor Project Manager: Namanya Joshua Project Accountant: Tusiime Jonah Health Educator: Tushemereirwe Christine, M&E officer: Asiimwe Patrick Field officers: Asiimwe Ezra, Matsiko Cleave, Duncan, James and Allen 			

Project Performance

The diabetes prevention Project was aimed at promoting the adoption of healthy lifestyle behaviours among school children, teachers and their parents to prevent development of diabetes and other chronic diseases by providing information on healthy eating and physical activity. The performance of the project can be seen in the table below and how targets were reached.

Main activities	Target by end of project, 2018	Status (%)	Remarks
Development of awareness materials	10,000 copies of educational materials	10,000 copies (100%)	Pamphlets and posters with simple messages on healthy lifestyle were developed and distributed in schools.
KAP survey	Baseline and End of project KAP survey	Done 100%	Both baseline and end of project survey were conducted and results showed improved knowledge on diabetes prevention.
Training of peer health educators	400 teachers 1000 students 400 Parents	392 teachers (98%) 998 students (99%) 400 Parents (100%)	Teachers, students and parents from each beneficiary school were selected to participate in the training to build their capacity in providing information on diabetes prevention.
Sensitisation of school management and canteen staff	200 school management members. 100 canteen staff	194 school management members (97%). 92 canteen staff (92%)	Meetings were held with school managers of the 100 schools to ensure support and ownership of the project. Meetings were also conducted with canteen staff at schools to promote sale of healthy foods.
Sensitisation of students, teachers and parents	100 schools 20,670 students 1,000 teachers 4,000 parents	100 (100%) 19904 students (95.3%) 1188 teachers (118.8%) 3506 parents (87.7%)	The peer educators from beneficiary schools were trained to further raise awareness and sensitize their peers on healthy lifestyle.
Promotion of vegetable gardens	Gardens established at 100 schools	Done (100%)	Vegetable and fruit gardens were established at all targeted schools. Different seedlings and seeds were provided and the students and teachers are responsible for maintaining the gardens.
Poster-making and dish competitions	3 competitions	3 (100%)	All 100 schools participated in the competition, where the students designed posters on healthy foods

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		Project Final Report 2018
		and wrote essays on preventing
		type 2 diabetes through healthy
		food
24 radio	25 radio programs	At every last Friday and Saturday
programs.	(104%)	of the month a radio and TV
12 TV programs.	13 TV programs	shows on healthy lifestyle were
750,000 people	(109%).	aired respectively.
reached through	750,000 people	
media campaign	reached 100%)	
		Health camps were conducted
		where teachers, parents and
		students were educated about
		healthy lifestyle. Teachers and
6 health camps	7 health camps	parents were screened for diabetes
	(50%)	and risk factors, whereas students
		below the age of 18 were
		measured using BMI for children.
		In these camps, 204 teachers,
		1534 students and 204 parents had
		participated.
		Furthermore, each school has
600 balls	600 (100%)	received different balls and a
		video on aerobics to promote
		physical activity.
	programs. 12 TV programs. 750,000 people reached through media campaign 6 health camps	programs. 12 TV programs. 750,000 people reached through media campaign 6 health camps 7 health camps 7 health camps 7 health camps (50%)

Key Project Achievements:

- Base-line and end-line KAP surveys were conducted
- The project trained 1000 Children and 130 teachers in diabetes prevention. The trained health resource person in turn trained the target population in the 100 project schools.
- In the area of advocacy, the organization conducted health education activities in the 100 schools where 19904 students, 1188 teachers and 3506 parents were sensitized in diabetes risk factors, signs and symptoms, complications and prevention.
- 25 radio programs aired on radio west and 13 TV programs broadcast on TV west
- 6000 IEC materials developed and distributed in schools
- 7 health camps conducted and 1942 people participated.
- Project website constructed <u>www.mbcshep.org</u>
- 750,000 people reached by diabetes awareness activities
- 3 world diabetes walks were conducted (2015-2018) during the World Diabetes Day
- School food gardens were established in 100 schools to enable teachers and children access fresh vegetables and fruits.
- MCSHEP has impacted on communities by raising awareness about diabetes and other NCDs prevention reaching 2486 people.
- 600 balls procured and distributed to schools to promote physical activity.

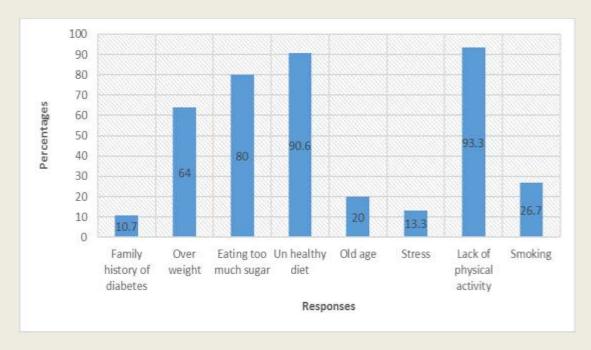
REPORT ON ACHIEVEMENTS AND ACCOMPLISHEMENTS

Objective 1: To increase knowledge and awareness of diabetes and chronic diseases prevention.

Outcome I: Increased awareness and knowledge among the students, teachers and parents about risk factors for diabetes and actions to take to prevent diabetes.

Activity 1.1 KAP-survey for base line and end of project

KAP survey – MCSHEP conducted a baseline survey in 2015 to establish levels of target groups' diabetes-related knowledge, attitudes, and practices (KAP). The key findings of the base line KAP survey showed that students, teachers and parents knew little about unhealthy diet and lack of physical exercise as causes of diabetes (students-6.2% and 2.4% respectively, teachers-17.3% and 4% for unhealthy diet and lack of physical exercise respectively, parents-16% and 0.7% for unhealthy diet and lack of physical exercise respectively). This was followed by the end line KAP-survey in 2018 to provide evidence of impact of the programme. The findings of the end line survey indicated a big improvement in knowledge about the diabetes as regards to unhealthy eating and physical inactivity (students-90.6 % and 93.3% respectively, parents-59% and 58%, teachers-93% and 90%). KAP survey report was shared with the Ministry of Health, Ministry of Education, and the health departments of Mbarara and Isingiro districts as important stakeholders. The chart below shows responses from students about diabetes risk factors:



Activity 1.2 Health Education and advocacy in schools

A vigorous programme for health education sessions in schools was conducted by trained peer educators, and the project's health educator. The project developed a curriculum to be followed by all schools and students, teachers and parents were given different curriculum but with the same information about diabetes, healthy eating and physical activity. A total of 19,904 students, 1,188 teachers and 3,506 parents were reached with awareness messages. Educational materials in form of brochures and posters were developed and distributed in targeted schools. The health education sessions were carried out in schools by the trained project staff, teachers, students and sometimes guests speakers who were diabetics and were invited to give health talk to students. Health education in schools provided many students in the project the opportunity to learn the importance of healthy lifestyles and skills necessary to engage in healthy behaviors such as eating healthy and participating in physical activity.



Activity 1.3 World diabetes day celebrations

MCSHEP organised the World Diabetes Day on 14th November for three years since 2015, aimed at raising awareness about diabetes. The major event of the was the Global Diabetes Walk. School children, teachers, parents and other people from communities joined the walk to take steps against diabetes. MCSHEP was joining the rest of the world to celebrate this day, in an effort to bring to the attention of the public about diabetes, as one of the leading causes of death but which can be prevented. Each year had a different theme for example: 2016- "Eyes on Diabetes", and 2017- "Women and diabetes - our right to a healthy future". The function was supported by the World Diabetes Foundation. Other activities conducted on this day included health education, free diabetes screening, blood pressure, BMI and waist-circumference measurement. In addition, awareness brochures about healthy eating and physical activity were distributed to participants. At this event, it is when

students who had participated and won in the poster-making and dish competition were rewarded.



Global diabetes walk, 2015

Activity 1.4 Media awareness campaign and advocacy

Through our partner, the Vision Group, awareness campaign was conducted for one hour at Radio West every last Friday of the month, and TV West every last Saturday of the month. Topics about diabetes, physical activity and healthy eating behaviours were aired during the talk shows. Listeners called in and sent messages for questions to be answered. In other project events, the New Vision, Orumuri (local newspaper), Radio and TV West covered these events. A total 25 radio and 13 TV programmes were carried out with the aim of raising awareness about diabetes so that other people may also benefit apart from participating schools. Topics about diabetes, physical activity and healthy eating behaviours were aired during the talk shows. It is estimated that over 750,000 people were reached with diabetes prevention awareness messages.



Diabetes awareness through media on Radio West

Activity 1.5 Diabetes campaign educational materials.

Educational materials in form of training materials, brochures, leaflets and posters with simple messages on healthy eating, physical activity, and diabetes prevention were developed by the staff of Mbarara regional referral hospital and MCSHEP staff, to be used by the students, staff and parents. These were distributed in schools, churches, and health Centers to raise awareness for people who come to seek health services. A total of 10,000 copies of different IEC materials were produced distributed.



Some of the awareness materials produced by the project

Activity 1.6 School health poster-making and dish competitions

Three challenges were organised for all participating schools in the project to compete in poster making and dish competition under the topic: Health lifestyle and Diabetes prevention. Each school submitted 5 entries for both posters and essays. The winning schools and students were announced and rewarded on 14th November, during the World Diabetes Day celebration. The main aim of this poster-making and dish competition was to raise awareness of how the healthy lifestyles prevents diabetes and other NCDs.



Poster made during poster-making competition

Activity 1.7 Community awareness

In addition to sensitizing schools, the project extended to reach communities to increase awareness of the diabetes risk factors and prevention strategies with a special focus on the community's underserved population. The project has reached out to the communities to individuals and empowered them to make the best health choices. Through these community outreaches, 2486 people were reached in 15 villages. In these meetings, health education and screening were provided and participants were able to find out more about their health status at these screening sessions. They also learnt about the types of diabetes, risk factors as well as prevention strategies.



Community outreach diabetes awareness at Nyarubungo, Isingiro district

Objective 2: To reduce the risk of developing diabetes and chronic diseases through improving the diet and physical activity patterns among students.

Outcome: Improved access to healthy foods and physical activity in schools

Activity 2.1 Promoting food gardens at schools

All 100 schools were provided with vegetable seeds (spinach, carrots, egg plants, cabbages, and dodo) and fruit seedlings (mangoes and oranges). This was to help them establish gardens that would promote consumption of fresh vegetables and fruits. Gardens have been vital in providing fresh vegetables to teachers and students for meals taken at school daily. During the surplus, students take these fresh vegetables to their homes and some schools sell for income. Still, parents of these schools are encouraged to establish similar backyard gardens at their homes to promote healthy eating at the family level.



Vegetable seeds and fruit seedlings being distributed at Mbarara Mixed Primary school

Activity 2.2 Providing sports equipment and aerobic DVDs to promote participation in sport and physical activity classes

Provision of sports and aerobic videos equipment was a part of the diabetes prevention project aimed at increasing participation in physical activity among children. Each school received 6 balls (2 for football, 2 for netball and 2 for volleyball). These balls provided were to help in making children participate in play and also exercise in order to live actively to prevent diabetes type 2. However, most schools found it more difficult to use the aerobic DVD partly due to lack of electricity and a functional DVD player. However, with the rural electrification program in various areas where the project has been implemented, it is hoped that they will be put to good use and encourage children to do aerobics.



Balls being handed over to the lead teacher at Katerera primary school, Isingiro district

Objective 3: To conduct training and capacity building of the teachers, students and parents to promote practices in the primary prevention of diabetes and chronic diseases in schools participating in the project.

Outcome: A team of peer educators established at schools to promote healthy lifestyle for diabetes prevention

Activity 3.1 Training workshops for teachers, parents and students on prevention of diabetes,

Through the project intervention peer health educators (teachers, parents and students) were identified and trained. 400 parents, 392 teachers and 998 students were trained in diabetes prevention; topics covered were diabetes-its risk factors, signs and complications, healthy eating and physical activity. These peer educators especially teachers and students were responsible for establishment of health clubs in schools, roll out of debates and health talks (i.e. during assembly), sustaining the school gardens, promoting healthy messages at the school premises (putting up signs and posters) and poster competitions.



Teachers after training as peer educators in diabetes prevention

Activity 3.2 Advocacy and sensitisation meeting for school management and canteen staff

Sensitization sessions were carried for school management committees and canteen staff. Schools were represented by 2 members of school management and 1 canteen staff. Sensitization was about the project in their schools and its importance, their roles in supporting project through policy formulations and overseeing the project succeed. The canteen staff were sensitized of providing healthy foods in school for students and teachers. A total of 194 management committees and 92 canteen staff were sensitized about the role of the project in their respective schools, and forming policies that promote healthy living.



A section of school board and management committees, and canteen staff after sensitization worshop

Activity 3.3 Diabetes screening and health awareness camps

Seven (7) Camps were conducted for schools to participate. A total of 1534 primary and secondary school students, 204 teachers, and 204 parents were screened by health staff from Mbarara Regional Referral Hospital (MRRH). In addition, their blood pressure and BMI were also measured. Those at risk were referred to MRRH. Follow ups were made to these referred parents and teachers to take any necessary actions. An amputated diabetic person was invited in each of these camps to give a testimony which made the participants take diabetes message seriously.



Participants at one of the organised camps at Itegyero primary school

Objective 4: To promote the development of an environment within the schools that facilitates the adoption of healthy lifestyles.

Outcome: Enabling environment created in schools to promote healthy choices among students and teachers

Activity 4.1 Establishing talking compound in schools.

Sign-boards with prevention messages were distributed to all 100 schools to further disseminate information to students and staff about preventing type 2 diabetes. The sign-boards were then put in various strategic areas in the schools' compound with messages like: *Diabetes is preventable, avoid obesity, avoid sugary drinks, 30 minutes of exercise daily, and Avoid smoking.*



Talking compound at Kashaka high school with diabetes prevention messages

Activity 4.2 Establishing health clubs

Health clubs and NCD Prevention Associations in schools managed by students, parents and teachers respectively were established. Schools formed health clubs whose members are students. The clubs are led by students who were trained during capacity building. Each club leader recruited a minimum of 10 members who were educated about diabetes type 2. Clubs also organised debates related with health promotion topics for students to participate in. This model has helped reach many students in schools where we operate. Clubs also organized a wide range of enjoyable activities to ensure active participation of the students which included sports participation as a way of increasing the interest and engagement of the students to enrich their knowledge of adopting healthy lifestyle.

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A debate session on diabetes being conducted at Masha Seed secondary school

Project Monitoring & Evaluation

Internally the project was monitored on a weekly basis through monitoring visits by the M&E officer, and the Field officers. To be able to monitor and oversee the 100 schools effectively, a Lead teacher who is a focal person in school was appointed in every school. The Lead teacher gathered information about the activities undertaken by the peer educators, which are registered in the monitoring tools provided to them. The schools were also clustered in zones and one person was dedicated as focal person for these schools called the Field Officer. This field officer is responsible for gathering the information from the other schools. In this way, it became easier to collect the data and monitor project results. The activities for project monitoring included: Field Visits, Focus Group Meetings, Follow-up, and Review meetings.



Project staff and other stakeholders after an evaluation meeting

Sustainability Plan

The sustainability of this project was planned right from the project inception by involving participation and collaboration of all concerned line ministry, district authorities and community to ensure that the outcomes of the project continue beyond the WDF grant period. The following activities will ensure sustainability of the programme even after its completion:

• Capacity building:

Teachers and students were trained in primary prevention activities as peer educators to continuously spread diabetes prevention awareness messages among the target groups and thus the impact of the programme will be sustained.

Website:

Diabetes prevention information and knowledge generated by the project is available on the project website www.bcshep.org. This in addition to social media platform and talking compound will further sustain awareness messages to school community.

• Integrating project activities in the school programme:

The project will integrate project activities in the school programmes and activity budgets are allocated like school gardening, teaching of PE and active school clubs. All these will help in sustaining the project activities beyond the project duration in terms of sensitization and awareness.

Challenges faced during project implementation

- Large number of schools to be supervised by one M&E officer posed a challenge at first until we recruited field officers to support in monitoring project activities.
- Retrogressive profit gains that promote consumption of unhealthy foods such as selling of junk foods at some school canteens is still a challenge. This lack of choice makes children take unhealthy foods rather than no food.
- High demand of some teachers in schools for motivation in terms of money.

- Staff turnover where some trained staff were transferred from participating schools in the project to other non-participating schools.
- Trained students as peer educators finished their levels of education and other crossed to others schools which posed a challenge.
- Prolonged droughts that always affect established gardens
- Parents trained as peer educators were lacking literacy and could not understand the English language used.

Strategies to address the Challenges

- We reached out to schools for more sensitization to schools which were performing below standard
- Recruited other teachers in schools which were affected by transfers.
- Followed up to school management committees to oversee the project activities.
- Encouraged schools to use drip irrigation to mitigate the effects of climatic change on school gardens.
- Made outreaches to schools during events that bring parents together, and we raised awareness in the local language that they understood.
- During the radio talk-shows, we communicated in the local language

Lessons Learnt

- Effective implementation of a programme needs dedication and commitment of partners and wider network of volunteers. Teamwork is important in execution of project work if it is to be successful.
- Maximizing contacts with the beneficiaries improves outcomes. There is need to always reach the beneficiaries of the project to learn about their challenges and successes.
- Bringing services closer to communities raises awareness about diabetes. Community out-reaches are vital
 for the underserved populations to learn about diabetes as most of them do not go for health checkups until
 they are sick.
- Strengthening diabetes clubs in schools helps in sustaining peer education. The clubs in schools sustains the
 project activities like the established school gardens, peer education and awareness activities like organising
 debates on NCDs related matters.
- Budget for training and refresher courses for the peer educators should be allocated so that when teachers are transferred, or students complete, there is no gap left.
- Identify various avenues of reaching parents to promote healthy lifestyles which include using community awareness outreaches and school parent' general meetings.
- Referral system need to be strengthened to ensure there is follow-up to referred persons during camps, and get treatment in the hospital.
- Awareness materials should be prepared in both English and local language to benefit both literate and illiterate persons.
- Schools can act as knowledge transfer centers both for the students that can act as ambassadors to their homes and for the surrounding communities.
- Using media is effective in reaching many people even those outside the programme –to benefit indirectly.

PROJECT PHOTOGRAPHS



Ms Mette Skar from WDF visiting the Vision Group (partner) offices



Ms Hanne Strandgaard from WDF, Dr Gerald Mutungi from Ministry of Health visiting the project



Participants of global diabetes walk, 2016



Peer training participants after the training



Capacity building workshops organised for school management committees



A health camp conducted for diabetes screening



Vegetable seeds and fruit seedlings being distributed in one of the beneficiary schools



Balls distributed in schools to promote physical activity



Health education being conducted in school



Field visit to beneficiary schools by Ms Mette Skar from WDF



A school garden at Bujaga Integrated primary school with fresh vegetables



Students attending one of the health camps organised



An extract of the newspaper where our global diabetes walk was covered in 2017