At just 14 years of age Kusum became the primary caregiver in her family. Her mother Binari died leaving behind Kusum, her three younger siblings and their diabetic father, Siridasa. For the family, who live in a small town in Sri Lanka’s North-West, the future was ominous.

Kusum soon discovered the difficulty of caring for her diabetic father, who is one of 1.16 million people suffering the disease in Sri Lanka. Diabetes, which is largely the result of poor diet and physical inactivity, affects every major organ system in the body and can increase the risk of heart attacks, strokes and nerve damage. While prevention is the best course of action, and can be achieved through healthy eating and regular exercise, the disease can also be managed.

Siridasa, however, was complacent. Though diagnosed with diabetes ten years ago, he often refused to attend the local clinic for regular check-ups and was unwilling to change his poor eating habits. Kusum staged an intervention. One morning, instead of bringing her father his regular sugar-laden tea, Kusum brought him his tea, minus the sugar. With a lot of resistance, Siridasa eventually gave in to the sugarless tea, and slowly moved on from a sedentary lifestyle to regular exercise. He also started attending the clinic regularly.

According to Prof. Nalika Gunawardane, WHO Sri Lanka’s technical focal point for non-communicable diseases, small behavioral changes can be immensely powerful in preventing and managing diabetes, a disease that is expected to skyrocket in low- and middle-income countries in coming years. “90% of diabetes cases are type 2 diabetes, meaning they are
largely the result of behavioral factors. By making small, positive changes and sticking to them we demonstrate the strength of our willpower,” she says. “This gives us the confidence to tackle anything, including preventing and treating diabetes.”

Dr Jacob Kumaresan, WHO Representative to Sri Lanka, says that along with promoting behavioral change, making treatment more accessible and less costly is vital. According to Kumaresan Sri Lanka has made significant gains in this regard.

“Since 2004, Sri Lanka’s Ministry of Health has integrated and expanded access to services to treat non-communicable diseases, including diabetes. Primary health care workers across the country have been trained to use the WHO Package of Essential Non-communicable Disease Interventions, which helps them detect, manage and treat NCDs, while universal health coverage has enhanced the effectiveness of these measures,” Dr Kumaresan says. “But still, we find that preventing and managing diabetes in the country has its challenges.”

In 2015, over 16 000 Sri Lankans died as a result of diabetes-related complications. The country’s ongoing epidemic has signaled the need for a more active approach. Instead of simply providing services, Kumaresan says, the health system itself has now become an agent of change. Since 2011, 700 Healthy Lifestyle Centres have been set up across the country that engage in community outreach programs and provide diabetes testing to the people.

“Community outreach clinics on leading a healthy lifestyle have been important in educating people and increasing their health literacy. We often find that people have no idea how harmful the salt in their bath (rice) can be over a lifetime, or how polished rice can affect waistlines as well as blood sugar levels,” he says. “Providing screening services at Healthy Lifestyle Centres in the government hospitals has also meant that more people have the opportunity to get tested, which is hugely important in terms of detecting the disease early.”

Innovation, both at a personal and policy level, is the key to tackling the problem, Dr Kumaresan thinks. “The changes Kusum made in her family are inspiring. So too is the way in which Sri Lanka’s Ministry of Health is bringing diabetes care directly to the people. To reverse the epidemic and remove the personal, social and economic costs it represents, we must be agile in our thinking and innovative in our approach,” he says. “We must do all we can to prevent, treat and beat diabetes.”