

**Title of Intervention:** Urban church-based program to reduce risk factors for diabetes among Western Samoans in New Zealand

**Intervention Strategies:** Supportive Relationships, Group Education

**Purpose of the Intervention:** To reduce risk factors for diabetes among Western Samoans in New Zealand

**Population:** Western Samoan church-goers at risk for Type 2 diabetes

**Setting:** Western Samoan church congregations in South Auckland, New Zealand; faith-based

**Partners:** None mentioned

**Intervention Description:**

- Supportive Relationships: A networking session was held with individual church leaders and members. A diabetes community educator and nurse specialist were available to conduct informal education sessions.
- Group Education: Four diabetes awareness sessions were held as a part of church services, featuring education sessions, videos and presentations. Groups formed for weekly exercise sessions that were led by the Samoan aerobics instructor and cooking lessons were offered.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: Diabetes nurse specialist, two Samoan members of the Health and Temperance Committee- one trained as a community diabetes educator and the other an aerobic instructor, church leaders
- Training: Training for community diabetes educator and aerobic instructor
- Technology: Not mentioned
- Space: Church space for exercise sessions, kitchen space
- Budget: Not mentioned
- Intervention: Leaflets in Samoan and English, video featuring Pacific Islander people, flip charts, posters in Samoan, incentives for completing exercise sessions, cooking supplies
- Evaluation: Questionnaires

**Evaluation:**

- Design: Quasi-experimental
- Methods and Measures:
  - Clinical measures, including weight, waist circumference and blood samples, were taken throughout the intervention.
  - Questionnaires measured diabetes knowledge and behaviors as well as asked about the participation experience.

**Outcomes:**

- Short Term Impact: The intervention congregation experienced increased diabetes knowledge.
- Long Term Impact: The intervention congregation experienced no weight gain, decreased waist circumference, increased exercise activities and reduced dietary fat intake.

**Maintenance:** The congregations continued their own nutrition and exercise programs after the intervention period was over.

**Lessons Learned:** A faith-based, multi-disciplined intervention that is culturally-appropriate can reduce the risk of diabetes and increase knowledge of diabetes in a Western Samoan population.

**Citation(s):**

Simmons D, Fleming C, Voyle J, Fou F, Feo S, Gatland B. A pilot urban church-based programme to reduce risk factors for diabetes among Western Samoans in New Zealand. *Diabet Med.* Feb 1998;15(2):136-142.