



American University of Beirut
Faculty of Health Sciences



**HelpAge
International**

age helps



American University of Beirut
Faculty of Health Sciences

Does a quality management NCDs program have an impact in a complex humanitarian setting?

RESCAP-MED 2nd Regional Symposium on Non-Communicable Diseases (NCDs)

“Socio-political Challenges in the Mediterranean Region: Implications for NCD Prevention and Control”

Team members:

Martine Najem, Rima Afifi, Abla Sibai, Hanan Sabri, Maguy Ghanem, Mia Chartouni
Center for Public Health Practice – Faculty of Health Sciences - American University of Beirut

Gefinor, Rotana – Beirut

December 4, 2014

Outline

- ▶ Background
- ▶ The intervention aim, log frame, and evaluation purpose
- ▶ What do we know about community-based CVD interventions and interventions in humanitarian settings?
- ▶ The project's M&E framework
- ▶ Challenges in implementation and evaluation to date



Background

- ▶ 54% of older surveyed refugees in Lebanon have a chronic disease
- ▶ 13% of Syrian refugees in Lebanon report suffering from a chronic disease

The management of non-communicable diseases (NCDs) is a major public health issue in Lebanon within the context of the Syrian Refugee Crisis

Overall Aim of the Intervention



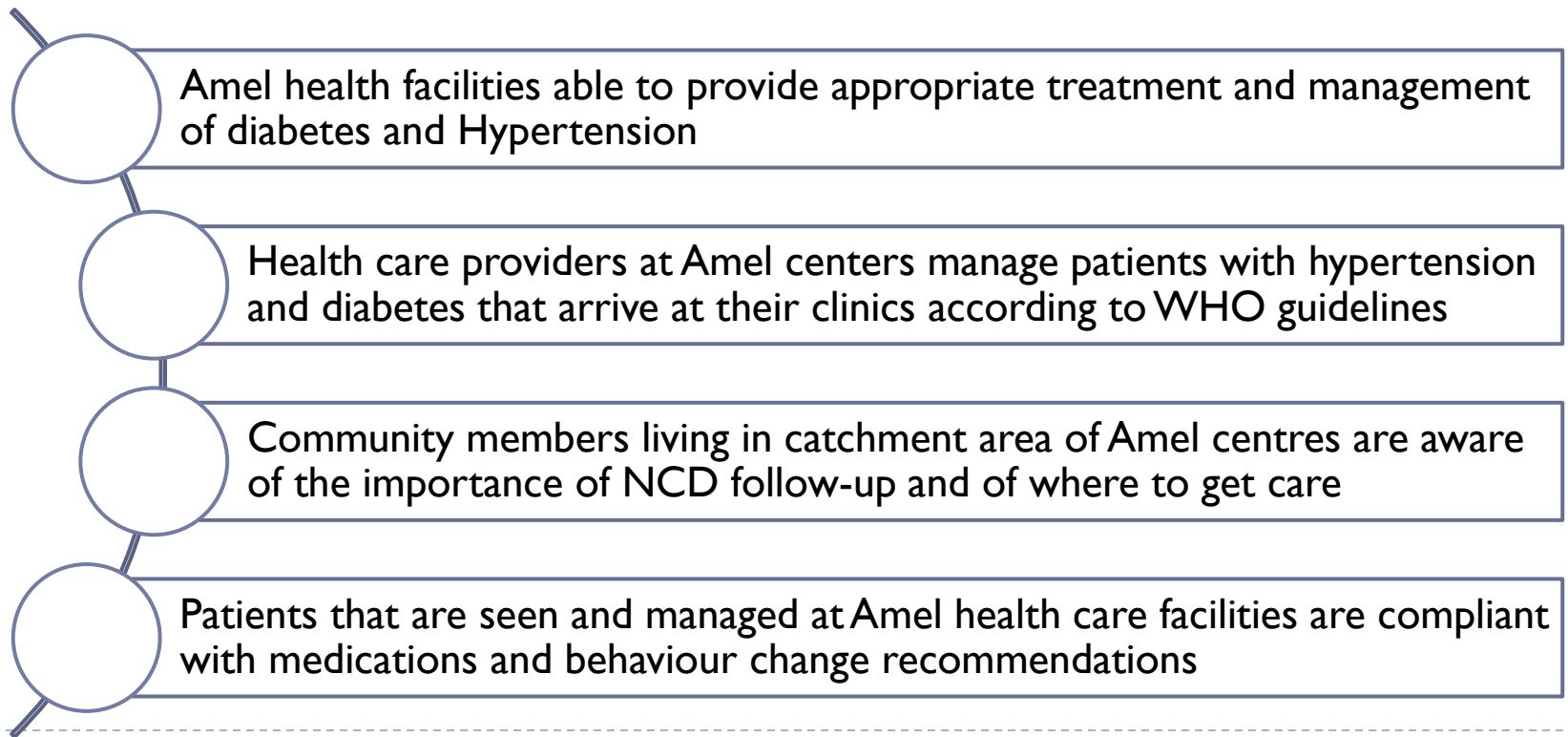
- **Project Title:** Improve management of NCDs for older adults in refugees and host communities, Lebanon
 - **Overall Goal:** Improve the management of diabetes and hypertension at primary health care level with the ultimate aim of contributing to the decrease in morbidity and mortality linked to chronic diseases among Syrian refugees and host communities
 - **Role of AUB:** Monitoring and evaluation of the project to assess its effectiveness and inform recommendations for scaling up the intervention
-



Project Log frame

▶ **Process/implementation evaluation**

▶ Outcomes:



Intervention – In 3 sites in Lebanon

Provision of support to Amel centers and Mobile Clinics

Training of healthcare workers on NCD guidelines

Awareness raising among community (Outreach, etc...)



Why Evaluate this Project?

The Questions to be answered

- ▶ Are NCD interventions effective in a context where healthcare centers lack resources?
 - ▶ In a setting like Lebanon, where Syrian refugees are in informal settlements, can the impact of an NCD program be measured?
 - ▶ What are effective capacity building activities which enhance the quality of services provided to manage NCDs in humanitarian settings?
 - ▶ Will there be discrepancies in results between host communities' members and refugees ?
 - ▶ What are the challenges and barriers that hinder the implementation of a quality management NCDs program in complex humanitarian settings ?
-





**What do we know about
community-based CVD
interventions and interventions in
humanitarian settings?**

Evaluation of NCD Interventions

Isfahan healthy heart program: Evaluation of Comprehensive, community-based interventions for non-communicable disease prevention

- ▶ “The implementation and evaluation of a comprehensive integrated community-based program for NCD prevention in a developing country is feasible and successful in obtaining short-term improvement in several lifestyle behaviors”
- ▶ Due to cost and complexity, the effect of each component of the intervention is rarely assessed
- ▶ “A true experimental design would have a number of communities allocated randomly into intervention and control communities”

Interventions in humanitarian settings: Example – ASRH program

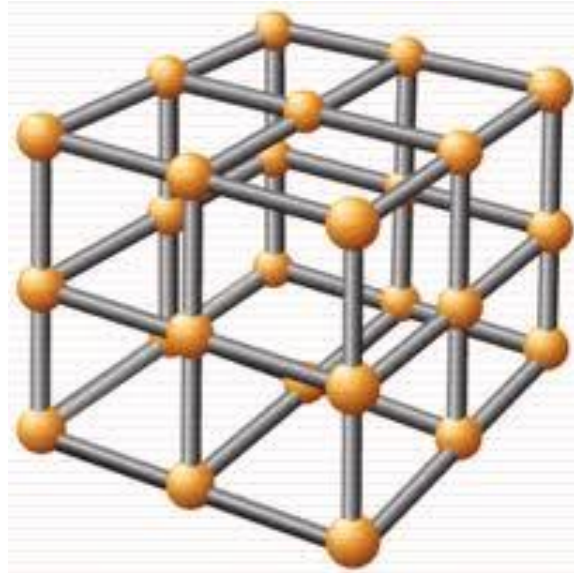
Best Practices in Successful programs:

- ▶ Stakeholder involvement to build community trust and secure adult support
- ▶ Responsive to the different needs of adolescent subpopulations, including married/unmarried, adolescents; in-school/out-of-school adolescents; and adolescents with disabilities
- ▶ Qualified and dedicated ASRH staff in the community
- ▶ Refresher trainings, and structured supervision
- ▶ Recognition and ongoing mentorship to peer educators to address motivation and retention challenges

Why Humanitarian Interventions Succeed or Fail?

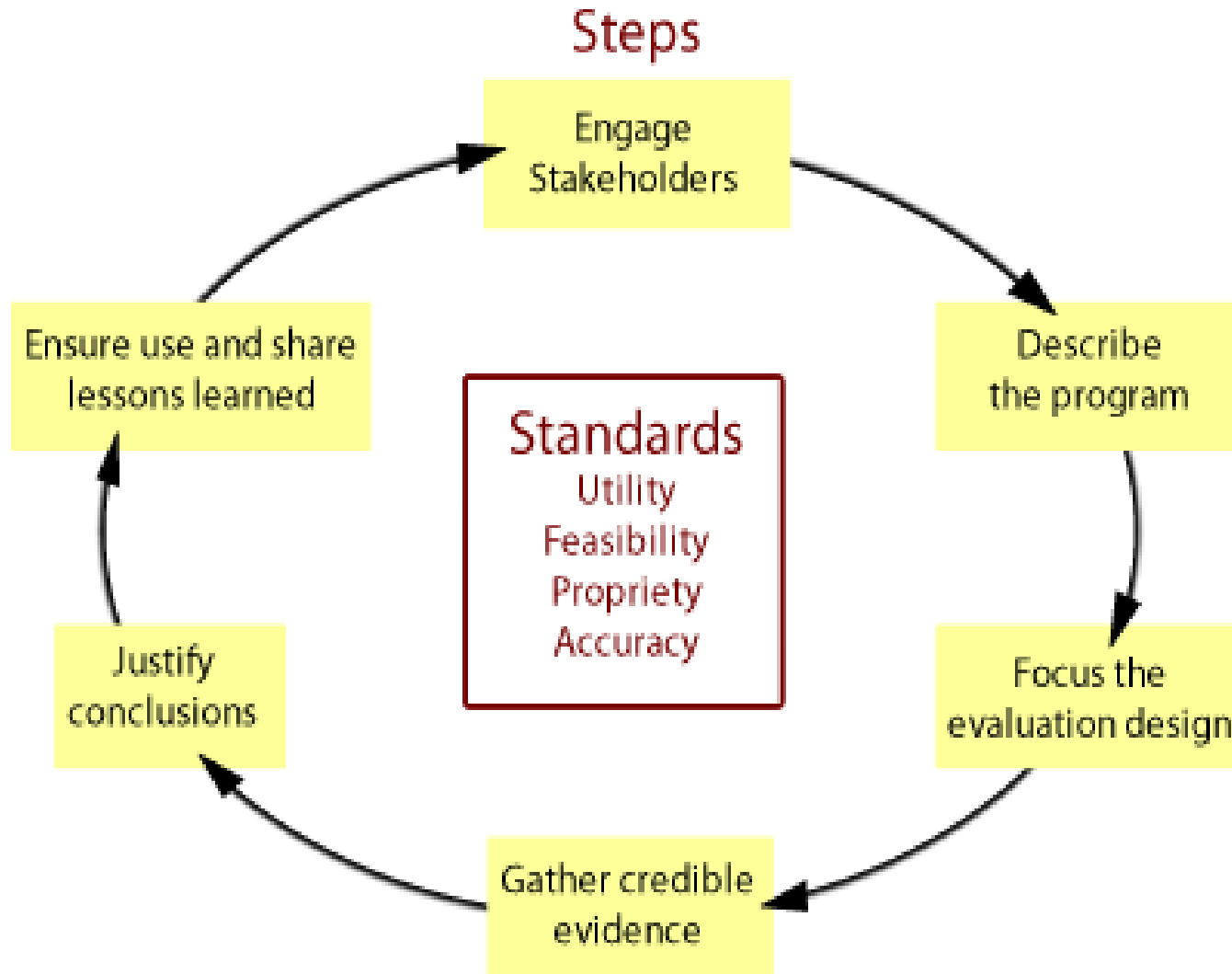
Failure	Success
Community is unlikely to feel a personal attachment to a solution externally imposed unless actively involved in the intervention activities	Significant time and effort the local population invests in interventions addressed to them (Ownership)
Limited Resources at the local level both human and financial	High commitment of external actors in the process of humanitarian Intervention





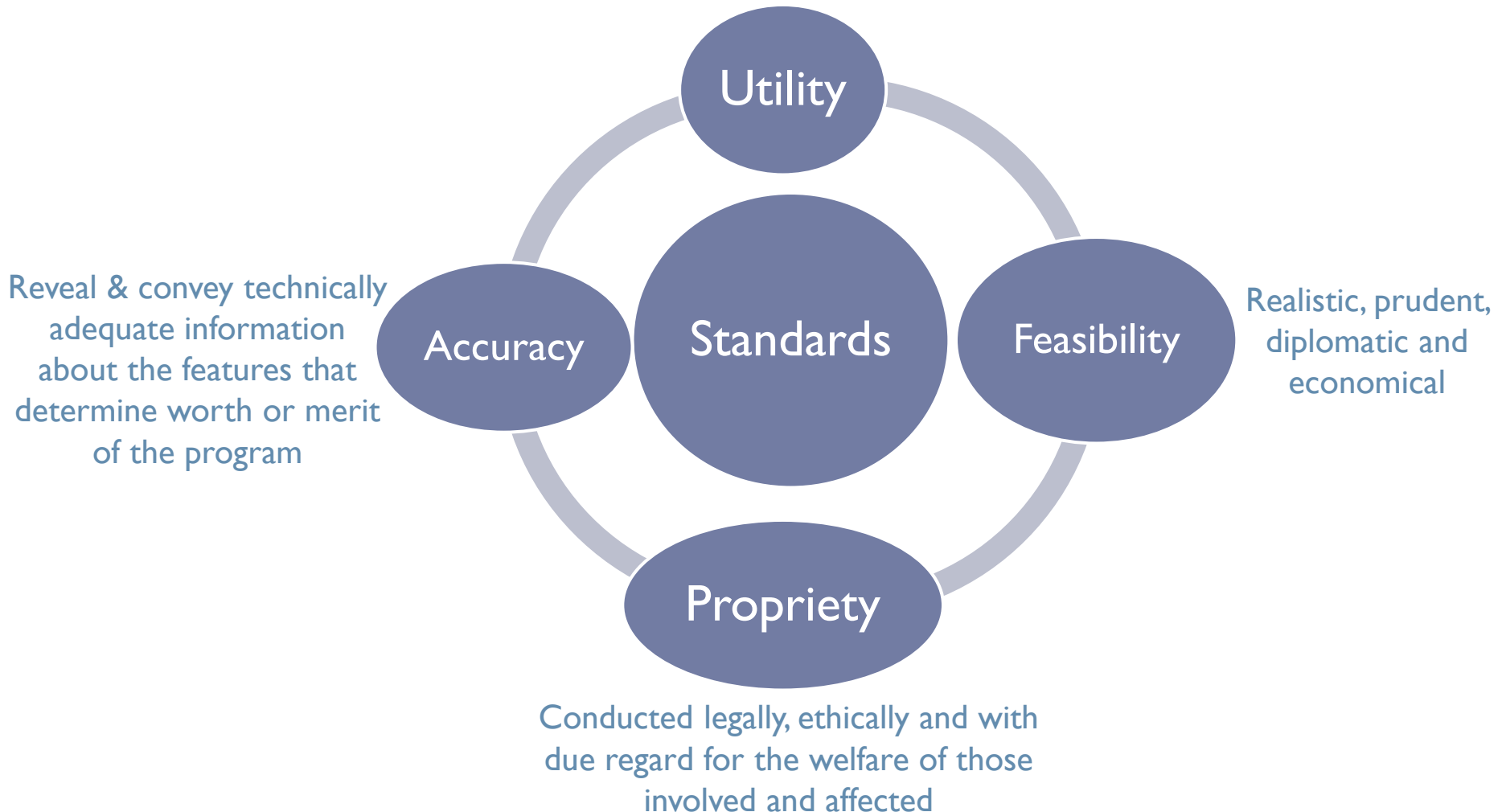
The Project's M&E Framework

M&E Framework



Standards of Evaluation

Serve the information needs of intended users





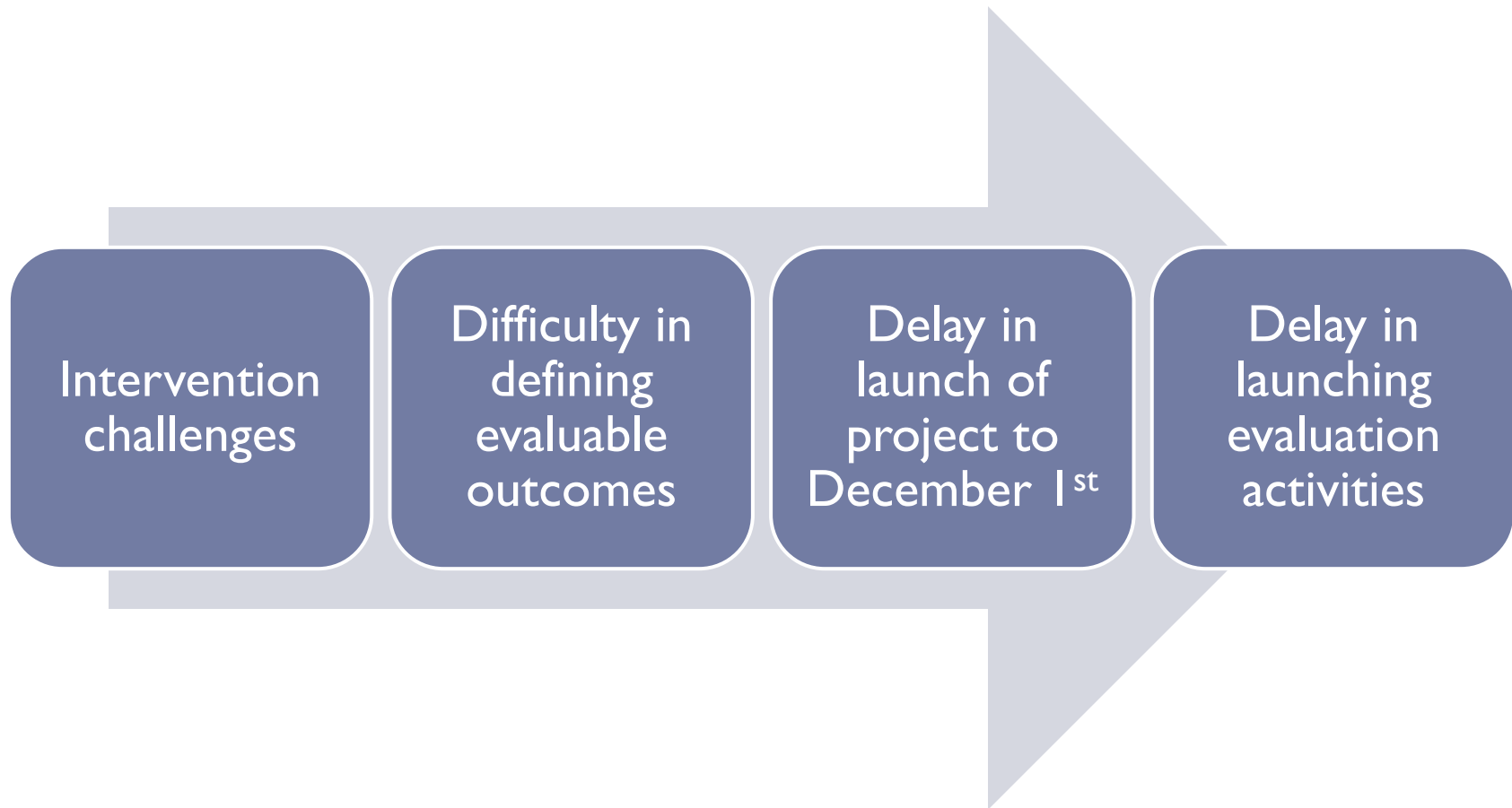
Challenges to Implementation and Evaluation to date

Challenges to the Intervention

- ▶ Timely availability of medications
- ▶ Available NCD guidelines are outdated (2006)
- ▶ Discrepancies between the centers and the mobile clinics
- ▶ Outcome of trainings for doctors and nurses
- ▶ Security issues in the Bekaa area
- ▶ Workload and limited resources during peak times at the PHCs



Impact on M&E process



M&E Challenges

- ▶ Alignment of project activities with the set objectives
- ▶ Uncertainty around the intervention activities (Testing ideas)
- ▶ Definition of targets prior to starting the intervention
- ▶ Lack of baseline data
- ▶ Project limited timeframe (6-8 months)
- ▶ Low literacy of target population
- ▶ Documentation, record keeping, reporting mechanisms
- ▶ Concerns of ethical nature





How will Results of this
Project be Used?

Making Use of the Evaluation Findings

- ▶ Advocacy at national and regional level
- ▶ Scaling up NCD management programs based on lessons learned
 - ▶ Improve Intervention Design
 - ▶ Optimizing activities and resources
 - ▶ Maximizing Benefits
 - ▶ Improve Evaluation Design
 - ▶ Evaluable components
 - ▶ Viable methods
 - ▶ Effective monitoring tools
 - ▶ Comparativeness



Thank you

