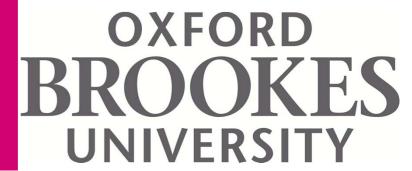
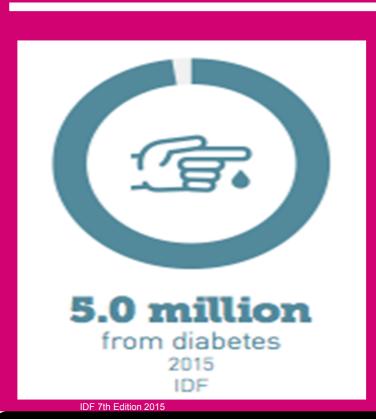
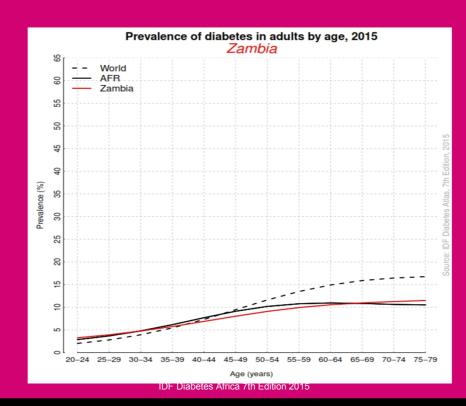
Effectiveness of Lifestyle Interventions for Preventing or Delaying Type 2 Diabetes in the Zambian Context

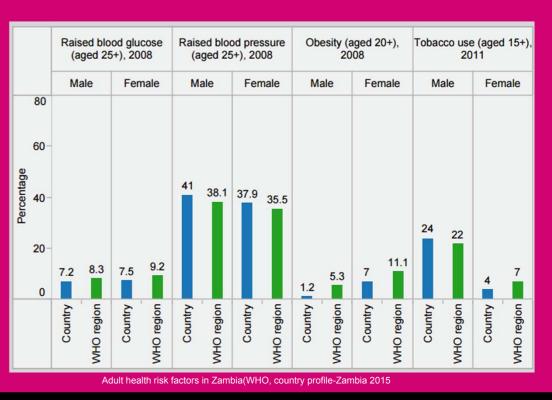
Tsilazazi Itwi (Masters in Public Health)







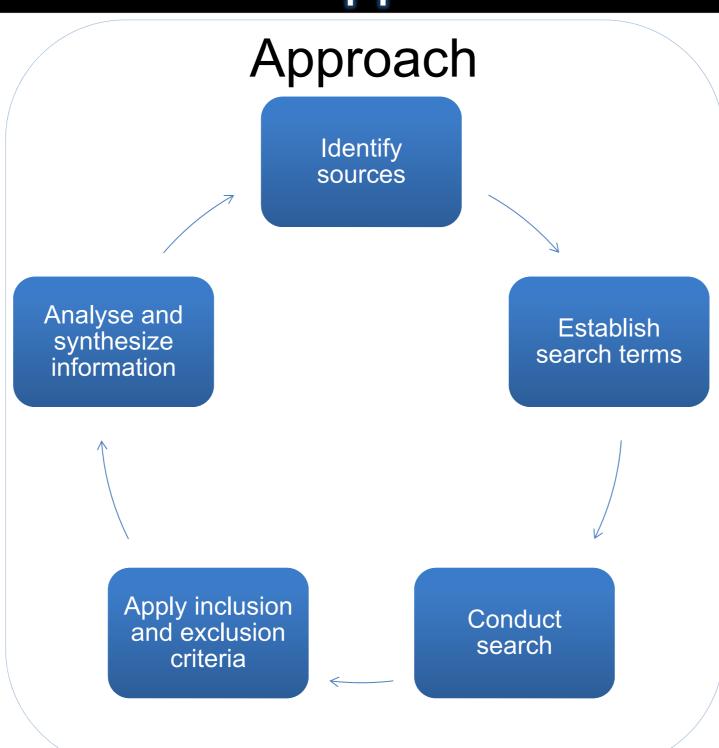


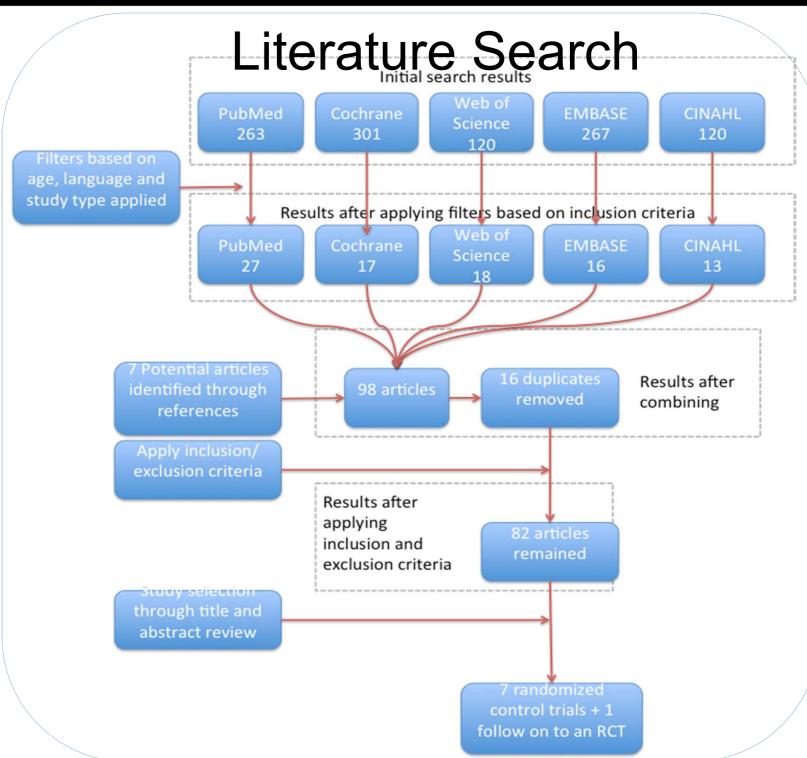


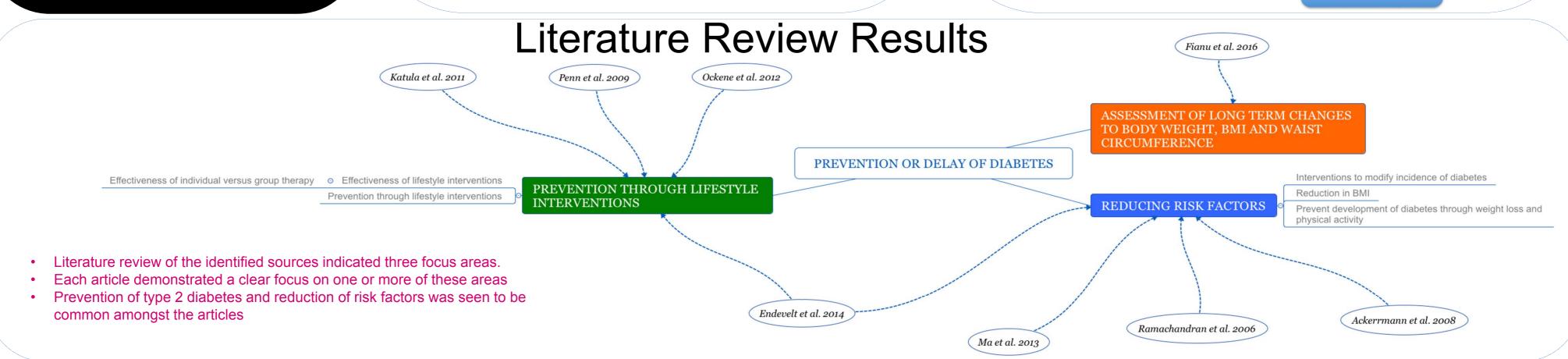
Can lifestyle interventions for preventing or delaying type 2 diabetes in high risk adults be applied in the Zambian context?

Motivations

- Increasing levels of cardio vascular diseases and Diabetes Type 2 in Sub-Saharan Africa
- No research has been done on the prevention of Diabetes in Zambia
- Raise awareness about the dangers of Type 2 Diabetes to the general public, People at risk and to the government and policy planners







Thematic Results 1 Knowledge gap, attitude and challenges identified Face-to-face training Shared strategies Continued education during maintenance 3 Personalised feedback 2 Reduction in percentage dietary calories 1 Individualised diet plan 1 Food frequency questionnaire used 1 Sharing healthy meal and preparation steps 1 Healthy eating newsletter distributed 1 Use graphical and visual aids in training 9 DIET MODIFICATION 1 Demonstration of healthy cooking and portion sizes 1 Physical activity diary provided High consumption of vegetables 2 Activity tracked using device Regular moderate wine intake 7 Moderate regular activity Moderate consumption of fish Minimum of 30 minutes of exercise per day 8 PHYSICAL ACTIVITY Low consumption of meat LIFESTYLE INTERVENTIONS Low to moderate intake of low fat diary products Participants provided with information on physical activity facilities and opportunities Consumption of nuts High consumption of water 4 DPP LIFESTYLE INTERVENTION

EFFECTIVENESS OF LIFESTYLE INTERVENTIONS IN ZAMBIA IDENTIFIED INTERVENTION THEMES STRATEGIES FOR IMPROVING EFFECTIVENESS A Physical activity diary provided 1 improve diagnosis rates through risk assessment Activity tracked using device 2 Take advantage of existing community structures ✓ Moderate regular activity

⊙ 3 Ensure early awareness of diabetes and risks Physical activity A Demonstration on use of equipment 4 Treat diabetes at the same time as other NCD and CD Participants provided with information on physical activity facilities and opportunities 5 Encourage culture shift away from accepting unhealthy bodies 6 Maximize use of technology Reduction in percentage dietary calories National Individualised diet plan Food frequency questionnaire used Sharing healthy meal and preparation steps Healthy eating newsletter distributed Use graphical and visual aids in training Demonstration of healthy cooking and portion sizes ▲ Knowledge gap, attitude and challenges identified Shared strategies Rersonalised feedback

- Lifestyle interventions covered in the literature fall into physical activity or diet
- Physical activity strategies included moderate, tracked physical exercises and provision of information on exercises to participants
- Diet strategies included implementing individualized diet plans, sharing health meal preparation tips and proven diets e.g. Mediterranean Training and awareness, personalized feedback and gap analysis key to the success of both diet and physical activity interventions
- Some intervention strategies would be less effective than others in the Zambian context
 Personalized plans or feedback would be a challenge due to limited expertise
- Early risk assessment, treatment of diabetes and maximizing community structures would improve effectiveness

Conclusions

The prevalence of Diabetes in Zambia has not researched alarming levels compared to other countries in Sub-Saharan countries. However, the prevalence of impaired glucose tolerance is still high which increase the risk of diabetes complications as well as the risk of developing diabetes. Research analysis showed that lifestyle interventions focusing on diet modification and moderate physical activity can be applied to Zambia but need to be tailored to the culture and environment of the Zambian context to enhance effectiveness.

Recommendations & Future Work

- Workplace-based interventions should be considered
 Maximize technology-based information disseminating proven in interventions for other diseases such as HIV/AIDS
- More research required in evaluating cost-effective of interventions

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