This study aims to develop an integrated, decentralised non-communicable disease (NCD) service for Lubombo, Swaziland.

Background

NCDs are the second biggest cause of mortality in Swaziland (28%), with trends revealing that blood pressure, blood glucose and Body Mass Index are all steadily rising in Swaziland.\(^1\)

Currently, NCD care is provided using a centralised model, with the majority of care provided by hospitals. Hospital services are working at full capacity, with little room for expansion. With the increasing burden from NCDs, this model of care is no longer sustainable.

Objectives

- Establish a model for an integrated, decentralised NCD service that includes Type 2 diabetes, hypertension and cardiovascular disease
- Develop Swaziland-specific guides and training on NCDs
- Evaluate the decentralised model against the traditional, centralised model of care
- Determine the acceptability of the decentralised NCD model to patients and healthcare workers

Swaziland National Strategy

To respond to the needs of the population, the Ministry of Health established the National NCD programme. A Swaziland NCD strategy is being developed and aims to address morbidity and premature mortality caused by NCDs. The strategy recommends developing and implementing a comprehensive, integrated NCD service in the community.

The study will involve:

- 9 community clinics providing decentralised care, through training, supervision and tools and materials
- a centralised hospital service providing care to a catchment population of 9 community clinics
- patients who will be assessed to receive centralised or decentralised care over 6 months
- a qualitative study to collect data on the willingness of nurses to implement new follow-up care in both the community health clinics and in the hospital, as well as their views on the integrated NCD service

Developing a decentralised care model for Lubombo region will involve:

- establishing a referral system between Good Shepherd Hospital and community clinics, in line with the National Referral and Linkages System Framework
- training community staff on NCD management based on the Swaziland-specific NCD guides developed
- supporting community clinics and staff to implement NCD desk guides
- developing a system of NCD drug supply to community clinics

Potential scaling up of research findings

The decentralised model can be rolled out to the rest of Swaziland and other resource limited settings, if found to be effective.

In-country partners

- Good Shepherd Hospital
- Ministry of Health
- National NCD Programme

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References:

Global status report on non-communicable diseases 2010, WHO