

Addressing social determinants of NCDs through community mobilisation:
Swiss Red Cross experience in Belarus

*Tatyana Haplichnik,
Swiss Red Cross Country Coordinator for Belarus*



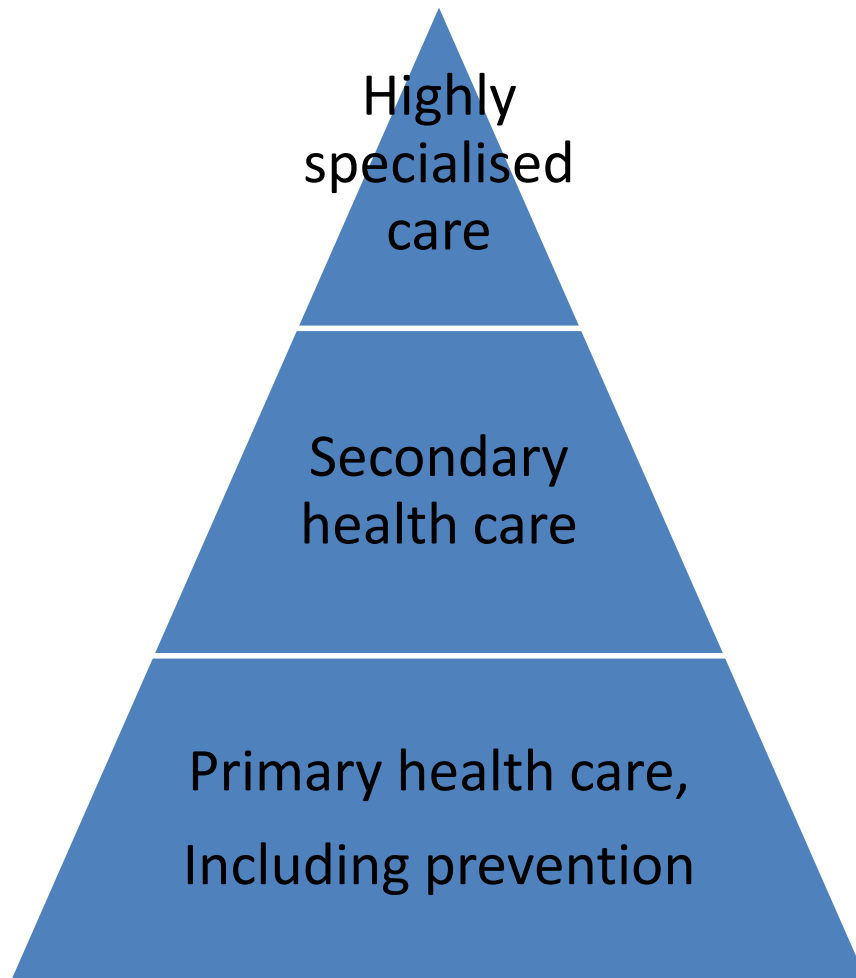
Context: NCD risk factors for Belarus

- more than 30% of population smoke
- hypertension makes up more than 40% in men, and 38% – in women
- hypercholesterolemia is diagnosed in 50% of men and 1/3 of women of working age
- more than 40% of population have overweight
- 24% of population experience lack of physical activity

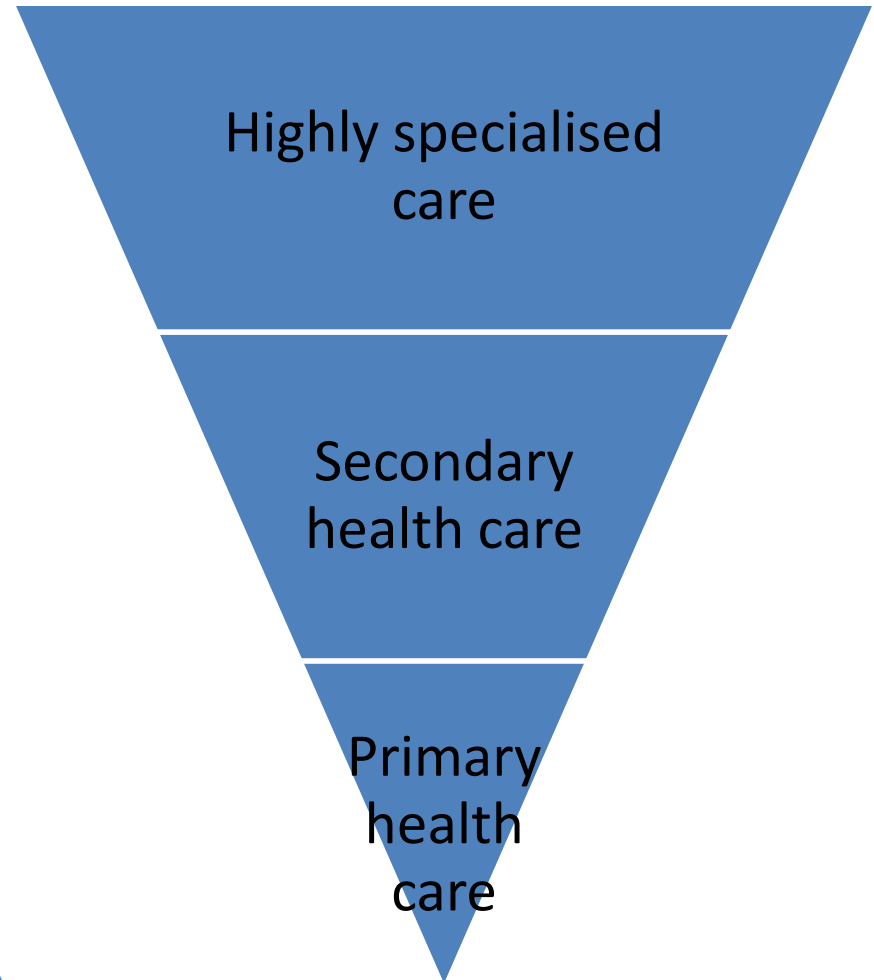




Context: health care system

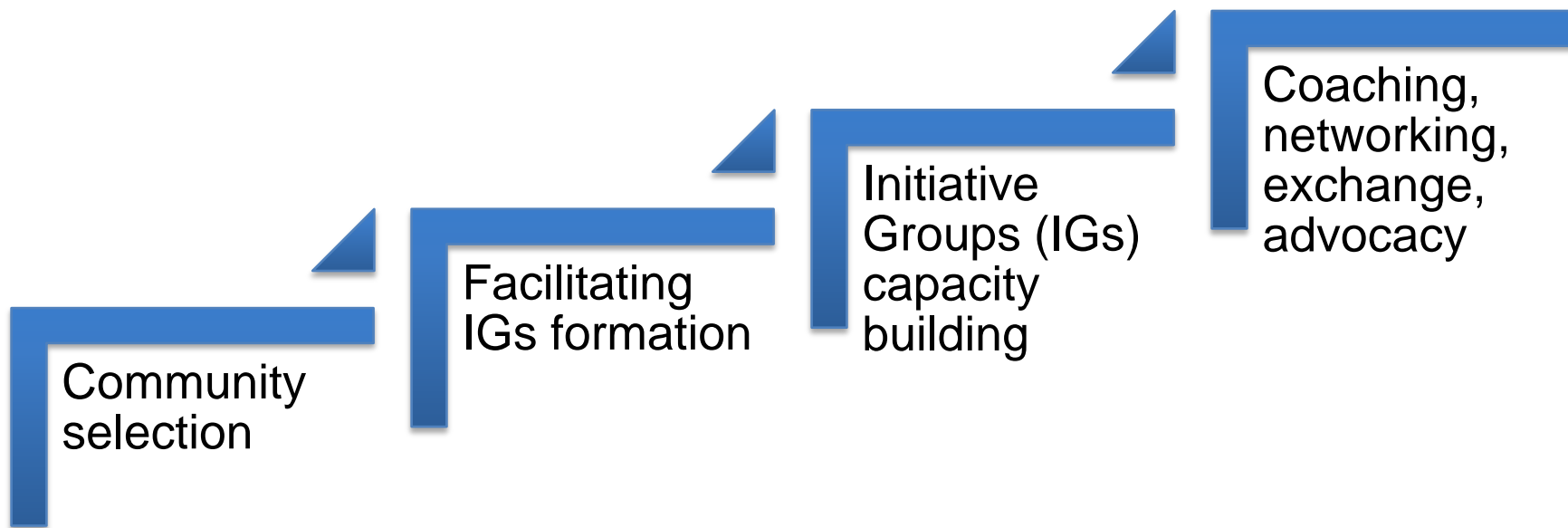


“To-be” system



Existing system

Participatory community work (PCW) process



PCW process



Community Action for Health project

- 14 Initiative groups in 2 pilot regions
- 400 members and volunteers
- 76,500 people covered



IGs' work:

Training sessions on NCD prevention



IG's work: mini-initiatives

Swiss Red Cross



IG's work: peer-support for behaviour change

Swiss Red Cross

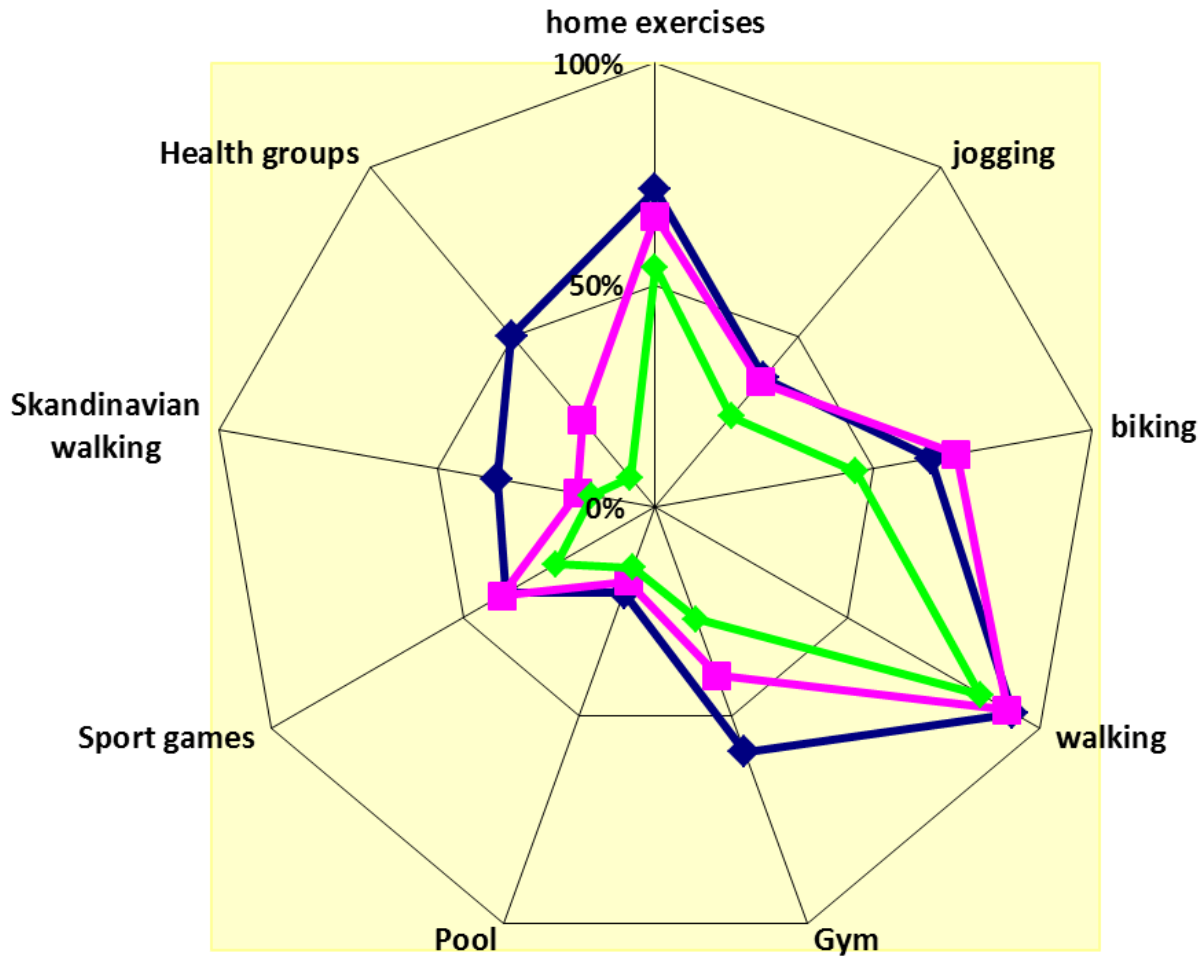


End-line survey

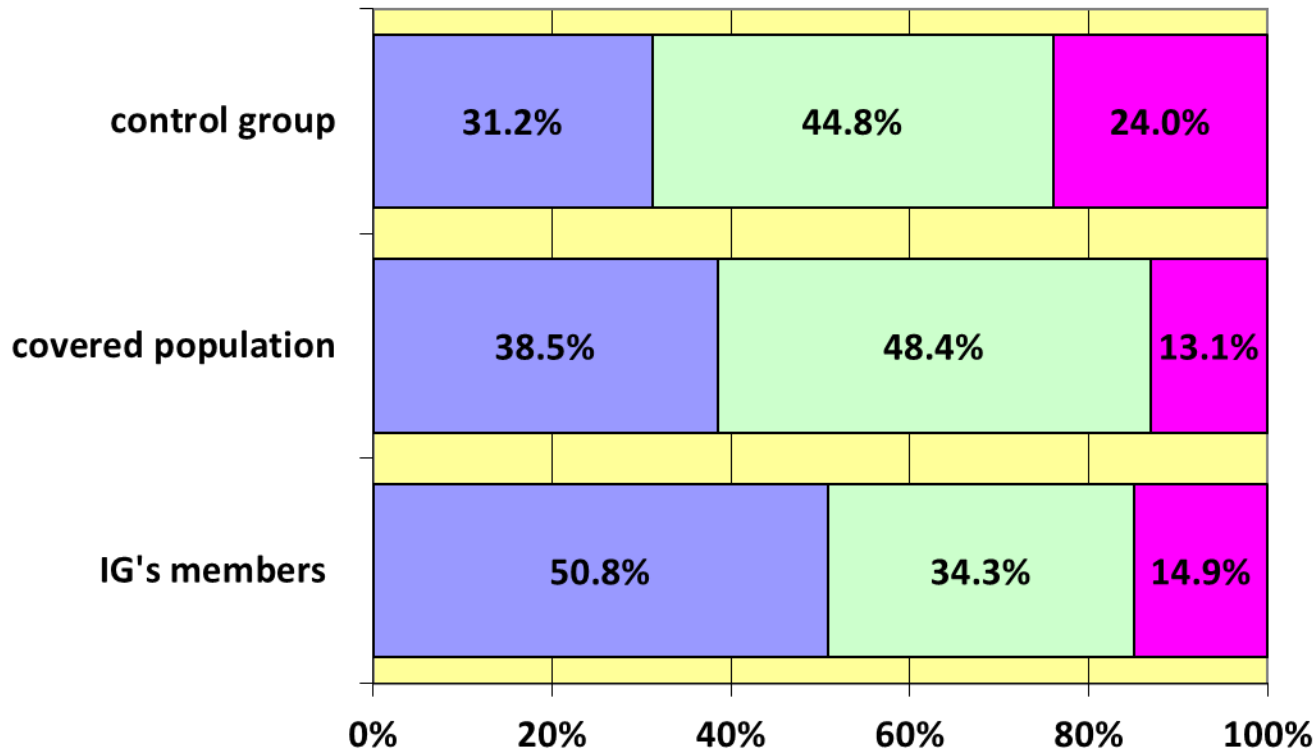
- 1,866 respondents organised in
- 3 groups:
 - Members and volunteers of the IGs
 - Population “covered” by the IGs’ work
 - “Control” group



Results: physical exercises



Results: drinking 1.5 liters of water a day



■ Yes, almost always ■ Yes, but not always ■ Almost never

Results: scaling up

- Within the Belarus Red Cross (trainers, forming new IGs);
- By health administrators at the regional level (IGs as a prevention mechanism, part of regional health plans)
- By health institutions (NCD prevention modules)



Success factors

- Partnership agreements with the local governmental partners
- Work with/training of the local medical administrators and professionals
- Training materials and trainers' sets
- Advocacy at the level of the regional and national health care management/policy makers



Lessons learned: behaviour change

- Greater impact in rural communities
- Narrow thematic focus – better results
- Reaching to most vulnerable still an issue (role of community is greater than of methodology)
- Individual peer-support has great potential – to be formalised



Lessons learned: health system

- Easier, when linked to health sector reform (Kyrgyzstan)
- Accepted if minimal resources are required
- Evidence matter (even if attribution is questionable)



Thank you!

