



**Semi-annual Progress Report**

*(Narrative report (4-6 pages) focusing on progress in project implementation, major achievements, assessment of achievement of project objective, obstacles encountered, solutions found/proposed and need for adjustment.)*

<b>Project title</b>	Improving accessibility to diabetes care
<b>Project number</b>	WDF13-766
<b>Reporting period</b>	01/03/2015- 31/08/2015
<b>Prepared by</b>	Dr.Jacqueline DICQUEMARE
<b>Date of submission by WDF partner</b>	09/15/2015
<b>Date(s) of resubmission by partner (if revised report requested)</b>	

**1. Progress for the past 6 months vis-à-vis project implementation plan**

*(Where applicable, please include numerical information under the “comments” column, e.g. number of clinics established, number of people/patients reached, camps and education sessions held, awareness activities conducted etc. If an activity has not been accomplished as planned, please indicate reason. Kindly, only make brief comments in this section. More detailed information should be included in the appropriate sections 3-11.)*

	Activity as per milestone goals in PPA	Status <i>(done/not done)</i>	Results, Impact & Comments	
			6 months reporting period Quantitative & qualitative reporting	Accumulated quantitative results to date
Milestone 1	1. Medical and office equipment procured	DONE	Furniture, medical supplies, office supplies, I.T supplies, refrigerators and videoprojectors for each diabetes unity	The 2 diabetis Unities are totally equipped
	2. 2 diabetes unities (reference departments) for 4 departments established and equipped, incl. HbA1c machines	DONE	One in CHD of Natitingou for Atacora & Donga departments and one in CHD of Lokossa for Mono & Couffo departments	2 diabetes Unities
	3. 2 doctors and 16 nurses trained to equip and service the 8 established diabetes clinics	DONE	One MD (Dr.Adam) in Natitingou and One MD in Lokossa (Dr.Djossou) , 4 nurses in the 2 Diabetes Unities , 7 nurses and 7 nursing auxiliaries in the diabetes clinics	2 MD 18 nurses and auxiliaries
	4. 300 diabetes patients diagnosed, referred and attended	DONE	450 patients in Natitingou are regularly followed and 250 in Lokossa	Total 700
	5. 5,000 people screened at 10 camps / events	DONE	6,257 PEOPLE SCREENED at 20 camps / events	Total 6,257
	6. 500 visits and/or consultations	DONE	980 in Lokossa and 1,450 in Natitingou	Total 2,430

	provided for diabetes patients			
	7. 1 survey and evaluation con1 survey and evaluation conducted	DONE	3 by the program responsible	
	8. Other relevant activities *creation of the dedicated bank accounts * Printing networks * Meetings with Directors of departmental hospitals for agreements * Radio broadcasts	DONE	*1 bank account for Lokossa and 1 for Natitingou * posters, booklets and leaflets will be printed * 2 agreements are signed with Directors of Hospitals and departmental Directors of Health * 3 broadcasts for awareness on the local Radio	
Milestone 2	1. Protocols, guidelines and other material produced	DONE	Improvement of the circuit of patients for consultation and tools for nutrition education cf advices of our nutritionist trainer	
	2. 2 doctors in reference departments and 16 nurses retrained to equip and service the 8 established diabetes outpost clinics	DONE	The continuing training of physicians and nurses continued during the 8 missions of our trainers stakeholders (400 additional hours)	
	3. 300,000 people reached with awareness activities	DONE	About 300.000 people reached	With TV, Radio, camps, workshops , and during the World Diabetes Day the 14 /11 with educational breakfast
	4. 400 diabetes patients diagnosed, referred and attended, accumulated 700 diabetes patients	DONE	617 diabetes patients were diagnosed, referred and attended during the period Qualitatively for the patients regularly followed the average of HbA1c is 10,3% the first month and 7,4% after 5 or 6 months	Accumulated: 1.317, in the 2 Unities .
	5. 12,000 people screened at 15 camps / events, accumulated 17,000 people at 25 camps	PARTIALLY DONE	8.200 people screened in the period at 30 camps	Accumulated : 14.457 people screened at 50 camps
	6. 700 visits and/or consultations provided for diabetes patients, accumulated 1,200 visits and/or consultations	DONE	1.100 consultations conducted into the 2 reference departments during the period for diabetes patients	Accumulated : 3.530
	7. 1 survey and evaluation conducted, accumulated 2 surveys	DONE	The project responsible visited 3 times in the ground	Accumulated : 6 survey and evaluations conducted

	8. Other relevant activities	DONE	*File for LFAC(fild insulin help ) of IDF (Australia) Partnership with Santé Sud Dr ADAM at Natitingou go for advanced consultations in the CHD of Djougou Meeting with Hospital director	
Milestone 3	1. 2 doctors in reference departments and 16 nurses retrained to equip and service the 8 established diabetes outpost clinics	DONE	The continuing training of physicians and nurses continued during the 6 missions of our trainers stakeholders (300 additional hours)	Accumulated 750 training hours
	2. 500 diabetes patients diagnosed, referred and attended, accumulated 1,200 diabetes patients	DONE	360 diabetes patients were diagnosed, referred and attended and regularly followed during the period	accumulated : 1677 patients
	3. 13,000 people screened at 10 camps / events, accumulated 30,000 people at 35 camps	Partially done	3000 people are screened at 14 camps	Accumulated : screened : 17500 at 64 camps
	4. 1,000 visits and/or consultations provided for diabetes patients, accumulated 2,200 visits and/or consultations	DONE	3057 consultations are provided for diabetes patients into the 2 Diabetes unities and advanced consultations outside the unity	Acumulated : 6587
	5. 1 survey and evaluation conducted, accumulated 3 surveys	DONE	2 survey and evaluation	Accumulated : 8
	6. Other relevant activities	DONE	Several meetings with officials of private or denominational institutions for their cooperation in the screening Recordings of radio spots in french and local languages which will be broadcast twice a day on the radio stations of Lokossa, Come and Adjahoume  Meeting with the president of beninese diabetic patients association workshop with colleagues for organization of world diabetes day	
Milestone 4	1. 2 doctors in reference departments and 16 nurses retrained to equip and service the 8 established diabetes outpost clinics			
	2. 500,000 people reached with awareness activities, accumulated			

800,000 people			
3. 500 diabetes patients diagnosed, referred and attended, accumulated 1,700 diabetes patients			
4. 15,000 people screened at 15 camps / events, accumulated 45,000 people at 50 camps			
5. 2 diabetes centres (reference departments) established in existing specialised hospitals			
6. 8 diabetes outpost clinics established in local hospitals			
7. 1,400 visits and/or consultations provided for diabetes patients, accumulated 3,600 visits and/or consultations			
8. 1 survey and evaluation conducted, accumulated 4 surveys			
9. Other relevant activities			

**2. Accumulated project results on specific WDF indicators**

(WDF accumulates and communicates about the achievements of WDF funded projects. To assist us in these efforts, *please insert quantitative numbers for your project where relevant. Some of the indicators may be overlapping with the project results above. We apologise for the inconvenience this may cause.*)

Focus area	Specific WDF Indicators	Accumulated Number	Comments – if any
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Improving care	Number of clinics established or strengthened	3	The first in Natitingou, the second in Lokossa The third is in the CHD of Djougou where the auxiliaries are responsible for awareness and screening and Dr Alasane Adam comes for consultations each 15 days
	Number of patients treated through established clinics	1677	70% of them are followed (40% very regularly, 30% more irregularly). 65% of them get a better glucose balance
	Doctors trained	2	About 750 training hours
	Nurses trained	16	4 in the Diabetes Unities & 12 in the diabetes outposts
	Paramedics, educators and others trained – broadly understood	16	educators, teachers and families
Awareness and screening	Number of awareness and/or screening camps conducted	64	Some of the camps are far (40 or 50 km from the city)
	Number of people reached through awareness & screening camps	350,000	with TV, Radio & camps
	Number of people screened for diabetes	17500	
Diabetic retinopathy	Number of DR screening camps conducted	0	
	Number of people screened through DR camps	0	
	Number of people detected with DR	150	All the patients with 4 years or more with diabetes, many are in stages 1 or 2
	Number of people treated with laser	3	It is possible only in Cotonou, The equipment often failed and the cost is too high for many patients
	Number of people treated with surgery for the eye	16	for cataract
Diabetic foot	Number of foot-care training for HCP general	26	
	Number of patients screened for diabetic foot	75	
	Number of feet saved through treatment	60	15 had to be amputated because at a stage too late and complicated The surgery departments said us

			that the number of amputations is decreasing now
Gestational diabetes	Number of clinics strengthened with GDM care	2	There are also many pregnancy diabetes because diabetes often occurs in young adults
	Number of women screened for GDM	30	All regularly followed women carried their pregnancy to term without complication and without fetal macrosomia

**NB.**

**Before entering comments below in item 3 to 10, please ensure to delete text from previous reporting period.**

### **3. Project management's assessment of the past 6 months' project progress**

*(Include continued relevance of project objective(s) and design, appropriateness and sufficiency of planned activities to achieve objective(s) and present status in achieving the objective(s).)*

We have increased the media coverage with : many broadcasts in french and 4 local languages , spots are issued several times per day on various radio stations in the region a collaboration with several private or charitable clinics for screening and awareness is implemented

There is now a diabetes department In the CHD of Djougou ,in Donga , where Dr.Adam comes each 15 days for consultations

we finalized the inscriptions of Drs.Alassane Adam responsible of the Unity at Natitingou and Florient Djossou, responsible of the Unity at Lokossa, for their "Diabetes and therapeutic Education" training at the Institut "Formavenir" of Paris, they will be at Paris 5 days in November and December 2015

We completed the qualitative study of the work in the 2 units and in Djougou and eventual local particularities

\* At the beginning:

46 % of patients have HbA1c rates more of 10%,  
only 10% have 7%

After 5 or 6 months 56% of the followed patients have HbA1c rates at 7%

\* Diabetes most often appears early in life , half before 45 years including 22% between 20 and 35 years,.

\*About 20% of patients need insulin: They are type 1, young type 2 , African type 1B and insulin requiring type 2

\* More of patients have High blood pressure in the North : 37% need treatment against blood pressure in the Unity of Natitingou , 15% in Lokossa

The auxiliary staff of the Unities works 5 days for week, during 3 days with MD for

consultations and 2 days for blood controls, screening and emergencies , so patients are greeted all the working days

#### **4. Major achievements**

The agreements with the Hospital Directors and Departmental Health Directors have been signed

The dedicated bank accounts have been opened at Bank of Africa

The Unities are now all refurbished, extended and equipped including HbA1c machine

World Diabetes Day was celebrated at Parakou and Natitingou and Lokossa

The « Rapid assessment Protocol for Insulin access” and the questionnaires about the local needs for LFC (Life for children) program are send to the responsible at IDF Australia

About 1700 patients are regularly followed, which allows a study of the features of diabetes in Benin and an assessment of the quality of care: :

#### **5. Constraints encountered to project implementation, if any**

The difficulties to find Beninese suppliers of consumable (cartridge HbA1c, strips for glycosuria, strips for blood glucose and , lack of stocks of CAME, (Central of the drugs of the Ministry)

The difficulties to travel in the country, the roads are rutted, Cotonou and Lokossa are in the South near the coast; Natitingou is in North West near the border with Burkina Faso (600 km)

The poor patients cannot always buy prescription drugs and regularly make their treatment, we can give them free oral antidiabetic drugs but not insulin

For the November 14 the events were banned in public places because authorities feared a recovery by political opponents.

So the JMD due take place inside the hospital, limiting the impact on the general population

The hospitals not employ more of medical doctors because they have no money , so our doctors responsible of Unities have to work only 3 days by week for diabetes and other days they have to work in department of general medicine

#### **6. Solutions found/proposed to constraints encountered, if any**

- \*• send the "Rapid Assessment Protocol for Insulin Access and questionnaires LFC
- rent a car with driver for the travels

#### **7. Need for adjustment, if any**

*(If project activities and plans should be adjusted, please state it here, including justification.)*

Reallocation of EUR 4000 from “equipment” to “local staff” will be necessary because more training hours and travels are planned and equipment is now sufficient

## **8. Project materials**

*(Please attach electronic files of all materials produced by the project, e.g. IEC materials, training manuals, guidelines, movies, publications etc. In the section, please list the attached documents.)*

TRAINING MANUALS :Posters, Booklet Diabète, Interview radio, video, nutritional tools

## **9. Opportunities identified, if any**

*(State if new opportunities have arisen. Describe the opportunity(ies) including how it feeds into the present project. Include recommendation as to how it may be covered/included in the project.)*

The Diabetology training, such that made so far, could be complemented by an European University which would increase fame of our units in Benin.

This can be supported by the program budget and included in “Local staff” item”.

Programme Formation : Diabète et éducation thérapeutique – 2015

Objectifs

- Mieux comprendre le diabète : connaissance de la maladie, de ses contraintes...
- Mettre en place une prise en charge adaptée en utilisant les techniques de l'éducation thérapeutique
- S'entraîner à animer une séquence éducative

Programme

- la physiopathologie du diabète, ● les manifestations cliniques, ● les complications
- la prise en charge et le traitement, ● les recommandations
- Approche et concept en éducation thérapeutique du patient
- Le contexte, ● La problématique de la maladie chronique, ● La place de l'éducation thérapeutique du patient
- Les différents groupes d'aliments et leurs nutriments, Acquérir les principes de base d'une alimentation équilibrée
- Atelier sur les groupes d'aliments et sur l'élaboration d'un menu équilibré, ● Les bases du régime
- Les équivalences glucidiques, ● Ateliers sur les hypoglycémies et les glucides
- Les étapes de la démarche éducative du patient diabétique
- La problématique de la maladie chronique, ● Les compétences à développer par le patient
- L'information et l'inclusion du patient dans un programme d'ETP, ● Le diagnostic éducatif
- La définition et la priorisation avec le patient diabétique des compétences à développer
- La co-construction avec le patient de son parcours, ● Les techniques d'entretien favorables au diagnostic éducatif
- La mise en œuvre des séances éducatives, ● Les principes pédagogiques de base



- L'animation d'une séance, ● L'élaboration d'un programme ETP structuré pour le patient diabétique et critères de qualité

#### **10. Implementation plan for the next 6 months**

*(List key activities planned for the next 6 months based on the project implementation plan and the Milestone targets set in the Project Partnership Agreement.)*

- \* Do all what it is necessary for the complementary diabetes training in Paris for our Beninese colleagues
- \* Improve the number of screened persons by associating the private clinics and charity organizations
- \* Improve workshops about good food and good nutrition and physical activity

#### **11. Other relevant aspects/details**

*(Include media coverage for the project, key lessons learned, and other aspects deemed important by the project.)*

Improve the sharing of experience between the 2 units

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#### **WDF Secretariat comments to the report:**

*(Internal comments to be inserted upon review of report. Include necessary action, if any)*