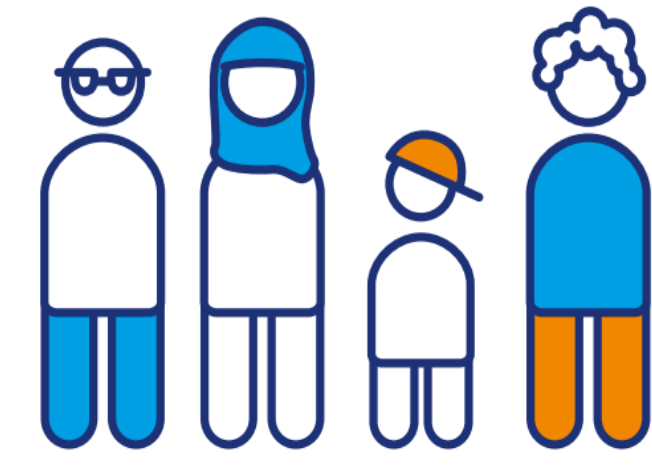


# Asset Based Community Development Approach to Diabetes Prevention & Weight Management in South Asian Women



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READY STEADY ACTIVE

Supported & Funded by Diabetes UK Community Champions Programme



**4.7 million** people in the UK have diabetes.

Women & girls from South Asian background have the lowest physical activity rates & face greater barriers than their white counterparts to access physical activity opportunities & healthcare resources.

South Asian and black people are **two to four times** more likely to develop Type 2 diabetes than white people.



The NHS spends at least **£10 billion a year** on diabetes.

**That's 10% of its entire budget.**

1. NCVIN (2016). Diabetes Prevalence Model for England + estimated growth between 2015–2020 from APHO (2010) Prevalence Models for Scotland and Wales.
2. Hex, N., et al (2012) Estimating the current and future costs of Type 1 and Type 2 diabetes in the United Kingdom, including direct health costs and indirect societal and productivity costs. Diabetic Medicine. 29 (7) 855–862.
3. Sport England Active Lives survey Nov 2016–18 (two years combined).
4. Health and Social Care Information Centre (2006). Health Survey for England 2004, Health of Ethnic Minorities and Ntuk, U.E., Gill, J.M.R., Mackay, D.F., Sattar N. & Pell, J.P. (2014). Ethnic-Specific Obesity Cutoffs for Diabetes Risk: Cross-sectional Study of 490,288 UK Biobank Participants. Diabetes Care 37(9), 2500–7.

Why is this important?

What is our approach?



Asset Based Community Development (ABCD) uses existing community assets, people, skills & networks to produce health & wellbeing interventions which build relationships, create resources leading to stronger & more empowered communities.

Programme designed & delivered by local community-based sport, health & physical activity provider with strong knowledge, relationships and experience working with South Asian communities.

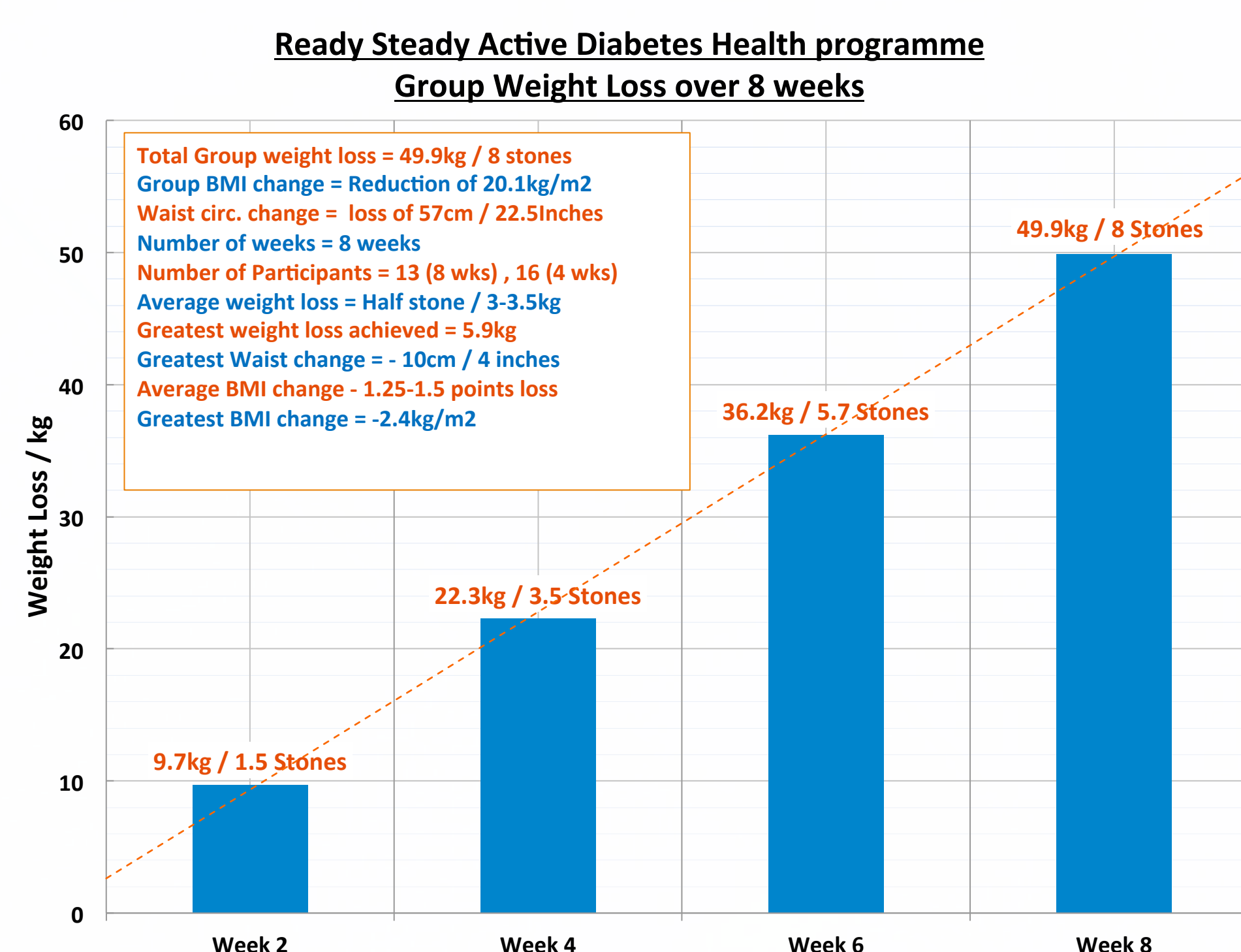


How did we do it?

- 17 adult females of SA background with diabetes or high risk of diabetes recruited onto the programme.
- Designed & delivered a community-centred 8 week programme.
- 3 x physical activity & 1 x information session per week.
- Ongoing support.
- Wellbeing, lifestyle and diet monitored.
- Weekly measurements carried out.
- Supported by Diabetes UK, Community Champions, Pharmacists & Consultants.



What are the results?



- Reduction in weight, BMI and waist circumference measurements.
- Reduction in pulse rate, BP & HbA1c measurements.
- Participants reported improved wellbeing, happiness and knowledge base scores.
- Food diaries showed improved eating patterns.
- Participants showed they maintained positive changes, improved lifestyle, behaviour and knowledge resulting in sustained weight loss.

What are the conclusions?

**An ABCD approach building on existing community assets, local expertise, skills and networks can be very effective in engaging South Asian women in health programmes.**

- Programme designed & delivered by a trusted local partner with knowledge of the community & culture is key to enabling strong engagement & results.
- Incorporating regular physical activity sessions & regular contact keeps participants engaged.
- Peer-support is important where participants can socially & emotionally support each other. Programme design should include peer support development from the onset.
- Community Champions participation & support was helpful.
- A community-led ABCD approach would enhance the current diabetes intervention offer and could lead to higher success rates and lower costs.



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