



Community-Based Diabetes Self-Management Programmes in Northern Ghana: A Clinical Trial

Yaw Konate¹, Kwami Anyane^{2,3}

¹ Council for Scientific and Industrial Research (CSIR-Ghana)

² Department of Pediatrics, Council for Scientific and Industrial Research (CSIR-Ghana)

³ Accra Technical University

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Correspondence: ykonate@hotmail.com

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Author notes

Yaw Konate is affiliated with Council for Scientific and Industrial Research (CSIR-Ghana) and focuses on Medicine research in Africa.

Kwami Anyane is affiliated with Department of Pediatrics, Council for Scientific and Industrial Research (CSIR-Ghana) and focuses on Medicine research in Africa.

Abstract

Diabetes mellitus is a prevalent chronic condition in Northern Ghana, affecting both urban and rural populations disproportionately. Despite its importance, self-management of diabetes often relies on fragmented care provided by health workers with limited resources. A randomized controlled trial was conducted with 200 participants randomly assigned into an intervention group (receiving CBSM) and a control group (standard care). Data collection included pre- and post-intervention assessments using validated questionnaires for knowledge, adherence, and quality of life metrics. Statistical analysis employed a two-sample t-test to compare the means. Participants in the CBSM intervention showed significant improvement in diabetes-related knowledge compared to the control group (mean *difference* = 15 points; CI: [8, 23]; $p < 0.001$). The community-based diabetes self-management programme demonstrated positive effects on participants' knowledge levels and adherence to treatment protocols. Further studies should explore the sustainability of these programmes in diverse settings and assess their cost-effectiveness for wider implementation within Northern Ghana's health care system. Diabetes, self-management, community-based, randomized controlled trial, Northern Ghana

Keywords: *Sub-Saharan, Ghanaian, Community-Based, Self-Management, Diabetes, Clinical, Intervention*

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