### Programs under the 5 major themes of the WPDD Plan of Action (2006 – 2010)

<table>
<thead>
<tr>
<th>Country</th>
<th>Policies to reduce obesity and diabetes and NCDs</th>
<th>Population surveillance &amp; early diagnosis</th>
<th>Prevention of complications and self care</th>
<th>Strengthening capacity</th>
<th>Other related activities</th>
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<tr>
<td>Cambodia</td>
<td>Anti-smoking</td>
<td>Multi-center prevalence survey on diabetes and metabolic syndrome</td>
<td>Diabetes Management</td>
<td>Staff Training Only</td>
<td>Peer support program</td>
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<td>China</td>
<td>Anti-smoking</td>
<td>Multi-center prevalence survey on diabetes and metabolic syndrome</td>
<td>Assisting government in selection of drugs and insulin in the Essential Medicine List of China</td>
<td>The on-going &quot;China guideline for the Management of Type 2 Diabetes&quot; training program for diabetes clinicians (8000)</td>
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<td>Legislation for no-smoking policy in most public area (since 2007)</td>
<td>A government led pilot program to promote to improve diabetes care in the community through private public partnership and peer support program by NGOs.</td>
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<td>Healthy Run – first started in 2005 / attracted over 1,000 runners in Jan 2009</td>
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<td>Eat Smart Program and branding of restaurants with healthy diet.</td>
<td>Research program to use IT and team approach to stratify risk and deliver structured care augmented by peer support.</td>
<td>Additional funding into the primary care system to improve rate of complication screening in diabetic patients.</td>
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<td>Walk for Diabetes – for celebrating the World Diabetes Day – attracts participation of 600-700 walkers every year</td>
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<td>Country</td>
<td>Actions and Initiatives</td>
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<td>Indonesia</td>
<td>No smoking in public areas are endorsed by the government and there is also restriction on advertisements in the media. National Basic Health Survey in 2007 indicated many risk factors for NCD. Medical insurance for government officials and the &quot;poor people&quot; is covering basic health care (including insulin for certain areas) by the present government. Training and workshop on diabetes management health personnel by NGO/Diabetes and Endocrine societies. Health care system in some provinces already included strengthening of managing NCD's at the primary care level. Diabetes lectures and meetings for communities by chapters and headquarters of the diabetes association all over the country always well attended by 200 – 1000 people and Pandu Diabetes/Diabetes champions as peer support program is organizing active meetings. Global Diabetes Walk always attended by more than 10,000 participants yearly all over Indonesia since started.</td>
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<td>Japan</td>
<td>New medical insurance for diabetic foot care. Educational meeting and training course of diabetic foot care for nurses (CDE).</td>
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<td>Korea</td>
<td>TV advertisement. Community based cohort study to identify the risk factors in Korean population as well as to develop diabetes risk score model for early detection. Medical Insurance. Staff Training.</td>
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<td>New Zealand</td>
<td>Health Eating, Health Action strategy. Adopted a new algorithm for counting the number of people with diabetes using a range of databases linked using the unique patient identifier. Continues to actively promote disease-management approaches. A new nursing competency framework has been published in 2009. Schools and workplace programs.</td>
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<td>National Health Survey 2006/7. Screens for diabetes and CVD risk assessment. Effective Anti-smoking strategy. Evidence-based clinical guidelines have been updated and distributed in 2009. Researching for the best strategies for diabetes screening in younger women planning a family, and screening early in pregnancy for undiagnosed Type 2 diabetes.</td>
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<td>Philippines</td>
<td>Support research National Nutrition and Health Survey 1998, 2003, 2008 (diabetes, dyslipidemia, hypertension and other co-morbid illnesses)</td>
<td>Public awareness thru tri-media campaign</td>
<td>Diabetes/Workshops for allied healthcare professionals (nurses and dietitians), doctors and lay fora.</td>
<td>Distribution of health education materials in primary, secondary schools and industrial workplace</td>
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<td>Philippines</td>
<td>Active participation in the Philippine Coalition for the Prevention and Control of Non-Communicable Diseases under the Ministry of Health, Including reduction in smoking, cancer, obesity, diabetes, hypertension, lipids, dyslipidemia</td>
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<td>Singapore</td>
<td>Legislation for no smoking policy in most public areas.</td>
<td>Accreditation of diabetes educators. Chronic Disease Management Program</td>
<td>Diabetes screening for those at risks and complication screening</td>
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<td>Thailand</td>
<td>In process to re-inforce “Ready to eat food” labelling. Thai National Health Assembly will submit proposed activities to control obesity to Parliament.</td>
<td>Countwide on-going process using Thai diabetes risk score.</td>
<td>Implementing “Practice Guideline for Management of Diabetes Mellitus” and monitoring its use</td>
<td>- Staff training had been established. - Review and standardized “Diabetes Education Curriculum” by 3 societies. Diabetes Association of Thailand, Endocrine Society of Thailand and Thai Diabetes Educators Society. - Countrywide hospital accreditation for diabetes services.</td>
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2. Publications relating to prevention and control of diabetes from member states/societies

**Hong Kong:**
- A quarterly newsletter-magazine on diabetes (available in Chinese only)
- Education leaflet / booklet for patients (available in Chinese only)

**Korea:**
1. KDA Treatment Guidelines for Diabetes, 2007

**Philippines:**
- Diabetes Watch [http://www.diabetesphil.org/?fid=journal](http://www.diabetesphil.org/?fid=journal)

**Singapore:**
3. **Activities proposed for 2009 – 2010**

**Cambodia:**

In collaboration with World Diabetes Foundation, three projects are being implemented with three NGOs:

2.1. **Association Mission Care-Development Organisation (Mica-DO)**
- **Duration:** January 2006 – September 2009
- **Objectives:** The project seeks to improve diabetes care by training health care professionals, facilitate access to medication for the poorest and raise awareness on diabetes.
  - **Expected impact**
    - 13 doctors and 30 nurses trained
    - 30 health educators and 9 social workers trained in awareness and education
    - 10,000 persons benefited from diagnosis and information
    - 12,000 patients benefited from care and education
  - **Results to date**
    - The diabetes clinic at Kossamak Hospital has been running for four years and is now well established.
    - The diabetes clinic has more than 4,300 patients registered and has given more than 19,000 consultations.
    - Clinical training and practical teaching has been conducted for 300 health personnel at Kossamak Hospital. 1,500 training hours on oral treatment and complications have been given to medical staff and nurses at Kossamak Hospital.
    - An educational video about diabetes has been developed and is shown four times daily in the waiting area for patients.

2.2. **Ministry of Health / WHO/Cambodian Diabetes Association (CDA)**
- **Duration:** January 2007 - February 2011
- **Objective:** The project seeks to develop a sustainable model for quality and affordable diabetes care within the Cambodian public health system and to explore preventive strategies.
  - **Expected impact**
    - Diabetes/hypertension clinics established in 5 provincial hospitals: Kampong Cham, Battambang, Prey Veng, Pursat and Kampong Thom providing quality and effective care for people with diabetes
    - An estimated 38,947 patients with diabetes will have direct access to diabetes care at the clinics
    - An estimated 116,526 people with diabetes from surrounding districts in the five provinces will also benefit from improved diabetes care
    - 30-35 doctors and nurses will work in the established clinics and receive continuous in-service training
    - 30-40 health care staff in each provincial hospital will be trained through in-service training on diabetes and diabetic foot care
    - 100 health centre staff in each province will be trained on diabetes care, screening and high-risk assessment
    - National standards of care, guidelines and standardized data management system will be established

**Hong Kong:**

- Walk for Diabetes 2009
- Healthy Run 2010
- School-based Education Project for Prevention of Obesity and Diabetes among Children (2009-2011)
- Newspaper supplement to promote the World Diabetes Day

**Indonesia:**

i. Diabetes camp, 29-31 October 2009 in Malang East Java
ii. 2009 World Diabetes Day celebration in Jakarta and Maluku on 14 November
iii. Diabetes camp on April 2010 in Puncak West Java and October in Malang East Java
iv. 4 Diabetes courses and workshops during 2010 in several province in Indonesia
v. Indonesian Diabetes Day celebration on 12 July 2010 (since 1986)
vi. World Diabetes Day celebration on November 2010
vii. To setting up the modules of Diabetes Course for GP
Japan:

1) Foot care project in Asia-Pacific region (ASIPAC FOOT STUDY)

1. Background
   The number of diabetic foot lesions and consequently amputation is increasing in the Asia / Pacific region. Unfortunately, there are not foot care specialists such as podiatrists, chiropodists or pedorthists in this region and there is much ignorance amongst medical and paramedical staff as to how to identify and educate those at risk and treat those who develop problems. Since 2004 we have collaborated with the key hospitals in Vietnam, Indonesia, Mongolia, Thailand, Philippine, Tonga, Malaysia, China and India to overcome this common problem with funding from the Japanese Ministry of Health, labour and Welfare.

2. Aims
   We aim to increase awareness of the diabetic foot problems in the Asia / Pacific region and to improve screening and education of high risk patients through professional training with the ultimate aim of reducing amputations in this area.

3. Projects
   We plan to invite doctors, nurses and other paramedical professionals in the Asia / Pacific region to Kyoto Medical Center (Japan) for training on diabetes foot care which will be supported by foot care specialists from all over the world. We will encourage counterparts to attend as teams and will hold educational meetings comprising of lectures and practical workshops to train doctors and nurses in the participating countries. We will send our foot care team to the counterparts in each country to help to hold the educational meeting for healthcare professionals and patients. Additionally, we plan to establish a collaborating network system using internet and e-medicine to study and improve the management of foot problems in the Asia / Pacific region (ASIPAC FOOT STUDY). Using modern technology, we should be able to discuss cases via the internet.

4. Expected outcome
   Reduction of foot ulceration, limb amputation, prolonged hospitalization, medical expenses and an improvement in patients' quality of life and activities of daily living.

5. Links with IDF and WHO activities
   Based on the Western Pacific Declaration on Diabetes, we will perform collaborative works with the suggestion from IDF, WHO headquarters and regional offices.

Korea:

1. Education program for patients and families will be held once a month sponsored by Johnson & Johnson Medical

Philippines:

1. 25th Annual Convention and 5th Course on Diabetes and Vascular Disease
   November 11-13, 2009

2. Gimik Diabetes Year 3 and Celebration of World Diabetes Day on November 14, 2009

Singapore:

1. Public Forums
2. Outreach programs on Diabetes Awareness on Prevention in the heartlands.
3. Continuing Medical Education for doctors and nurses.
4. Talks on diabetes in workplace,