Scaling-up Packages of Interventions For Cardiovascular Disease Prevention In Select Sites In Europe And Sub-saharan Africa

Funded By
SPICES is an acronym that stands for Scaling-up Packages of Interventions for Cardiovascular Disease Prevention in selected sites in Europe and Sub-Saharan Africa. This project aims to implement and evaluate a comprehensive cardiovascular disease prevention program in sites in Belgium, France, South Africa, Uganda and the United kingdom. It is an implementation science project funded by the European Commission through the Horizon2020 research and innovation action.
In January and February 2019, the Nottingham SPICES Project Coordinator, Mark Bowyer, organised and facilitated a series of trainings for volunteers to carry out the baseline survey in Nottingham. These training and refresher sessions saw the participation of Nottingham Trent University undergraduate and postgraduate students from mixed backgrounds. Using National Health Service (NHS) England material, the volunteers were trained on goal setting, problem solving and action planning which are techniques to facilitate behaviour change. Following these trainings, the baseline survey for Nottingham site has begun with about 135 surveys carried out in the last 02 months. These surveys include the Interheart and the ABCD questionnaires which focus on basic heart health literacy, perceptions of heart health risk and readiness to improve unhealthy lifestyle as smoking, poor diets and physical inactivity. Survey results are scored from 0-48 with a 0 indicating the lowest risk and 48 the highest risk. A low risk score is 0-9, a medium risk score is 10-15 and a high risk score is 16-48. The project site aims at reaching 1000 surveys. It should be noted that the SPICES Nottingham project aims to explore how existing community engagement and development models can support scalable and effective delivery of heart health literacy and behaviour change out of formal healthcare settings.

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*No research without action, no action without research*

By Almighty Nchafack
Nottingham Trent University

This first Resonance group meeting became an inspiring afternoon in which experts from different domains exchanged thoughts and ideas from their own practical experiences, as well as critical reflections on their next steps. Based on the positive reactions of the participants, we are convinced that we can develop successful partnerships with our stakeholders and that their perspectives, resources, and skills would add value to SPICES research. In addition, these stakeholders are likely to give direction, reinforce and sustain the SPICES project in the future.
Inaugural lecture: Redesigning Bottom-up Health Systems

On 6 March 2019, Professor in General Practice, Harm van Marwijk, gave his second inaugural lecture at Sussex University on, ‘How to Reinvent Primary Care from the Bottom-up: Engaging Communities.’ Describing himself as, ‘a lifelong student of mind, body connections,’ Prof. Harm focused on the idea of ‘connectedness,’ stressing that the core value of a health service lies in connections and dialogues between health service providers and users. He regretted the fact that, in general, health service recipients remain at the bottom of the health system hierarchy. Harm emphasised the importance of bottom-up approaches in re-designing health systems and referred to the Scaling-up Packages of Interventions for Cardiovascular Disease Prevention in Selected Sites in Europe and Sub-Saharan Africa (SPICES) project as an exemplar attempt at such an approach. He also added that SPICES illustrates the practice of global North-South collaboration and mutual learning. Inspired by the lecture, the next day, a General Practitioner introduced the Brighton SPICES team to the Chief Executive of Sussex Community Development Association, Penny Shimmin for collaboration. Prof. Harm and Dr. Papreen Nahar are the main investigators for Brighton and Sussex Medical School site which leads the cardiovascular disease profiling work package of the SPICES project.

Brest Team hosts SPICES face-to-face

The Centre Hospitalier Regional et Universitaire De Brest in France leads SPICES work package 5 which focuses on diagnosis and therapy of cardiovascular diseases. In June 2018, Brest in France hosted the 5th SPICES face-to-face with an interesting field visit to Guémené-sur-Scorff, one of the sites communities. From June 2018 to present, this study site has completed a literature review on non-pharmacological interventions for cardiovascular diseases (CVD) prevention in primary care. The literature review informed in depth interviews carried out with nurses, general practitioners and pharmacists, patients and their families, local politicians. In addition, a number of meetings with local stakeholders were held to lobby project buy-in and to prepare field interventions while a radio interview about the SPICES project was carried out in a local media outlet.

By Dr. Papreen Nahar, Brighton and Sussex Medical School, Sussex University, UK

By Dr. Delphine le Goff and Dr. Michele Odorico

By Dr. Papreen Nahar, Brighton and Sussex Medical School

The Brest Spices team from L-R: Dr Odorico (first), Prof. Le Reste (third), Dr. Le Goff (extreme right) and some GP trainees
Between November 2018 and February 2019, the University of Limpopo (UL) has trained 69 community health workers (CHWs) on cardiovascular disease prevention and control. The certificates of attendance were awarded on February 28, 2019 at the University of Limpopo to mark the beginning the SPICES consortium face-to-face meeting held in South Africa from February 28 to March 02, 2019. The award ceremony which was animated with songs by the excited CHWs was chaired by the SPICES Project Coordinator Prof. Hilde Bastiaens from the University of Antwerp, Belgium and top ranking officials from the UL.

During the face-to-face meeting, the consortium members visited 03 of the 11 clinic sites where the newly trained CHWs would carry out educational talks and referrals. The visits provided an avenue for other SPICES team members to learn lessons from the UL research sites, and share ideas in preparation for the implementation of the project phase.

The UL is a contributor to all project work packages, and the UL site has since been granted ethical clearance, and data collection is due to commence in March, 2019.

The Ugandan SPICES team has trained 115 health workers from 07 health centers on techniques of motivational interviewing. The training lasted 3 hours per day for 8 days per site and was done using material developed by the Ministry of Health (MOH) in Uganda after consultation with its Non Communicable Diseases Technical Working Group (TWG) in November 2018. Facilitators came from Makerere University School of Public Health, School of Medicine, Uganda Heart Institute, Ministry of Health as well as select health workers previously trained. A health worker from Ssi-Bukunja Health Centre (HC) III, Buikwe district provides insights into the contribution of the project: “I am very excited and happy about this training and thank the SPICES project for giving us this opportunity to learn….We hope to improve as individuals but also as a health facility” Kawolo Hospital (referral), Busabaga HC III and Ssi-Bukunja HC III in Buikwe district and Kojja HC IV (referral), Katooog HC III, Goma HC III and Nabalanga HC III in Mukono district are among the HCs trained.

The project also conducted a baseline survey at the community and health facility levels to benchmark indicators for planned interventions. At the community level, a mapping and listing exercise to generate a sampling frame was followed with a quantitative community survey of 3689 households. Qualitative interviews were also done with community health workers at baseline. At the health facilities, the health facility readiness survey has been carried out using the service availability assessment questionnaire (SARA) Quantitative interviews have also been completed with patients.

It should be noted that the aim of Ugandan SPICES project is to improve health profiles for people with intermediate and high risk factors for CVD at the community and health facility levels in Mukono and Buikwe district in Uganda.