

Enhanced NCD care at primary health care level: NCD screening response led by community (NRC) project in Myanmar



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Introduction

Non-communicable diseases (NCDs) are a major public health concern in Myanmar². One-third of the population is affected by hypertension, and one in ten has diabetes. NCDs are responsible for 24% of deaths, and if proper measures are not implemented, fatalities due to NCDs are expected to double in the next decade³. To address these challenges, this project aims to improve the use of NCD-related health services at primary health care centers by: 1) capacity building of community-based volunteers and service providers for service provision; 2) improving access to NCD investigations and treatment across all health facilities; 3) creating a referral system with public and private sector networks for secondary and tertiary services; 4) developing a system for patient tracking and monitoring of NCDs and mental health services.



Community-Based Volunteer Providing Health Education and Monitoring Blood Pressure in Peri-Urban Area



Provision of NCD Health Care Service in Conflict-Affected Area

Results and discussion

From June to December 2022, more than 14,000 people were screened for hypertension and diabetes, with approximately 5,600 cases of early detection for these diseases in the community, and then properly referred for further treatment by community volunteers. Around 3,700 patients received additional treatment through “three clinic models” by a variety of healthcare providers. Both the screening and treatment guidelines were adopted from the PEN interventions implemented in Myanmar. In the capacity building of NCDs screening, care, treatment, and tobacco cessation, 34 community volunteers and 51 healthcare providers were trained. Patients with mental health issues received services through face-to-face consultations or virtual group webinars. One-on-one counseling was provided at least five times to 20 patients who urgently needed mental health support, and more than 150 people received mental health awareness sessions through three virtual webinars. With significant challenges in Myanmar, an innovative community-based approach has impressively filled gaps and assistance to communities in NCD intervention at primary health care level.

Conclusion

Myanmar has a high prevalence and incidence of NCDs. Timely screening services, prompt referrals, and effective treatment are needed to reduce NCD morbidity and mortality rates. Through community engagement of the primary health care systems in different settings, both private and public sectors, we can work together to create a more sustainable and equitable future for NCD prevention and control, ultimately improving the health and well-being of our communities.



NCD Health Education Pamphlet Developed as Part of This Project

သွေးတိုး ရှိ/မရှိ မှန်မှန်တိုင်းပါ။

(၂) ရှိလျှင် ဆေးကို အချိန်မှန်သောက်ပါ။

(၃) သွေးတိုးကျဆေးကို ညွှန်ကြားသည့်အတိုင်း မှန်မှန်သောက်ပါ။

(၄) ဆေးရုံ၊ ဆေးခန်းသို့ မှန်မှန်ပြသ စစ်ဆေးခံပါ။

(၅) အဆီ၊ အဆီမဲ့၊ အငန်များသော အစားအသောက်များကိုရှောင်ပါ။

(၆) ကိုယ်လက်လှုပ်ရှား အားကစားပုံမှန်ဆောင်ရွက်ပါ။

Key Message sticker for Hypertension patients

ထမင်းပန်းကန်တွင် ရိတ်ညှိအမျိုး

ထမင်းရိတ်ညှိ 1/4

အသား၊ ငါး၊ ပဲစလေး 1/4

ဟင်းခင်း 1/2

သစ်သီး၊ အစားအသောက်

နို့ ၁ခွက်

(၁) ကဆီခါတ်များသော ထမင်း၊ ဂျုံ၊ ပြောင်း၊ အလူး စသည်တို့ကို လျော့စားပါ ထန်းလျက်၊ သကြားချို၊ သောမုန့်များ မစားသုံးသင့်ပါ။

(၂) အစားကို အချိန်မှန်စားပါ။

(၃) သောက်နေကျ ဆီးချိုဆေးကို ညွှန်ကြားသည့်အတိုင်း မှန်မှန်သောက်ပါ။

(၄) သွေးတွင်း သကြားခါတ်ကို ပုံမှန်စစ်ဆေးပါ။

(၅) ဆေးရုံ၊ ဆေးခန်းသို့ ပုံမှန်ပြသ စစ်ဆေးခံပါ။

(၆) ကိုယ်လက်လှုပ်ရှား အားကစားပုံမှန်လုပ်ပါ။

ဆီးချိုရောဂါသည်တို့ စားသင့်သောသစ်သီးများ

မာလာကာသီး၊ ခရိုင်ခရမ်း

ပန်းသီး၊ ပန်းသီးတော်သီး

ထောပတ်သီး၊ ထောပတ်သီး

Key Message sticker for Diabetes patients

Methodology

The project was implemented in the peri urban area of Yangon region and conflict-affected areas, targeting 15,000 people, with equal numbers from each area. In three clinic models involving charity clinics, private clinics of general practitioners (GPs), and faith-based clinics in emergency crisis areas, PATH provided capacity-building training for 51 healthcare providers and 34 community health volunteers on effective treatment of hypertension, diabetes, and mental health based on World Health Organization’s package of essential NCD (PEN) interventions guidelines. During the project, we collaborated with mental health experts for webinars and counseling sessions. Monthly monitoring and evaluation were conducted with technical visits, online monitoring, clinical guidance, and regular training.