


Interinstitutional training on diabetes and diabetes foot management in LMIC and humanitarian settings

 PRESENTER:
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BACKGROUND:

Diabetes:

- Is the leading cause of non traumatic amputations worldwide;
- Causes up to 50% of amputations seen in the International Committee of the Red Cross (ICRC)'s physical rehabilitation centres

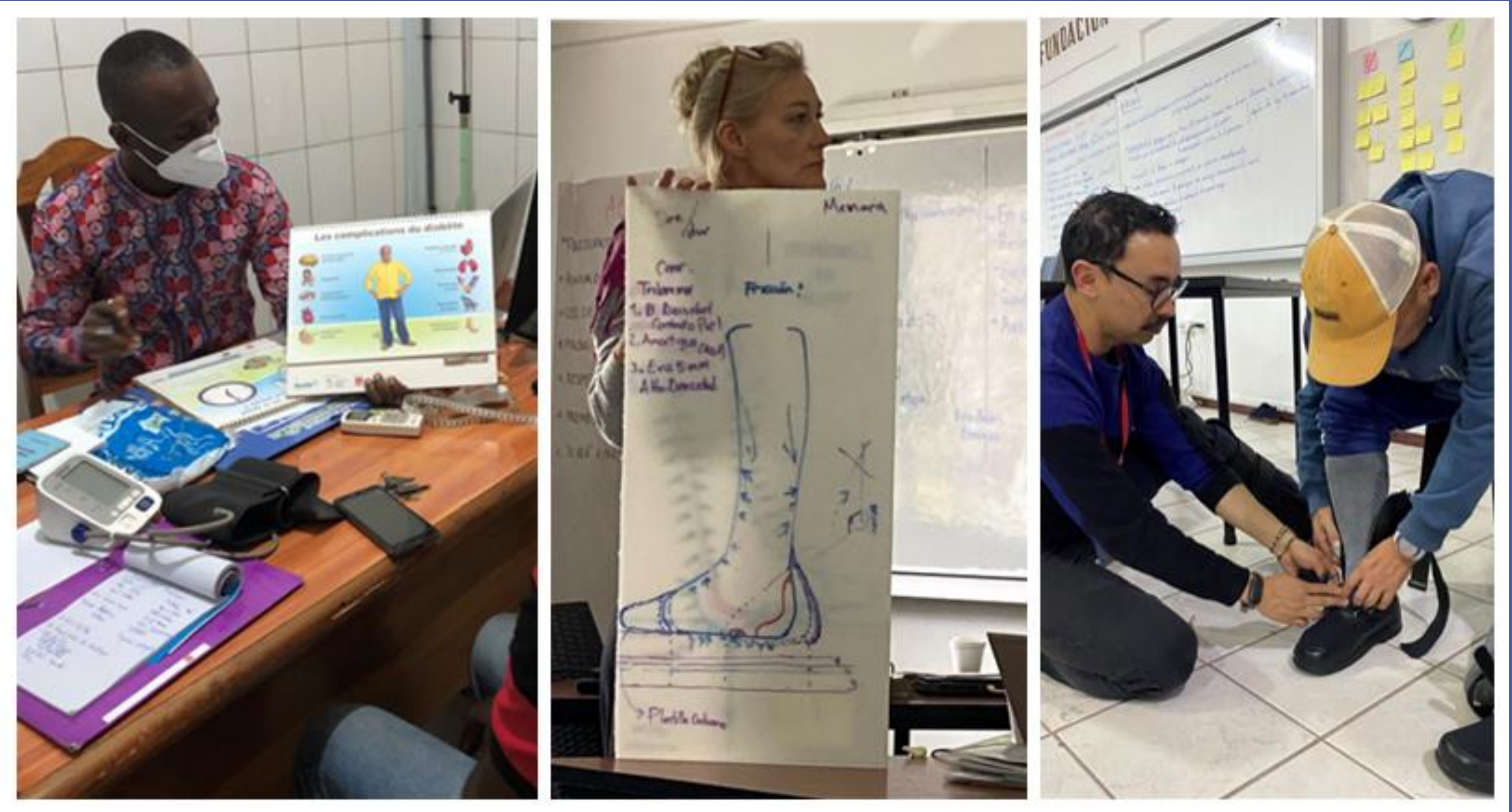
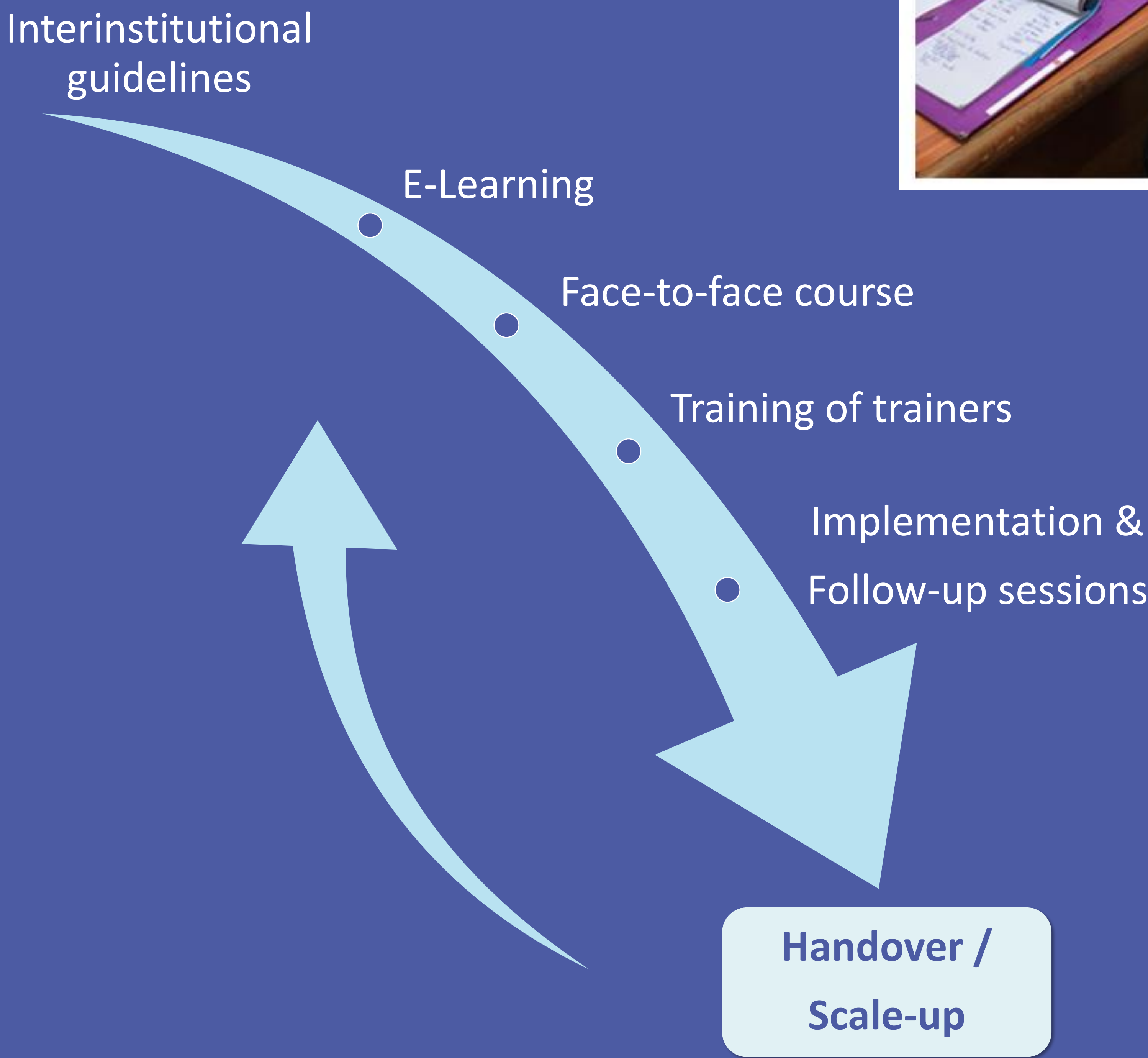
Objective:

Document implementation of guidelines and of a blended interprofessional training, and its scale up within a long-standing partnership approach by the International Committee of the Red Cross, Geneva University Hospitals, Université Numérique Francophone Mondiale and D-foot international.

METHODS

- 2020:** **Interinstitutional guidelines** were issued for nurses, doctors, mental health and rehabilitation specialists
- 2022:** A **blended training** was rolled out (e-learning, practical face-to-face training, virtual classrooms) in **Beirut** with persons from Lebanon, Syria & Iran) and in **2025 in Quito** with persons from Ecuador, Peru and Colombia.
- 2025:** **Training of trainers'** (ToT) course for transmission of knowledge and practice was provided in Ecuador.
- Replication of the face-to-face training by trainers** in Peru and Colombia.
- Evaluation by **questionnaire** of health professionals' competencies
- Analysis of patient outcomes** in the targeted facilities.

Training process



Interinstitutional collaboration within a partnership approach empowers partners to implement interprofessional care, take over and further disseminate knowledge beyond the initially targeted institutions and countries



Scan to discover the guidelines



RESULTS

- **383 people** accessed the e-learning
- **22 learners** completed the face-to-face training in **Lebanon**, **20** in **Ecuador**. **ToT course in Ecuador: 10 people** completed it.
- **Confidence increased** in interprofessional collaboration and management of people living with diabetes (5-point scale from 3.39 to 4.22); Following training, trainees reported observing **improvements in foot ulcer healing**.
- **Handover** to CRONICAS in Peru: **replication** of the training in October 2025 (30 participants); replication in Colombia by the Colombian Red Cross and ICRC (28 participants).

DISCUSSION

Longstanding international partners elaborated guidelines, completed by a blended training and supervision to change practices. Local capacity was further strengthened by a ToT, aiming at takeover.

This **interinstitutional international partnership approach** built on respective strengths facilitated training roll out and implementation of team-based care for people living with diabetes and diabetic foot..

This led to improved patient outcomes and to the training handover to local institutions for scale up.



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