**The effect of a community-based health behaviour intervention on health-related quality of life in people with Type 2 diabetes in Nepal: a Cluster-randomized Controlled Trial**

**Background & Aim**

Type 2 diabetes mellitus (T2DM) negatively impacts one’s health-related quality of life (HRQOL). Community-based health behaviour interventions are effective in T2DM management. However, little is known about their effectiveness in improving HRQOL, especially in resource constrained settings like Nepal. This study examined the effectiveness of a culturally appropriate health behavioural intervention in improving HRQOL in people with T2DM in Nepal.

**Methods**

A cluster randomized controlled trial was conducted among 481 people with T2DM from 30 randomly selected healthcare facilities in Kavrepalanchok and Nuwakot districts. The intervention group received 12 culturally tailored and group-based intervention sessions for six months through community health workers and peer supporters whereas, the control group received usual care. The primary outcomes of this study were changes in the EuroQOL (EQ5D-3L) index score and EuroQOL visual analogue scale (EQVAS) score between baseline and six-month post-intervention. The intervention effect was assessed using generalized estimating equation models.

**Results**

At six-months post-intervention, there was a positive and statistically significant effect on EQVAS score (β1=3.61, 95%CI: 0.05, 7.17) in the intervention group compared to control group. No statistically significant effect was observed in the EQ5D-3L index score (β1=0.052, 95%CI: -0.04, 0.14). A statistically significant increase in EQVAS score of 0.5 was observed per session attended by the study participants (β1=0.49, 95%CI: 0.01, 0.98). No statistically significant effect was observed for the number of sessions attended on the EQ5D-3L index score (β1= 0.005, 95%CI: -0.001, 0.01).

**Conclusion**

The health behaviour intervention led to an improvement in HRQOL. An increase in the number of intervention sessions attended was significantly associated with higher EQVAS scores, emphasizing the need for longer-term and engaging interventions that are well adhered to. Longer term assessment of change in HRQOL outcomes are needed when actual changes in HRQOL are more likely to be observed.