

# FROM IMPLEMENTATION RESEARCH TO IMPACT

## The GACD Diabetes Research Programme Report

# KEY MESSAGES FOR HEALTHCARE PROVIDERS

## BACKGROUND

In 2013, GACD launched a joint call for funding applications, with the overarching aim of tackling the growing global burden of type 2 diabetes (T2D) in low- and middle-income countries (LMICs) and populations experiencing health disparities in high-income countries (HICs) by providing implementation science-based evidence intended to inform policy and practice.

## THE DIABETES RESEARCH PROGRAMME

- Fourteen implementation research projects successfully received funding and were convened as the GACD Diabetes Research Programme.
- Collectively, GACD funding agencies awarded more than \$21 million USD to fund 14 projects, spread across 19 countries.
- The Diabetes Report serves as a summary of the work undertaken by the 14 projects and, where possible, seeks to provide an initial description and synthesis of the methods, strategies, results, and impact of the projects.



The projects aimed to generate evidence that **healthcare providers** and **decision-makers** could use to implement effective diabetes programmes.

## KEY MESSAGE 1

### TECHNOLOGY IS PROMISING BUT NOT A SILVER BULLET FOR DIABETES

The role of digital technology in healthcare has increased due to advancements in cloud computing, diagnostics, and mobile apps. Research from diabetes projects highlights the need for user-friendly technology that evolves with user preferences. While m-Health strategies show promise, their success often requires integration with other behavior change methods. Additionally, interoperability among healthcare facilities is crucial for effective electronic data collection.

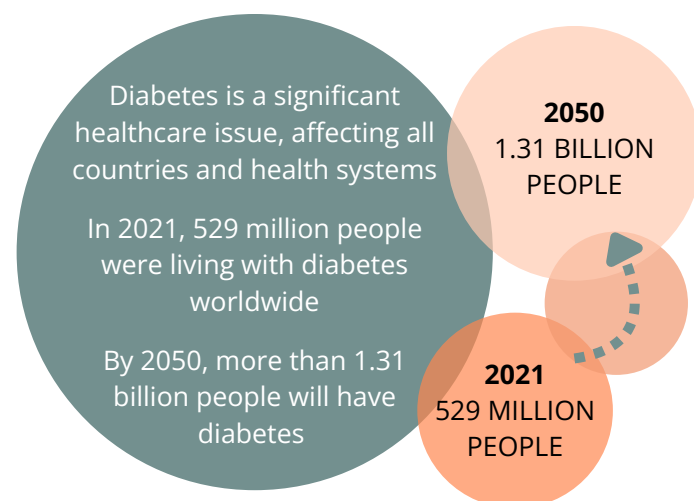


This flyer summarises key messages from the **GACD Diabetes Report** for people providing healthcare, including facility managers, clinicians, and allied health professionals.

## KEY MESSAGE 2

### REACH OUT TO SERVICE USERS

Successful implementation of T2D programmes requires buy in from the those using the service. Taking the intervention into the communities and integrating with them, rather than expecting the individuals to come to the intervention, was particularly successful.



## KEY MESSAGE 3

### WE CANNOT ADDRESS DIABETES WITHOUT ADDRESSING HEALTH INEQUITIES

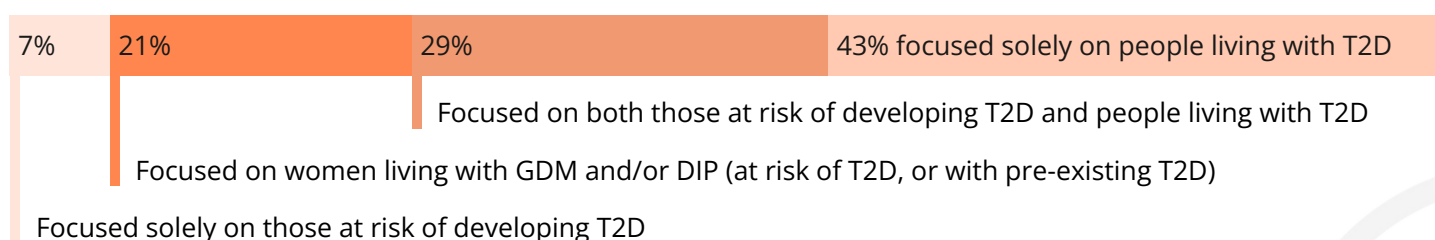
Reflections from project teams emphasised that addressing health equity is not merely a requirement, but a vital element for successful implementation. Indeed, the social aspect proved to be significant. Community-based strategies that empower individuals and enhance social support networks can effectively address specific diabetes outcomes while also combating broader health disparities.

By participating in implementation research, healthcare providers can contribute to generating evidence that informs more robust institutional policies and societal changes aimed at achieving equitable access to care.

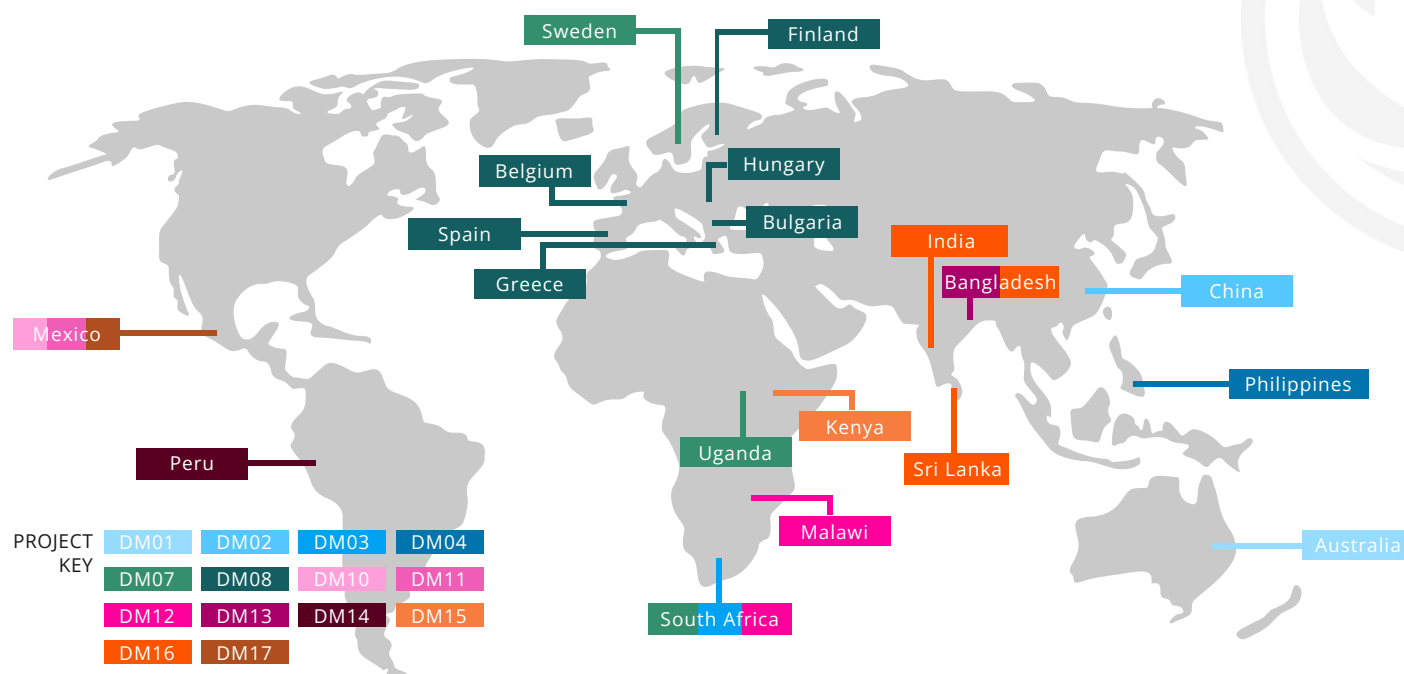
## THE 14 DIABETES PROJECTS

DM01	Improving the management of diabetes in pregnancy in remote Australia	DM11	Desarrollo y validación de un software ligado a un portal de internet que facilite el tratamiento médico y el empoderamiento del paciente con diabetes tipo 2
DM02	SMART Diabetes: Systematic Medical Assessment, Referral and Treatment for Diabetes care in China using Lay Family Health Promoters	DM12	Mobile phone text-messaging to support treatment for people with type 2 diabetes in sub-Saharan Africa: a pragmatic individually randomised trial
DM03	IINDIAGO: Integrated INtervention for DIAbetes risk after GestatiOnal diabetes	DM13	The Bangladesh D-Magic Trial: Diabetes Mellitus Action through Groups or Information for better Control
DM04	CHAPP: Community Health Assessment Program in the Philippines	DM14	Implementation of foot thermometry and SMS to prevent diabetic foot ulcer
DM07	SMART2D: A people-centred approach through Self-Management and Reciprocal learning for the prevention and management of Type 2 Diabetes	DM15	BIGPIC: Bridging Income Generation with Group Integrated Care
DM08	Feel4Diabetes: Families across Europe following a hEalthy Lifestyle 4 Diabetes prevention	DM16	A lifestyle intervention program for the prevention of type 2 diabetes mellitus among South Asian women with gestational diabetes mellitus
DM10	Desarrollo de una red social interactiva para el control metabolico de los pacientes con diabetes	DM17	Tools and practices to reduce CVD and complications in diabetics in Mexico

## GROUPS IN FOCUS ACROSS THE 14 DIABETES PROJECTS



## GEOGRAPHICAL SPREAD OF THE 14 DIABETES PROJECTS



### Accompanying outputs

- **Commentary:** A commentary article written by GACD researchers reflecting on this report is in development.
- **Database:** An online, interrogatable database containing information submitted by diabetes project teams. Content can be used for examination, exploration, and analysis at the project teams' interest and discretion. Only available to GACD project teams.
- **Summary slide set:** Ready-made slide set summarising report content. Primarily intended for researchers but available to all.
- **Social media toolkit:** Visuals and text for social media posts related to report dissemination, available to all.

### Authors and attributions

Content of this key message flyer was prepared by Izzy Bandurek. All contributors are listed in the report. Members of all diabetes project teams are listed on the GACD website.

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